



2020 Community Town Halls

Facilitation Report

September 30, 2020



Children's Board
HILLSBOROUGH COUNTY

www.ChildrensBoard.org



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Acknowledgments

The Community Town Halls were completed over the course of several months starting on March 20, 2020 and ending on September 30, 2020 (a timeline is provided further along in this report).

In that timeframe, several community partners, non-profit agencies, County and City Government departments, Children's Board of Hillsborough County staffers, community residents, Children's Board Family Resource Center teams, collaborative partner agencies and individual community stakeholders came together to ensure the success of the Community Town Halls and Community Survey.

Before proceeding, we would like to specifically acknowledge the efforts of the following people, without their contribution none of this would have been possible.

- Children's Board of Hillsborough County Executive Director, Kelley Parris
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- Children's Board Family Resource Center Managers and their respective teams
- Resource Support Partner, 200 Muslim Women Who Care
- A special thank you to New Hope @ the Cornerstone in Plant City for graciously providing space for our East County Community Town Hall



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Executive Summary

The **Community Town Halls** were successfully facilitated in each of seven (**7**) *regions* across the county, engaging, seventy-one (**71**) unique participants both virtually and in-person. Additionally, the **Community Survey** served as a successful tool for gathering family specific county-wide data and providing an additional level of resident engagement and successfully garnered two hundred ninety-seven (**297**) unique respondents. The data captured from both community engagement opportunities offers a better understanding of what families across the county need in support of their own success.

Information gathered from the three hundred sixty-eight (**368**)-total community-engaged residents living in Hillsborough County represent **all age groups** and reflects input from all fifty-three (**53**) Hillsborough County Zip codes. There were four (**4**) methods used to capture and present community data findings throughout this report.

- Community Town Hall Data Presented **by Category**
- Community Town Hall Data Presented **by Community**
- Community Town Hall Data Presented by **Social Determinants of Health Domain Summary**
- **Community Survey Data**

Three (**3**) primary methods were used to organize and assess the data presented throughout this report.

Social Determinants of Health

The *Social Determinants of Health (SDoH)* is a model that categorizes the ¹*conditions in the environments where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks* for a given community.

Each of the **SDoH** categories are represented by five determinant areas or “*Domains*” and reflect a number of key issues or subcategories that make up that domain. The **SDoH Domains** include:



Each of the five (**5**) Domains listed above represent a grouping of subcategories identified as part of and specific to the comments made during the Community Town Hall facilitation process.

For example: the **SDoH** Social and Community Context Domain (right) reflects the following subcategories as identified by Community Town Hall data: 

-
- The diagram shows a vertical list of subcategories for the 'Social and Community Context' domain. The subcategories are: 'Structural Deficiencies', 'Resource Awareness', 'Community Childcare Activities', 'Socialization', 'Traditions', and 'Programs'. A vertical line on the right side of the list is labeled 'Subcategories'.

¹ <https://www.cdc.gov/socialdeterminants/index.htm>

Tiered Priority Standard

Each category is reflected according to a **Tiered Priority Standard** (TPS) beginning with Priority **Tier I** serving as the greatest need expressed by the combined Community Town Hall responses and ending with Priority **Tier III** serving as the least expressed needs. Each of the tiered-priority categories have a corresponding number determined by the **TPS Calculation** used to establish priority and explained in further detail in this report.

Success Indicators

Success Indicators are the positive feedback statements and other responses provided for each Community Town Hall category mentioned. These are Community Town Hall participant responses when asked the guided facilitation question, “What does success look like six (6) months to a year from now for yourself, your children or your household?”.

Community Town Hall data presented by Category reveals *success indicators* or positive statements made at each Community Town Hall. The four (4) categories include *Children’s Success, Parent’s Success, Healthy/Successful Household and Barriers to Success*. These indicators of success are reflected using a *Tiered Priority Standard* which includes **Tier I, Tier II and Tier III Priorities**. The following is a summary of **Tier I** Priorities per category as part of this section.

The **Children’s Success** category noted **Educational Access** as the greatest **Tier I** priority among families. Educational access for children according to their families focused specifically on:

1. *Understanding virtual environments for learning;*
2. *Maintaining consistent internet and Wi-Fi connections; and*
3. *General and technology computer access.*

These served as the major success indicators for children according to their families. Secondly noted as part of the education-related responses was that of additional academic supports such as:

1. *Tutoring; and*
2. *Programs that focused on study skills.*

Additional **Tier I** priorities among children as defined by their parents include:

- **Emotional/ Mental Health** consisting of *overall mental stability; mental stimulation through play and other activities; access to therapy and other emotional management techniques;*
- **Environment / Location / Spaces** consisting of *access to physical environments like parks and other outdoor activities; understanding of and access to community/neighborhood-specific support; safe social spaces that encourage healthy interaction;*
- **Socialization** consisting of *healthy socialization through playdates and other social interaction activities; safe and healthy environments for social interactions; and anti-bullying prevention strategies; and*
- **Physical Health** consists of *exercise classes and sports teams, healthy physical play and access to physical recreation activities and events.*

The **Parent's Success** category identified **Self-Care** as the primary **Tier I** success indicator among parents. Specifically noted throughout the town hall discussions regarding self-care were:

1. *An attitude of positive self-worth, self-awareness and self-efficacy;*
2. *Intentional time for self, for activities like reading and spiritual growth; and*
3. *Opportunities for work life balance and physical self-care like enough sleep and eating healthier.*

These served as the success indicators most important to parents for this **Tier I** Priority.

Also notes among Parent Success **Tier I** priorities:

- **Skills Development** consisting of *general parenting education and classes, business-related development focused on workforce skills and business and entrepreneurial development, life skills such as conflict resolution, financial literacy, communication, CPR and nutrition classes;*
- **Emotional/Mental Health** consisting of *access to addiction services, support groups and mental health counselors, awareness of our own mental health with Individual strategies for reducing stress and anxiety, opportunities to positively feed our mental health like doing positive things for others;*
- **Physical Health** consisting of *actual physical activity and exercise through sports and other physical fitness activities, access to health screenings and other health-related services, proper nutrition and healthy eating habits; and*
- **Education** consisting of *educational access to include post-secondary schools and other educational institutions vocational/technical schools, parental guidance for understanding the education system today to include financial aid and other available resources.*

The **Healthy/Successful Household** identified **Household Behaviors** as the primary **Tier I** subcategory for a healthy household. Household behaviors were specifically focused on:

1. *Everyone in the household exhibiting general respect and overall consideration for everyone else in the home;*
2. *Healthy communication among families to include listening skills and other aspects of healthy conversations; and*
3. *Conflict resolution as a communication strategy.*

Other Healthy Household Success Indicators noted in **Tier I** priorities include:

- **Household Traditions** consisting of *eating meals together as a family; structured and limited TV and technology time and positive intergenerational interactions like intentional conversations, playing games together and praying together;*
- **Household Structure and Responsibility** consisting of *household rules such as sharing chores and responsibilities associated with taking care of the home, less technology including over family meals and an overall sense of routine and healthy discipline;*
- **Support Systems** consisting of *family visioning to include goal setting and similar family visioning and direction; family dynamics to include leadership and teamwork and mechanisms of internal and external family support recognizing and celebrating family achievements and successes; and*
- **Activities** consisting of *physical activities like exercising together and other recreational activities were important for many of the families; opportunities for social interaction including cultural and social engagement as well as game nights and creative intergenerational activities like arts and crafts.*

Community Town Hall data presented by Community summarizes the *success indicators* or positive statements made at each Community Town Hall and organized by the **Social Determinants of Health Model Domains** and **Subcategories** (in **bold** below). The following executive summary per Community serves as brief capture of data gathered and reflected in this section.

Brandon

(continued on page 41)

Having time for physical health-related activities and prioritizing **Physical Health** appears to be the greatest challenge to overcome for Brandon families. Although families may be struggling with committing to consistent physical activity, most Brandon families feel physically healthy to somewhat physically healthy. **Self-Care** was noted as a parent-only issue with time, personal space and peace of mind anchoring that care. Many Brandon families are being impacted mentally by the pandemic with the majority of families seeing **Mental Health** support as important to the success of their family. A sizable number of Brandon families would like to see more **Health and Nutrition** programming and parenting workshops offered.

Opportunities for **Social Interaction** for Brandon families both for adults and children are important to the success of their families. Although there are genuine concerns around in-person interactions due to Coronavirus, opportunities should still be created for families to continue building community in safe and healthy ways. Creating virtual and in-person opportunities for families and specifically their children to maintain positive social interactions is important. Equally as important however, is the method by which that information is shared, as many families are still unable to find information on community-based social interaction events and activities in and around their community.

Central Tampa

(continued on page 47)

Although most Central Tampa families may consider themselves healthy, many would still like to see an increase in **Physical Health** programs and other exercise-related activities. Families would like to see an increase in access to **Mental Health** supports provided by mediators, counselors and other support group-type models. Many Central Tampa families see the systemic or **Structural Deficiencies** in the world around them with particular focus on racism and the long-term implications of incarceration. There is significant value for Central Tampa families to create and maintain healthy levels of **Socialization** throughout their community.

Many Central Tampa families see more **Employment** barriers than they see opportunities for them to secure stable employment which further hinders their ability to secure **Financial Stability**. Central Tampa families would like to see more opportunities made available for **Skills Development** including parenting and workforce development. **Access to Resources** is a major concern for families in Central Tampa especially among parents in crisis. **Safety** is important for families living in Central Tampa not only in the home but throughout the community and neighborhood in which they reside.

East County

(continued on page 51)

East County families would like to see more **Mental Health** supports in their community. **Physical Activity** is both important and challenging for families in East County given limited available resources throughout the community. Many families continue to have **Technology Accessibility** challenges including access to computers and consistent internet. **Access to Resources** outside of their community, continues to be burdensome for many families with limited **Transportation** and other mobility challenges. Noted as part of the discussion was the recognition of increased services needed throughout the community. The

perception among Community Town Hall participants was that, as the demand for services in Central Hillsborough County increases, service delivery in East County continues to decrease.

East County families are unfamiliar with the resources available to them while also attempting to manage the barriers when attempting to access those resources. East County families appreciate existing household **Traditions** like family meals with intentional conversation and game nights throughout their community and in their homes. It was also noted that anyone who would like to engage this community should understand and honor the tradition-centered, community-based culture.

North Tampa

(continued on page 55)

North Tampa families feel most strongly about the **Built Environment** in which they live and would like to see not only new structures added to the landscape like additional lighting, bike lanes and benches but would also like to see repairs to worn, outdated or significantly damaged infrastructure like current streets and sidewalks. North Tampa families want to feel a real sense of **Safety** in their homes with enough **Physical Space** for them to get time for themselves. **Education** standards for children are a real concern for parents as well as access to the educational supports needed for their children to succeed.

North Tampa families see opportunity in their own growth and development and would like more opportunities for **Skill Development** in workforce training, business education and job training as well as financial literacy and budget management. Families appear to acknowledge the importance of **Self-Care** but lack the time necessary to focus on themselves. **Socialization** is important to families in North Tampa but their greatest concern is making sure that their kids are still given opportunities for them to socialize in safe spaces and in healthy ways. Families enjoy at home family activities for increased intergenerational socialization.

South County

(continued on page 59)

South County families recognize the importance **Mental Health** has on the whole family and would like to see increased mental health resources while ensuring that these resources are provided in multiple languages. Parents care about the **Physical Health** of their families and themselves but may lack access to healthier food options and physical activities in and around their community. Families would like to see more youth leadership and **Afterschool Programs** specifically targeted to the South County areas for their children.

Families want opportunities for healthy **Socialization** for their children and access to support group-style engagements for parents. The greatest **Technology** challenge for families in South County is consistent Wi-Fi or internet access. South County families care about overall **Safety** in their community within their **Neighborhood and Built Environment** but want to also make sure that the spaces their families enter are also safe for them. This is especially true for women and community residents with mixed immigration status. Families are concerned about their own **Financial Stability** with needs focused on **Skills Development** specifically in the areas of education, life skills, workforce and finance literacy for kids and parents.

Temple Terrace

(continued on page 63)

Temple Terrace families care about their **Physical Health** and would like to see more health-related resources made available that would allow them to better manage their own health and that of their families. **Mental Health** supports have also been acknowledged as an important part of the overall health

of their household and families. They would like to see more access to mental health professionals. Temple Terrace families want **Skills Development** in several areas including workforce, parenting, financial literacy, and home economic-type skills.

Some families will continue to struggle with **Resource Access** if resource information isn't shared in multiple languages. Families want to see **Programs** for youth available in multiple locations throughout the community. This need for increased youth programs should make sure to include middle school aged children from 10-12 years of age. Temple Terrace families would like more **Healthy Nutrition Access** to nutrition-specific opportunities or resources like vitamins, healthy food options and easy access to fresh fruits, vegetables and consumable goods.

Town 'N Country

(continued on page 67)

Town 'N Country families acknowledge the impact their own **Parenting Behaviors** can have on the success of their home and want to continue to manage their homes with love, compassion and respect. Families want access to good quality education for their children as well as **Resource Access** to services for families that may be struggling with addiction or abuse. Families want to ensure that overall access to **Education** for themselves and their children is made a priority as it is critically important to the success of their family.

Families would like to increase their **Skills Development** utilizing various workshops and training opportunities especially those that will support them becoming better parents. Town 'N Country families want to be able to navigate the various virtual learning environments that are required of them now during the pandemic. Town 'N Country families want to continue to see safe spaces for healthy **Social Interactions** both for their children and for themselves. Families are facing many barriers to their own **Financial Stability** including domestic violence, increased housing and living costs, underemployment and significant language barriers.



Children's Board of Hillsborough County

The mission of the Children's Board of Hillsborough County is to invest in partnerships and quality programs to support the success of all children and families in Hillsborough County.

The vision, mission, and goals of the Children's Board of Hillsborough County is guided by the following core values:

INTEGRITY

Demonstrating honesty and sincerity in all of our dealings.

Upholding only the highest ethical principles.

Making decisions that reflect the highest standards of proper stewardship and accountability of resources.

EXCELLENCE

Projecting professionalism in everything we do.

Being accountable for our actions.

Delivering every product and service in an outstanding manner.

Developing a quality workforce.

Showing pride in our efforts and the community in which we live and work.

TEAMWORK

Working in full cooperation and mutual support that inspires trust, loyalty, and respect to achieve a common goal.

Creating and maintaining a spirit of service.

RESPECT

Showing consideration or regard for an individual or institution.

Assessing all people on their merits.

Valuing diversity and accepting individual differences.

Statement of Intended Purpose

The Children’s Board of Hillsborough County (CBHC) regularly seeks feedback from the citizens of Hillsborough County through community engagement and Town Hall meetings; review of local data and research; stakeholders and from members of CBHC-funded agencies.

The CBHC in contracted partnership with **16 Point Compass Consulting, LLC.** completed the facilitation of seven (7) Town Hall meetings throughout Hillsborough County in anticipation of major funding releases in 2022 in an effort to reach the desired results in Children’s Board focus areas with programs that meet the needs of children and their families on a micro and macro level.

The Town Hall meetings took place at the Children’s Board Family Resource Centers (with the exception of East County due to relocation) in Brandon, Central Tampa, North Tampa, South County, Temple Terrace and Town ‘N Country.

Statement of Applied Processes

Seven Regions of Community Focus for the Community Town Halls

The Community Town Halls were conducted in the seven (7) Children’s Board Family Resource Center-communities throughout Hillsborough County.

Represented by Brandon, Central Tampa, East County, North Tampa, South County, Temple Terrace, and Town ‘N Country, these seven (7) regions include areas of the County where the needs of families were identified and opportunities for success secured in collaborative partnership with area agencies.

Data Sources

The *2020 Community Town Halls Facilitation Report* represents data gathered from multiple sources in addition to the seven (7) Community Town Halls.

Additional information was captured, processed, and analyzed from the following sources in the formulation of this report:

- A fifty-five (55) question Community Survey implemented in both English and Español and made available in both paper and digital formats (found online at www.CBHC2020.com);
- Community Research data gathered on behalf of each of the seven Community Town Hall-engaged communities;
- Informal conversations with community members and other community stakeholder; and
- Information shared by each of the Children’s Board Family Resource Centers.

Acronyms of Note

- **CS** - Community Survey Data
- **CTH** - Community Town Hall Engaged Communities
- **CBFRC** - Children’s Board Family Resource Center
- **CBHC** - Children’s Board of Hillsborough County
- **SDoH** - Social Determinants of Health



Statement of Applied Processes

Coronavirus Acknowledgement

The Community Town Halls began with the intended purpose outlined above and with a timeframe that would begin in early March. At the same time, concerns regarding the Coronavirus pandemic were increasing. Once the pandemic began to spread internationally, adjustments to both the timeline and the implementation strategy were necessary.

In an effort to continue moving forward with engaging the community in real and meaningful ways, while also ensuring the highest level of safety for Hillsborough County families, the following changes were made to our implementation strategy:

- Town Hall implementation was moved from an anticipated start month of April to a start month of July.
- More intentional effort was put into gathering data digitally through the online community survey tool and paper surveys (www.CBHC2020.com).
- Partnerships intended to provide resources to families, collect and distribute surveys and promote the community town halls were eliminated, reduced or adjusted to reflect digital engagement only.
- A higher reliance was placed on social media and other digital platforms for increased engagement.
- All in-person Community Town Hall capacities were adjusted to reflect Children's Board Family Resource Center (CBFRC) spaces that allowed for 6-foot social distancing during each Community Town Hall.
- A virtual component was added to all Community Town Halls to provide resident opportunities for safe community engagement.
- All in-person Community Town Hall participants were required to wear a mask for the duration of the town hall, remained seated and completed a temperature check and health questionnaire before entering.
- The Town Hall facilitation process was adjusted considerably to acknowledge the immediate impact the coronavirus was having on families, while also gathering data that reflected a more "post-covid" reality. The following statement was made at beginning of each Community Town Hall.

"The world is changing due to Coronavirus. Sure, there will eventually be a post-coronavirus world, but the reality is that it will be with us for a long time. We are not certain about the long term effects Coronavirus will have on our daily lives, so our hope today is that we will continue the conversation about the future of our families, looking ahead at when we have a vaccine, we are recovering or have learned more about how to prevent and reduce the spread of Coronavirus."

Statement of Applied Processes

Success Indicators

Success Indicators are the positive feedback statements and other responses provided for each Community Town Hall category mentioned. These are Community Town Hall participant responses when asked the guided facilitation question, “What does success look like six (6) months to a year from now for yourself, your children or your household?”.

Tiered Priority Level

Each facilitation category is presented according to a **Tiered Priority Level** beginning with Priority **Tier 1** serving as the greatest success indicator expressed by the combined Community Town Hall responses and ending with Priority **Tier 3** serving as the least expressed success indicator. Priority levels were determined using the **Tiered Priority Standard** calculation (explained below). *Tiered Priority Levels were used primarily in the “Community Data Presented by Category” Section of this report.*

Tiered Priority Standard

Each of the tiered-priority levels were determined according to a **Tiered Priority Standard** (TPS) calculation used to establish priority of success indicators (*statements made*). The **TPS** calculation presented as a **TPS Score** was conducted as follows: each category-specific statement (success indicator) made was added together and multiplied by the number of Community Town Hall-engaged communities that added to that category. For example:

*The Category like **Social Interaction** may have been mentioned twelve (12) times in total but only among three (3) CTH-engaged communities would score a thirty-six (36) whereas a category like **Education** that may have been mentioned nine (9) times in total but was brought up in all seven (7) CTH-engaged communities would score a sixty-three (63).*

The simple calculation is: # of statements made X # of communities that made the statement = TPS Score

*Although the number of times a specific statement was mentioned is important, the extent to which the category applies to the highest number of CTH-engaged communities increases its value significantly. **Simply put, the more communities that bring it up, the more widespread the concern.***

The Tiered Priority Standard was used primarily in the “Community Town Hall Data Presented by Category” Section of this report.

Findings

Findings throughout this report are described as the “*presentation of analyzed and processed data specific to a defined data set*”. *Simply, put this is what the raw data has told us.*

Statement of Applied Processes

Social Determinants of Health

The *Social Determinants of Health (SDoH)* is a model that categorizes the ²*conditions in the environments where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks* for a given community.

Each of the **SDoH** categories are represented by five determinant areas or “*Domains*” and reflect a number of key issues or subcategories that make up that domain. The **SDoH** Domains include:

- Neighborhood and Built Environment
- Health and Health Care
- Social and Community Context
- Education
- Economic Stability

Each of the five (**5**) Domains listed above represent a grouping of subcategories identified as part of and specific to the comments made during the Community Town Hall facilitation process.



Social Determinants of Health Domains – HealthyPeople.gov

For example: the **SDoH** Social and Community Context Domain - reflects the following subcategories as identified by Community Town Hall data:

- Community
- Childcare
- Activities
- Socialization
- Traditions
- Programs
- Resource Awareness
- Structural Deficiencies

Some of the Domain Subcategories may be specific to a certain community or reflect the concerns of one category. For example:

*The sub-category of **Self-Care** was only found in the **Parent Success** findings when sorted out by categories of **Children’s Success, Household Success** or **Barriers**.*

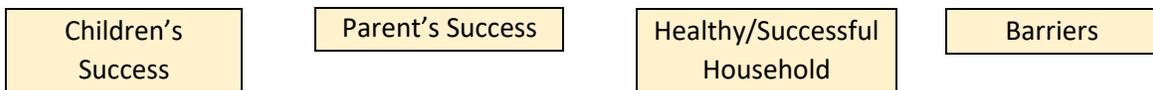
² <https://www.cdc.gov/socialdeterminants/index.htm>

Presentation of Report Findings

Two primary methods will be used to present the assessed data and subsequent findings throughout this report. Each presentation method will be reflected in its own section. The following is a brief explanation of the primary presentation sections.

Community Town Hall Data Presented by Category

This section of the report will show you the collective family responses from all seven (7) Community Town Halls broken out by the four distinct categories-of-focus used during the Community Town Hall facilitation process. Essentially answering the question “*What do insert category here need to be successful?*” The four categories include:



Once segregated by the four (4) categories listed above, the data was then compiled into domains using the **Social Determinants of Health** model (explained previously) and reflected in tiered priority levels using the **Tiered Priority Standard** calculation (also explained previously). This helps to prioritize which statements apply to the most people in each category across the county. For example:

*The **number one indicator of success for Children across the county** (according to Community Town Hall data) is **Educational Access**.*

Community Town Hall Data Presented by Community

This section of the report will show the compiled and analyzed Community Town Hall data per *Children's Board Family Resource Center* communities noted above and reflected using the **Social Determinants of Health** (SDoH) model.

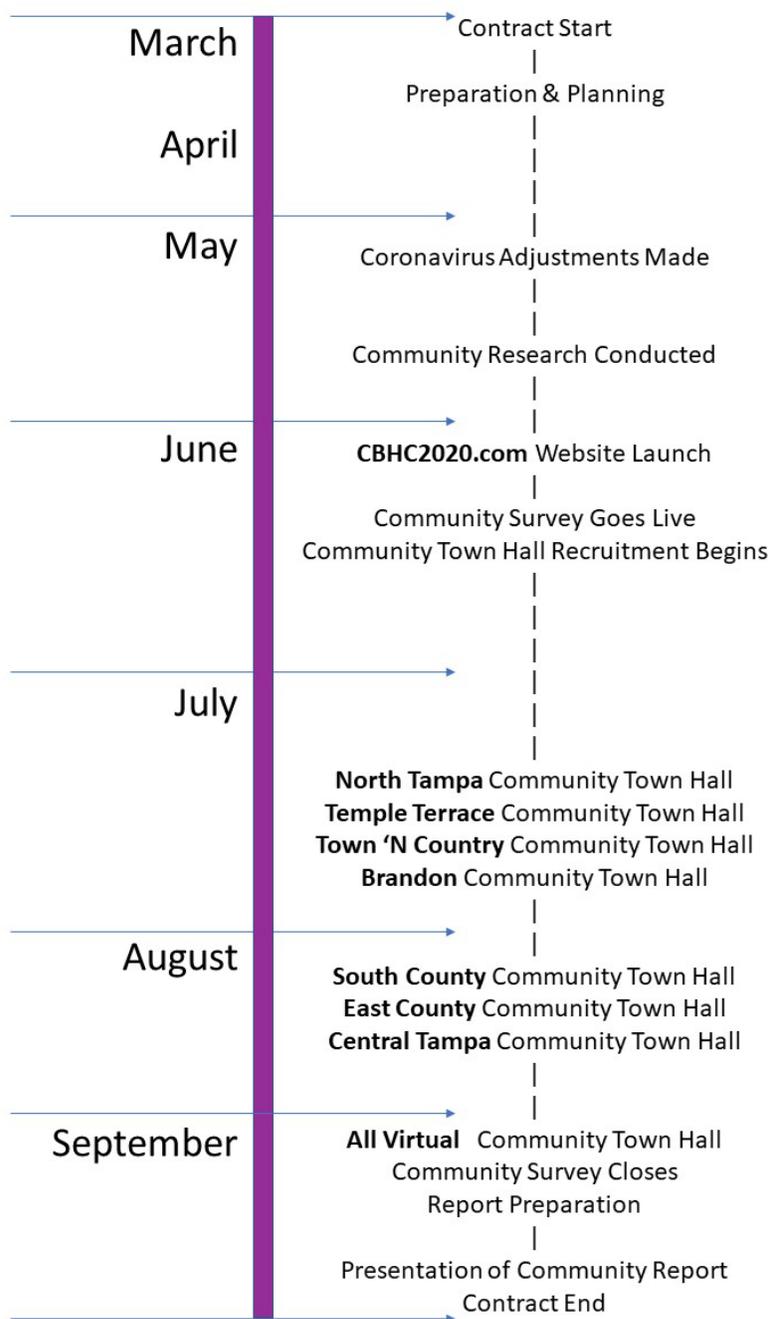
Each Community will consist of a set of subcategories per **SDoH** Domain that may apply to all seven (7) communities or just one. A color key is provided at the beginning of this section that will explain how to read the document. Key takeaways are also included at the end of each community section.

Timeline

The following timeline (*at right*) represents the main contract actions associated with and encompassing the planning, coordination, training, recruitment, facilitation, and report development of the Community Town Halls Facilitation process.

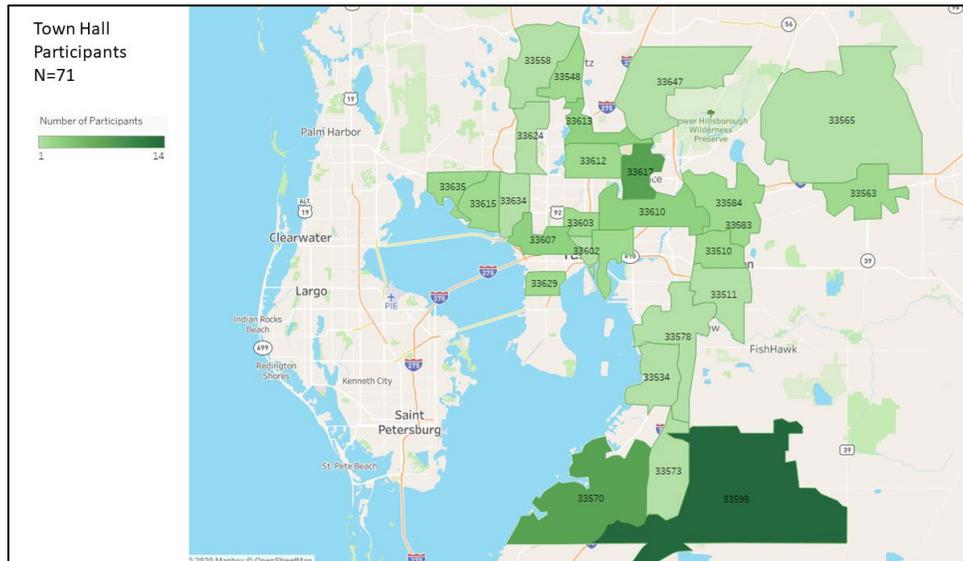
Each segment of the timeline consisted of a series of actions conducted by **16 Point Compass Consulting**, with oversight from the **Children’s Board of Hillsborough County** and in partnership with the local **Children’s Board Family Resource Centers**.

The timeline is inclusive of adjustments made to the initial timeline due to Coronavirus concerns and CDC requirements.



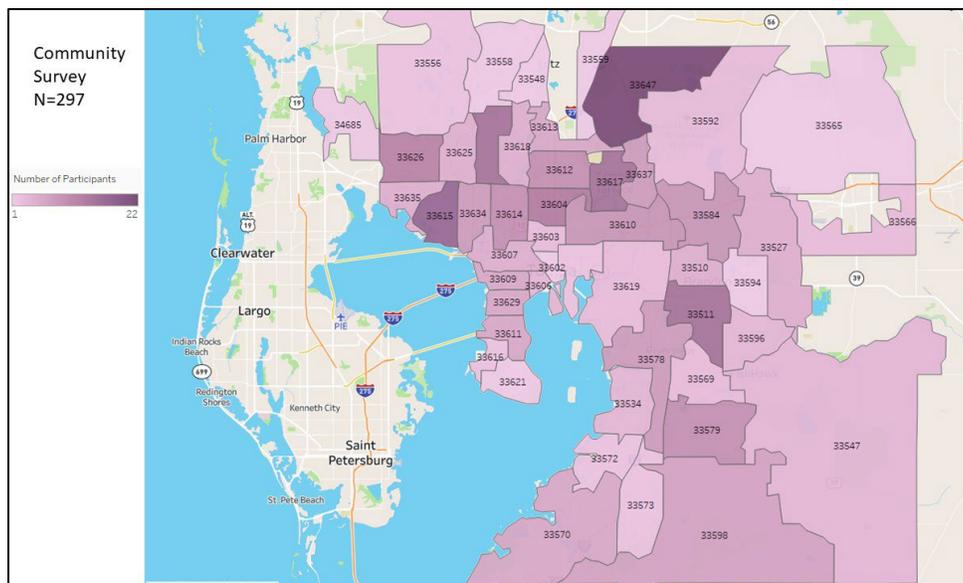
Zip Code Mapping of Community Engaged Participants

Seventy-one (**71**) Community Town Hall participants represented the seven (**7**) communities by which CBFRCs are found. *Map 1.1* (below) reflects Community Town Hall participants per zip code with darker colors representing more participants from those unique zip codes.



Map 1.1

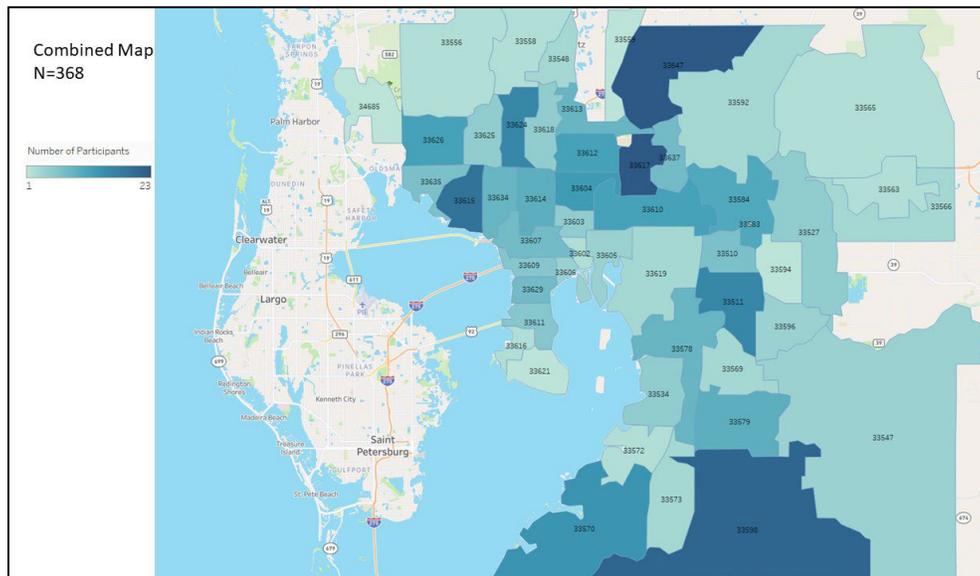
Two hundred ninety-seven (**297**) Community Survey respondents represented forty-nine (**49**) of the fifty-three (**53**) zip codes found within Hillsborough County. *Map 1.2* (below) reflects Community Survey participation per zip code with darker colors representing more participants from that unique zip code.



Map 1.2

Zip Code Mapping of Community Engaged Participants

Seventy-one (71) Community Town Hall participants combined with two hundred ninety-seven (297) Community Survey respondents reflects Hillsborough County-wide participation of three hundred sixty-eight (368) community-engaged Hillsborough County residents covering all fifty-three (53) Hillsborough County zip codes. *Map 1.3* (below) shows all zip codes at varying levels of combined engagement with darker colors indicating higher level of participation from that unique zip code. (the darker the color the more people from that zip code were represented either in their participation of the Community Town Halls or in their completion of the community survey).



Map 1.3

Demographic Data of Community-Engaged Participants

Community Town Hall Participants (=65 of 71 Captured)

Gender/Sex	
Female:	57
Male:	8

Age	
Minor:	4
18-24:	4
25-34:	13
35-50:	26
51-100:	15
No Mention:	3

Primary Language	
Español:	14
English:	46
Bi-Lingual:	5

Race Ethnicity	
Asian:	2
Black/African American:	17
Mixed/Bi-racial:	1
White:	30
Prefer Not to Say:	14
Other:	1

Hispanic or Latin Decent	
Of Hispanic/Latin Decent:	*33
Prefer not to Say:	2

* Of the 33 participants that identify as Hispanic or Latin, 21 identify as White, 2 identify as Black / African American and 10 preferred not to say.

Community Town Hall Participants (=297 Respondents)

Gender/Sex	
Female:	258
Male:	37
No Response:	2

No additional demographic data was collected as part of the Community Survey submission process.

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COMMUNITY TOWN HALL DATA PRESENTED BY CATEGORY

The facilitation process for each Community Town Hall (CTH) focused on four (4) distinct categories with subsequent questions serving as the lead-in for each conversation. The goal of each conversation was to identify the success indicators most associated with participant’s future child, parent or household success.

Children’s Success

“What does success look like for your Children six (6) months to a year from now after Coronavirus is better managed?”

Parent Success

“What does success look like for you as a parent six (6) months to a year from now after Coronavirus is better managed?”

Healthy Household

“What does your healthy and successful Intergenerational household look like?”

Barriers

“What barriers get in the way of our collective success?”

The following information is presented on a tiered-priority scale and represents the aggregate or collective capture of all Community Town Hall data.

Each category is reflected according to a **Tiered Priority Standard (TPS)** beginning with Priority **Tier I** serving as the greatest need expressed by the combined Community Town Hall responses and ending with Priority **Tier III** serving as the least expressed needs.

Each of the tiered-priority categories have a corresponding number determined by the **TPS** calculation used to establish priority. The **TPS** calculation was conducted as follows: each category-specific statement made was added together and multiplied by the number of CTH-engaged communities that added to that category. For example:

A category that was mentioned twelve (12) times but only among three (3) CTH-engaged-

communities would score a thirty-six (36) whereas a category that was mentioned seven (7) times but was brought up in all seven (7) CTH-engaged communities would score a forty-nine (49).

Although the number of times the category was mentioned is important, the extent to which the category applies to the number of CTH-engaged communities adds significant value as the communities impacted by the stated category increases. Simply put, the more communities that bring it up, the more widespread the concern is and the higher up they moved among the tiered priorities.

Additionally, individual statements reflecting more than one category were included in each intended category noted. For example: *“Emotionally and physically healthy”* was captured in both the physical health AND emotional mental health categories.



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CHILDREN'S SUCCESS

Children's Success Priorities

Table 1.1

There were one hundred forty-eight (**148**) statements regarding Children's Success that were made throughout the seven (**7**) Community Town Halls.

Of the one hundred forty-eight (**148**) statements regarding the future success (reflected as success indicators) of the Community Town Hall participants' children, the following tiered priorities were identified and are reflected in **Table 1.1 – Children's Success Priorities**.

Tier I	Education Access	161
	Emotional / Mental Health	91
	Environment / Location / Spaces	84
	Socialization	78
	Physical Health	78
Tier II	Self-Drive	66
	Technology	56
	Attitudes and Behaviors	55
	Family Dynamics	45
	Programs	36
Tier III	People Supports	32
	Food/Nutrition	30
	Safety	24
	Resources	15
	Financial Literacy	12

TIER I PRIORITIES

Education served as the overwhelming success indicator brought up by families across all seven (**7**) CTH-engaged communities and reflecting the highest **TPS** score of one hundred sixty-one (**161**). Specifically, access to high quality education and educational services were noted as the major indicators for their Children's success.

A portion of education-related responses focused on mitigating technology limitations through:

- (1) *Understanding of virtual learning environments;*
- (2) *Consistent internet/Wi-Fi; and*
- (3) *General computer access.*

Secondarily noted as part of the education-related responses was that of additional academic supports and other out-of-school time education-related activities including:

- (1) *Tutoring; and*
- (2) *Programs that focus on study skills.*

Emotional / Mental Health served as the 2nd **Tier I** priority with a **TPS** score of ninety-one (**91**) and represents all seven (**7**) CTH-engaged communities. Success indicators regarding their child's mental and emotional health most noted by families included:

- (1) *Overall emotional and mental stability;*
- (2) *Mental stimulation through play and other activities; and*
- (3) *Access to therapy and other emotional management techniques.*

Environment / Location / Spaces served as the 3rd priority among **Tier I** categories with a **TPS** score of eighty-four (**84**) and represents all seven (**7**) CTH-engaged communities. This category was noted by all seven communities and focused specifically on:

- (1) Access to physical environments like parks, bike lanes and other outdoor activities;
- (2) Understanding of and access to community/neighborhood specific supports; and
- (3) Safe social spaces that encourage healthy interaction.

Socialization was recorded as a **Tier I** Priority 4 with a **TPS** score of seventy-eight (**78**) and was noted among six (**6**) of seven (**7**) CTH-engaged communities. Specifically, families noted the value of socialization through:

- (1) Healthy socialization through playdates and other social interaction activities;
- (2) Safe and healthy environments for social interactions; and
- (3) Not being bullied / bullying prevention strategies.

Physical Health rounds out the **Tier I** priorities with a **TPS** score of seventy-eight (**78**) and was noted among six (**6**) of the seven (**7**) CTH-engaged communities. Responses focused primarily on Children's overall bodily health through

- (1) Exercise classes and sports teams;
- (2) Healthy physical play; and
- (3) Access to physical recreation activities and events.

TIER II PRIORITIES

Self-Drive and determination serves as the beginning of **Tier II** priorities and is represented by a **TPS** score of sixty-six (**66**). Self-drive was noted by six (**6**) of the seven (**7**) CTH-engaged communities. The success indicators most often noted by families regarding their children's individual behaviors included:

- (1) High self-esteem, sense of self-worth and opportunities to build confidence;
- (2) Self-motivated hard worker; and
- (3) Proper planning and Resourceful.

Technology was noted by families as a significant success indicator for their children's overall success and were reflected in all seven (**7**) communities. The statements centered around the following:

- (1) Access to internet/Wi-Fi;
- (2) Technology hardware and software; and
- (3) Successfully navigating social media and other virtual platforms.

Attitudes and Behaviors was represented at five (**5**) of seven (**7**) CTH-engaged communities with families associating their Children's success with the attitudes and behaviors of:

- (1) Being respectful to others and to self;
- (2) Having strong values and morals including honesty and courteousness; and
- (3) Living a happy and positive life.

Family Dynamics was represented across five (**5**) of seven (**7**) CTH-engaged communities. Future success indicators noted by families included:

- (1) Healthy and happy family;
- (2) Stable parent involvement and supervision; and
- (3) Positive family interactions and support.

Programs served as the last category in **Tier II** representing four (4) of seven (7) CTH-engaged communities. Program-specific success indicators noted included:

- (1) Access to out-of-school time programming including afterschool, before school and summer;
- (2) Arts, sports and music specific programs; and
- (3) Youth programs for middle school-aged children.

TIER III PRIORITIES

People Supports at a **TPS** score of thirty-two (32) with success indicators reflecting access to parents, social workers, mentors, counselors and others.

Food / Nutrition at a **TPS** score of thirty (30) with success indicators reflecting access to sufficient amounts of healthy food.

Safety at a **TPS** score of twenty-four (24) with success indicators including bike lanes and traffic safety and an overall safe and healthy community.

Resources at a **TPS** score of fifteen (15) with success indicators associated with access to general resources like clothing, transportation and healthcare.

Financial Literacy at a **TPS** score of fifteen (15). Success indicators reflected an overall focus on financial literacy skills including budgeting and money management.

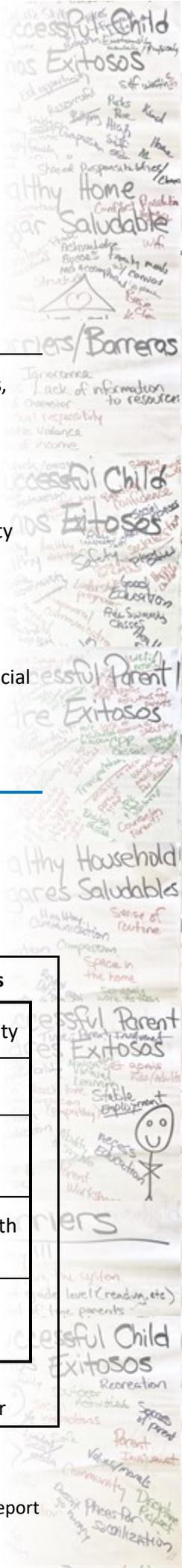
SOCIAL DETERMINANTS OF HEALTH – CHILDREN’S SUCCESS

Table 1.2 below represents the tiered priorities for **Children’s Success** listed above and incorporates each category into the Social Determinants of Health model.

Children’s Success per Social Determinants of Health

	Tier I Priorities	Tier II Priorities	Tier III Priorities	SDoH Domains
Children Success			* Financial Literacy (12)	Economic Stability
	* Education (161)			Education
	* Socialization (78)	* Family Dynamics (45) * Programs (36)	* People (32)	Social and Community Context
	* Physical Health (78) * Emotional / Mental Health (91)			Health and Health Care
	* Environment / Location / Spaces (84)	* Technology (56)	* Food/Nutrition (30) * Safety (24)	Neighborhood and Built Environment
		* Self Drive (66) * Attitudes & Behaviors (55)	* Resources (15)	Individual Behavior/Other

Table 1.2





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PARENT'S SUCCESS

Parent's Success Priorities

Table 1.3

Tier I	Self-Care	112
	Skills Development	95
	Emotional / Mental Health	84
	Physical Health	80
	Education	70
Tier II	Financial Stability	70
	Parenting Behaviors	55
	Employment	55
	Parent Supports	45
	Resources	36
Tier III	Environment / Space	28
	Childcare	24
	Community	21
	Healthy Nutrition	20
	Language	15

There were one hundred sixty-two (**162**) statements regarding Parent's Success noted throughout the seven (**7**) Community Town Halls.

Of the one hundred sixty-two (**162**) statements made regarding Parent Success during the Community Town Halls, the following tiered priorities were identified and are reflected in **Table 1.3 – Parent's Success Priorities**.

TIER I PRIORITIES

Self-Care served as the primary success indicator for the majority of parents with a **Tiered Priority Standard (TPS)** score of one hundred-twelve (**112**). All seven (**7**) CTH-engaged communities noted some form of self-care during their community town hall. Self-Care was highlighted by the majority of parents as a general reflection of activities that contribute to self-care.

Specifically noted throughout the town hall discussions regarding Self-Care:

- (1) *An attitude of positive self-worth, self-awareness and self-efficacy;*
- (2) *Intentional time for self, for activities like reading and spiritual growth; and*
- (3) *Opportunities for work life balance and physical self-care like enough sleep and eating healthier.*

Skills Development served as the 2nd tiered priority and reflects success indicator statements made among five (**5**) of the seven (**7**) CTH-engaged communities. With a **TPS** score of ninety-five (**95**), success indicator statements represented a myriad of skill development desires on behalf of parents. Parents highlighted the following three categories of focus:

- (1) *General parenting education and classes was the greatest request made among parents;*
- (2) *Business-related development focused on workforce skills and business and entrepreneurial development; and*
- (3) *Life skills such as conflict resolution, financial literacy, communication, CPR and nutrition classes.*

Parenting Behaviors was acknowledged as an important aspect of their success as parents. With a **TPS** score of fifty-five (**55**) and representing five (**5**) of the seven (**7**) CTH-engaged communities, parenting behaviors encompassed a variety of indicators to include:

- (1) Attitudes and behaviors specific to their children including being respectful, exuding positive energy to their children and demonstrating positive behaviors to their children; and
- (2) Routine, time management and self-regulation tools.

Parent Supports were noted as important to families in five (**5**) of seven (**7**) town hall-engaged communities with a **TPS** score of forty-five (**45**). These supports focused primarily on the many people and groups that can help parents manage their own parenting skills. The following success indicators were noted:

- (1) Support groups for fathers, emotional/mental health, parents with children with behavioral issues and others;
- (2) Individual supports like mentors, peers, and teachers, among others; and
- (3) Family supports to include extended family.

Resources were identified as a success indicator for parents with a **TPS** score of thirty-six (**36**) and represents four (**4**) of the seven (**7**) CTH-engaged communities. Resources focused more on *access* rather than specific types of resources. Resource success indicators included:

- (1) Access to public transportation; and
- (2) Better access and knowledge to community resources especially for families in crisis.

TIER III PRIORITIES

Environment / Space was noted as an important success indicator with a **TPS** score of twenty-eight (**28**). Many of the success indicators focused on the safety of the built environment like lighting, sidewalks and street cameras. Also noted was the need for safe neighborhoods and safe spaces for social interaction **especially for women**.

Childcare was noted as a success indicator for parent's overall success with a **TPS** score of twenty-four (**24**). The affordability of childcare was noted as the major factor while others acknowledged the need for more quality childcare options.

Community was recognized as a success indicator with a variety of focuses including opportunities to build community and socialize with others, and community support options.

Healthy Nutrition was noted as a success indicator for parents which included nutrition education and goal setting, access to vitamins and fresh foods and exercise with children.

Language was noted among some community town hall families, noting supports for English learners like English classes, and mental health resources in Spanish.

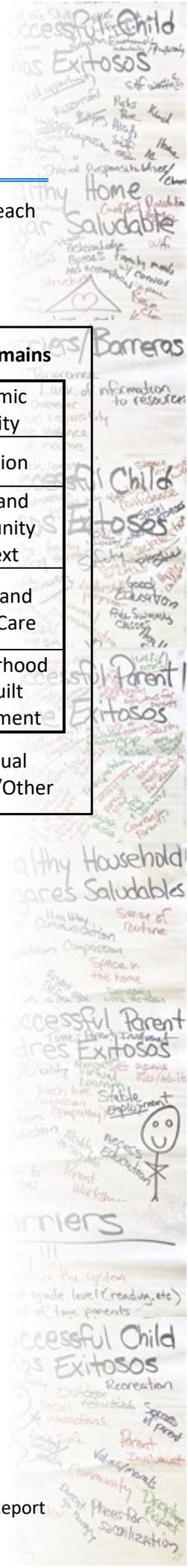
SOCIAL DETERMINANTS OF HEALTH – PARENT’S SUCCESS

Table 1.4 below represents the tiered priorities for **Parent’s Success** listed above and incorporates each category into the **Social Determinants of Health** model.

Parent’s Success per Social Determinants of Health

Parent Success	Tier I Priorities	Tier II Priorities	Tier III Priorities	SDoH Domains
	Education (70)	* Employment (55)	* Childcare (24)	Economic Stability
	* Skills Development (95)	* Financial Stability (70)	* Language (15)	Education
			* Community (21)	Social and Community Context
	* Mental / Emotional Health (84) * Physical Health (80)			Health and Health Care
			* Environment / Space (28) * Healthy Nutrition (20)	Neighborhood and Built Environment
	* Self-Care (112)	* Parenting Behaviors (55) * Parent Supports (45) * Resources (36)		Individual Behavior/Other

Table 1.4



HEALTHY / SUCCESSFUL HOUSEHOLD

Healthy/Successful Household Priorities

Table 1.5

Tier I	Household Behaviors	108
	Household Traditions	55
	Household Structure/ Responsibility	45
	Support Systems	45
	Activities	45
Tier II	Home	30
	Economic	30
	Safety	30
	Food / Nutrition	20
	Physical Space	16
Tier III	Outdoor Recreation	15
	Cleanliness	12
	Mental Health	8
	Community	4
	Technology	4

There were one hundred-three (**103**) statements regarding A Healthy/Successful Household were noted throughout the seven (**7**) Community Town Halls.

Of the one hundred-three (**103**) success indicators noted regarding Healthy/Successful household during the Community Town Halls, the following tiered priorities were identified and are reflected in **Table 1.5 – Healthy/Successful Household Priorities**.

TIER I PRIORITIES

Household Behaviors tops off the **Tier I** priorities with a **Tiered Priority Standard (TPS)** score of **108** and represents six (**6**) of the seven (**7**) CTH-engaged communities. Household behaviors was nearly double that of the next **Tier I** priority. The majority of success indicators revolved primarily around the following success indicators:

- (1) *Everyone in the household exhibiting general respect and overall consideration for everyone else in the home;*
- (2) *Healthy communication among family members to include listening skills and other aspects of healthy conversation; and*
- (3) *Although conflict resolution is a communication strategy (noted above), it was given its own subcategory as there was a focus specifically on the resolution of conflict within the household as noted by several success indicators.*

Household Traditions were the 2nd priority among **Tier I** priorities with a **TPS** score of fifty-five (**55**) and represents five (**5**) of the seven (**7**) CTH-engaged communities. Household traditions seemed to revolve more around aspects of the daily household routine than actual conventional traditions like holidays. Success indicators of household traditions included:

- (1) *Eating meals together as a family;*
- (2) *Structured and limited TV and technology time; and*
- (3) *Positive intergenerational interactions like intentional conversations, playing games together and praying together.*

Household Structure/Responsibility was noted as the 1st of 3 equal 3rd highest tiered priorities with a **TPS** score of forty-five (45) for each and representing five (5) of the seven (7) CTH-engaged communities. Success indicators regarding Household structure focused on the following:

- (1) Household rules such as sharing chores and responsibilities associated with taking care of the home;
- (2) Less technology including over family meals; and
- (3) And overall sense of routine and healthy discipline.

Support Systems included success indicators specific to family dynamics. With a **TPS** score of forty-five (45), support systems were a major success indicator for and represents five (5) of the seven (7) CTH-engaged communities. Success indicators included:

- (1) Family visioning to include goal setting and similar family visioning and direction;
- (2) Family dynamics to include leadership and teamwork; and
- (3) Mechanisms of internal and external family support recognizing and celebrating family achievement and successes.

Activities round off the **Tier I** priorities with a **TPS** score of forty-five (45) and represents five (5) of the seven (7) CTH-engaged communities. Success indicators focused on activities geared to the success of the whole family. Indicators of success related to activities include:

- (1) Physical activities like exercising together and other recreational activities were important for many of the families;
- (2) Opportunities for social interaction including cultural and social engagement as well as game nights; and
- (3) Creative intergenerational activities like arts and crafts.

TIER II PRIORITIES

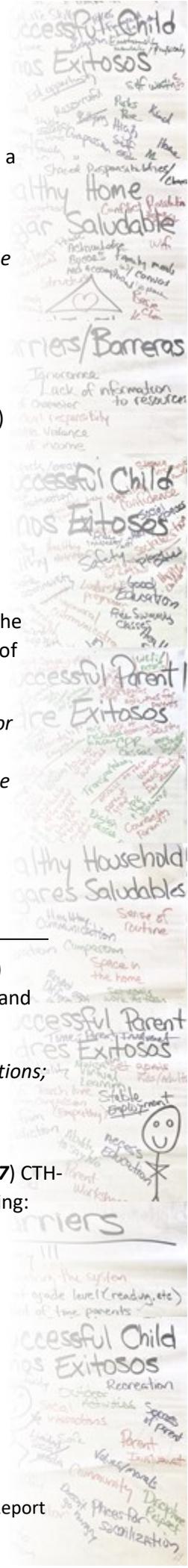
Home specific success indicators make up the start of **Tier II** priorities with a **TPS** score of thirty (30) and represents five (5) of the seven (7) CTH-engaged communities. This score is equal to Economic and Safety indicators. Success indicators for home included:

- (1) Home repairs and other handyman-type projects found around the home with no code violations;
- (2) That all utilities throughout the home are in good shape and paid for; and
- (3) A warm bed.

Economic success indicators equaled a **TPS** score of thirty (30) and represents five (5) of the seven (7) CTH-engaged communities. Success indicators focused on the financial aspects of a healthy home including:

- (1) Economic stability;
- (2) Affordable and stable housing; and
- (3) Financial literacy, home economics and other education tools.

Safety was noted as the 3rd of 3 equal **TPS** scores of thirty (30) within the **Tier II** priorities and represents five (5) of the seven (7) CTH-engaged communities. Safety focused less on the internal workings of a healthy household but instead centered on the areas surrounding the home. Success indicators of a healthy home as it relates to safety include:



- (1) Being aware of your surroundings and general feelings of safety;
- (2) Providing a safe place for children to play like parks and other outdoor spaces; and
- (3) Safe and affordable housing.

Food / Nutrition success indicators were noted by four (4) of the seven (7) CTH-engaged communities with a **TPS** score of twenty (20). Success indicators focused on:

- (1) Access to healthy foods; and
- (2) Home cooked meals.

Physical Space was noted as the final **Tier II** priority with a **TPS** score of sixteen (16) and noted by four (4) of the seven (7) CTH-engaged communities. Spacing focused exclusively on individual spaces for family members to complete homework and get personal space.

TIER III PRIORITIES

Outdoor Recreation came in with a **TPS** score of fifteen (15) and included safe spaces for children to play outdoors and other physical recreation and environment/outdoor activities.

Cleanliness success indicators highlighted basic cleanliness for healthy living and included an overall clean home with clean air (no mold) and clean clothes.

Mental Health indicators focused on the recognition of mental health needs among family members, free from drugs and alcohol and a strong emotional and mental foundation of health.

Community success indicators included social and cultural engagement opportunities and the ability to attend events in-person.

Technology success indicator noted the consistent need for access to internet/Wi-Fi.

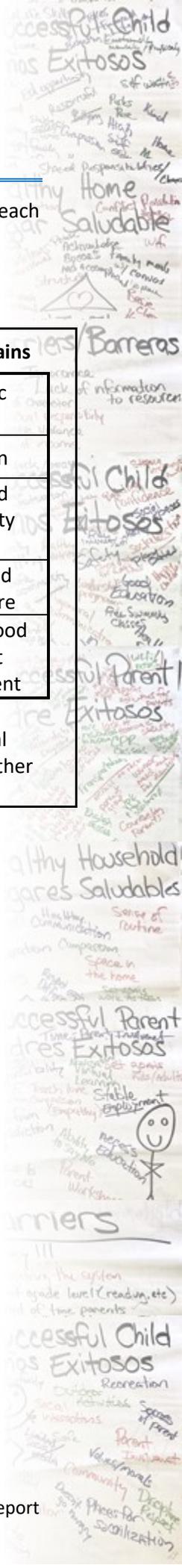
SOCIAL DETERMINANTS OF HEALTH – HOUSEHOLD SUCCESS/HEALTH

Table 1.6 below represents the tiered priorities for **Household Success** listed above and incorporates each into the **Social Determinants of Health** model.

Healthy/Successful Household per Social Determinants of Health

Household Success	Tier I Priorities	Tier II Priorities	Tier III Priorities	SDoH Domains
		* Home (30) * Economic (30)		Economic Stability
				Education
	* Support Systems (45)		* Community (4)	Social and Community Context
	* Activities (45)		* Mental Health (8) * Cleanliness (12)	Health and Health Care
		* Safety (30) * Food / Nutrition (20) * Physical Space (16)	* Outdoor Recreation (15) * Technology (4)	Neighborhood and Built Environment
	* Resident Behaviors (108) * Traditions (55) * Structure / Responsibility (45)			Individual Behavior/Other

Table 1.6



BARRIERS

Barriers to Success

Table 1.7

Tier I	Resource Access	78
	Education	55
	Economic	55
	Health	36
	Language	30
Tier II	Structural Deficiencies	18
	Housing	16
	Technology	16
	Transportation	12
	Supports	10
Tier III	Employment	9
	Food	8
	Community	6
	Skills	3

There were ninety-five (95) statements regarding Barriers were noted throughout the seven (7) Community Town Halls.

Of the ninety-five (95) barrier statements noted during the Community Town Halls, the following tiered priorities were identified and are reflected in **Table 1.7 – Barriers to Success**.

Unlike the Community Data categories above which are represented by Success Indicators, Barrier statements reflect overall barriers and general deficiencies to child, parent and household success.

TIER I PRIORITIES

Resource Access serves as the greatest barrier to various levels of child, parent and family success. With a **Tiered Priority Standard (TPS)** score of seventy-eight (78) and representing six (6) of the seven (7) CTH-engaged communities, resource access barriers included:

- (1) Lack of knowledge and access to resources including transportation, education availability of out-of-school time programs and financial assistance;
- (2) A general lack of resources to include clothing, food and other family needs; and
- (3) Navigating a complicated system of resources with sanctions imposed if not precisely adhered to such as the request of the Women, Infants and Children Nutrition program or WIC.

Education serves as the second greatest **Tier I** priority barrier to the success of children, parents and households. With a **TPS** score of fifty-five (55) and representing five (5) of the seven (7) CTH-engaged communities, barriers in education represented a variety of factors including:

- (1) Lack of education, skills trade or undereducated and education barriers for higher education;
- (2) Lack of services for home school children and other educational resources; and
- (3) Difficulties navigating parent supports provided by the school system along with too many academic standards required for their children to meet.

Economic Barriers was identified as the third greatest barrier among families with a **TPS** score of fifty-five (55) and represents five (5) of the seven (7) CTH-engaged communities. The most significant portion of financial barriers include:

- (1) Overall lack of money and other financial resources due to job loss and reduced hours;
- (2) Cost of living including lack of affordable housing and home expenses like rent and utilities; and
- (3) Secondary financial barriers such as lack of financial literacy and bad credit.

Health Barrier at a **TPS** score of thirty-six (**36**) and represents four (**4**) of the seven (**7**) CTH-engaged communities represent a series of health-related concerns. These concerns include:

- (1) *Lack of health insurance, health benefits and overall access to health care; and*
- (2) *Varying levels of illness both physically and emotionally including high stress and chronic illness.*

Language was noted as a barrier by five (**5**) of the seven (**7**) CTH-engaged communities with a **TPS** score of thirty (**30**). Language barriers were acknowledged as an accessibility barrier to support services and employment, taking into account the lack of Spanish translated informational documents.

TIER II PRIORITIES

Structural Deficiencies were barriers that reflect a real or perceived systemic failure felt by participants. This barrier was reflected by a **TPS** score of eighteen (**18**) and represents three (**3**) of the seven (**7**) CTH-engaged communities. Although a structural deficiency may be a perceived one, the impact on the family is still felt. Structural deficiency barriers include:

- (1) *Incarceration and the associated stigma and barriers;*
- (2) *Immigration status and the possible deportation of parents; and*
- (3) *Isms to include racism, agism and sexism.*

Housing was noted as a significant barrier to the success of families with a **TPS** score of sixteen (**16**), representing four (**4**) of the seven (**7**) CTH-engaged communities, and exclusively focused on cost of living to include:

- (1) *Rent and the impact evictions can have on long term housing stability;*
- (2) *Unavailability of low-income housing; and*
- (3) *Unmanageable cost of living.*

Technology barriers served as the third **Tier II** priority with a **TPS** score of sixteen (**16**) and representing four (**4**) of the seven (**7**) CTH-engaged communities. Families acknowledged an overall technology access issue with limited access to both computers and the internet. As discussed during the community town halls, this concern has been exacerbated by the pandemic with increased need in virtual engagements in education and employment.

Transportation barriers were noted as **Tier II** priority barrier with a **TPS** score of twelve (**12**) and represents four (**3**) of the seven (**7**) CTH-engaged communities. Overall lack of access to transportation and mobility served as the single most significant issue for families within this barrier.

Support served as the final **Tier II** priority with a **TPS** score of ten (**10**) and representing two (**2**) of the seven (**7**) CTH-engaged communities. This barrier reflected a lack of overall support to include:

- (1) *Single parents' lack of time needed to get everything completed;*
- (2) *A single grandparent with little to no support from the parents; and*
- (3) *Not having models or mentors to support the success and development of parents.*



TIER III PRIORITIES

Employment barriers included underemployment or not having enough work to support the household, ever changing priorities around work and school and lack of trade skills.

Food barriers reflected several different barriers including lack of access to school food for children (this was a significant issues during the summer months as impacted by the pandemic), too many restrictions among food banks and access to healthy foods because of food deserts.

Community barriers included unsafe neighborhoods, lack of resident-integration into community events and the need to “keep up with the Jones’.

Skills reflected barriers associated with the lack of trade skills, basic parenting skills and life skills.

SOCIAL DETERMINANTS OF HEALTH - BARRIERS

Table 1.8 below represents the tiered priorities for **Barriers** listed above and incorporates each category into the Social Determinants of Health model.

	Tier I Priorities	Tier II Priorities	Tier III Priorities	SDoH Domains
Barriers	* Economic (55)	* Housing (16)	* Employment (9)	Economic Stability
	* Education (55) * Language (30)		* Skills (3)	Education
		* Systemic / Structural Deficiencies (18)	* Community (6)	Social and Community Context
	* Health (36)			Health and Health Care
		* Technology (16) * Transportation (12)	* Food (8)	Neighborhood and Built Environment
	* Lack of Access to all above (78)	* Supports (10)		Individual Behavior/Other

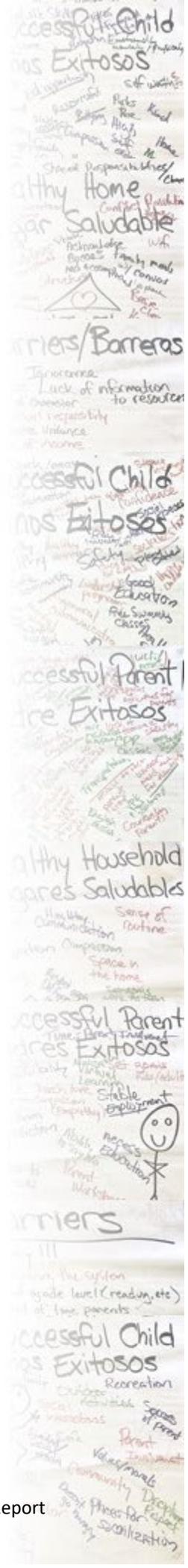
Table 1.8

SOCIAL DETERMINANTS OF HEALTH BY CATEGORY VISUAL SUMMARY

	SDoH Domains	Child Success	Parent's Success	Household Success	Barriers
Tier I	Economic Stability		* Work-Based Education (70)		* Economic (55)
	Education	* Education (161)	* Skills Development (95)		* Education (55) * Language (30)
	Social and Community Context	* Socialization (90)		* Support Systems (45)	
	Health and Health Care	* Physical Health (91) * Emotional / Mental Health (91)	* Mental / Emotional Health (84) * Physical Health (80)	* Activities (45)	* Health (36)
	Neighborhood and Built Environment	* Environment / Location / Spaces (84)			
	Individual Behavior/Other		* Self-Care (112)	* Resident Behaviors (108) * Traditions (55) * Structure / Responsibility (45)	* Lack of Access to all above (78)
	Tier II	Economic Stability		* Employment (55)	* Home (30) * Economic (30)
Education			* Financial Stability (70)		
Social and Community Context		* Family (45) * Programs (36)			* Systemic / Structural Deficiencies (18)
Health and Health Care					
Neighborhood and Built Environment		* Technology (56)		* Safety (30) * Food / Nutrition (20) * Physical Space (16)	* Technology (16) * Transportation (12)
Individual Behavior/Other		* Self Drive (66) * Attitudes & Behaviors (55)	* Parenting Behaviors (55) * Parent Supports (45) * Resources (36)		* Supports (10)

	SDoH Domains	Child Success	Parent's Success	Household Success	Barriers
Tier III	Economic Stability	* Financial (12)	* Childcare (24)		* Employment (9)
	Education		* Language (15)		* Skills (3)
	Social and Community Context	* People (32)	* Community (21)	* Community (4)	* Community (6)
	Health and Health Care			* Mental Health (8) * Cleanliness (12)	
	Neighborhood and Built Environment	* Food (30) * Safety (24)	* Environment / Space (28) * Healthy Nutrition (20)	* Outdoor Recreation (15) * Technology (4)	* Food (8)
	Individual Behavior/Other	* Resources (15)			

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COMMUNITY DATA PRESENTED BY COMMUNITY

The Community Town Halls were conducted in the seven Children’s Board Family Resource Center-communities throughout Hillsborough County. The Community Town Hall-engaged communities included:

Brandon	Central Tampa	East County	North Tampa	South County	Temple Terrace	Town 'N Country
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These seven communities are areas of the County where the needs of families were identified and opportunities for success were secured through collaborative partnerships between The Children’s Board of Hillsborough County and agencies committed to the success of families in each community.

The following information is being presented as a reflection of data captured specific to the community in which the Community Town Hall was conducted.

Each community will reflect a myriad of success indicators specific to the needs and concerns of the families who reside in those communities. **Success indicators** are the positive feedback and responses provided for each category when Community Town Hall participants were asked the guided facilitation question, *“What does success look like six (6) months to a year from now for yourself, your children or your household?”*.

The categories identified through each Community Town Hall have been organized and presented using a **Social Determinants of Health** matrix (explained on page 12). Each **SDoH** Domain will reflect the **Primary** and **Secondary** findings.

Utilizing the **Social Determinants of Health** provides the reader with a quick snapshot of which Domains and subsequent findings garnered the most discussion and feedback. Using the **Social Determinants of Health** to categorize success indicators during the facilitated discussion, provided the most consistent and community-relevant model to use to organize captured data and present findings.

All information shared throughout each presentation of community findings is representative of Community Town Hall feedback (success indicators), Community-Specific Community Survey data and Community Research.

Community Data Presented by Community, Color Key

Any italicized statements in *blue* reflect language that was a direct capture from community town hall statements (*success indicators*) made by participants.

Red squares and **red text** represent **primary findings** per specific domain. These **primary findings** represent the most noted issues/findings in each domain captured throughout the community town hall discussions.

Yellow squares and **yellow text** represent **secondary findings** per specific domain. These **secondary findings** represent the second most noted issues/findings in each domain captured throughout the community town hall discussions.

Clear squares represent lesser noted findings compared to primary and secondary findings.

Economic Stability		
Lesser Findings	Primary Finding	Secondary Finding
1	9	6

Any statements made or data presented in **purple**, represents **community-specific community survey data**. Of the two hundred ninety-seven (**297**) community survey respondents, zip codes specific to the community being presented were isolated and that **community specific data** is reflected throughout the presentation of data.

Any italicized statements in *“quotes”* represents actual statements made by any community-engaged participants either through the Community Town Hall or Community Survey data.

Acronyms of note

- **CTH** - Community Town Hall
- **CS Data** – Community Survey Data
- **SDoH** – Social Determinants of Health

N=## - reflects the number of unique data points for the presented data i.e. (*N=58*) means there were 58 pieces of unique data like 58 community surveys to reflect the presented percentages.

BRANDON

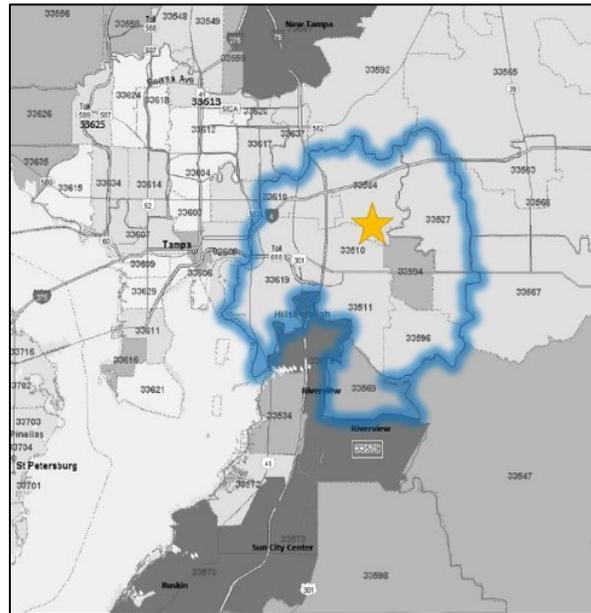
(*ZIP CODES 33584, 33527, 33594, 33596, 33511, 33569, 33610, 33619, 33510)

Brandon community participation included eight (8) community town hall participants and fifty-eight (58) Brandon-specific community survey respondents for a total of sixty-six (66) engaged Brandon-specific community participants.

Brandon SDoH Domains in Ranked Order

1 st - Health and Health Care
2 nd - Social and Community Context
3 rd - Education
4 th - Neighborhood and Built Environment
5 th - Economic Stability

(*Zip codes listed represent zip codes served by the local Children's Board Family Resource Center)



PRIMARY DOMAIN FINDINGS

1 st - Health and Health Care					
Self-Care	Emotional / Mental Health	Parenting Behaviors	Cleanliness	Physical Health	Food / Nutrition
6	2	4	1	6	4

Findings: Brandon Town Hall participants noted **Health and Health Care** as their leading SDoH Domain as success indicators overall reflected more health-related issues than any other Domain. Participants noted **Physical Health** and **Self-Care** as the primary health-related issues for family success while also highlighting **Parenting Behaviors** and **Food / Nutrition** as secondary health-related success factors.

Physical Health success indicators focused on an equal balance of child, parent and household health. Indicators for success included *exercising with family*, *getting enough high-quality sleep* and *proper nutrition*. The greatest health related concern among families was regarding the spread of the *Coronavirus*.

Brandon-specific Community Survey Data (N=58) shows forty-one percent (41%) of families are feeling somewhat physically healthy with fifty-nine percent (59%) feeling physically healthy overall. The greatest issue among families surveyed was having the time for physical activity as noted by forty-four percent (44%) of respondents. Thirty percent (30%) indicated the inability to prioritize their physical health while physical health resources and education were issues for sixteen percent (16%) and nine percent (9%) of respondents, respectively.

Self-Care success indicators focused primarily on the parent's needs around self-care. In fact, this was the only **SDoH** Domain issue that focused exclusively on parents.

Self-Care success indicators centered predominantly on factors attributed to mental health. Families acknowledged a need for *a personal space and time regiment* that includes *lots of reading, having a positive attitude and peace of mind around things you cannot control* as well as *a healthy work/life balance*.

Brandon-specific Community Survey Data (N=58) suggests that many Brandon families may be struggling with mental health concerns such as **high anxiety** and **depression** through the pandemic.

As many as forty-one percent (**41%**) of respondents stated that **their mental health has been significantly impacted by the pandemic** whereas five percent (**5%**) of families noted their physical health being significantly impacted.

Sixty-nine percent (**69%**) of Brandon families see **access to mental health support as important to the success of their family**.

The facilitated town hall discussion and success indicators were not interpreted as a mental health-specific issue but instead as a **Self-Care** one. Although there is a significant correlation between self-care and a person's mental health, the two are fundamentally different and self-care should not be regarded as a clinical solution for significant mental health concerns.

The secondary set of **Health and Health Care** issues were **Parenting Behaviors** and **Food/Nutrition**.

Parenting Behaviors reflected success indicators of *maintaining balance through routine, healthy open conversations* and *intentional interactions*.

Food / Nutrition success indicators highlighted the importance of *eating healthy nutritious meals with the family*.

Brandon-specific Community Survey Data (N=58) revealed that forty (**40%**) of families surveyed would like to see **parenting workshops** offered in their community.

Forty (**40%**) of families also indicated a desire to see **health and nutrition programming** offered in their community.

2 nd - Social and Community Context							
Community	Structural Deficiencies	Resource Awareness	Socialization	Childcare	Traditions	Activities	Programs
0	1	1	8	1	5	2	1

Findings: Brandon Town Hall participants identified **Socialization** and **Traditions** as the highest areas of focus, making Social and Community Context the second most important **SDoH** Domain for Brandon families.

The importance of **Socialization** applied primarily to the children of Brandon families, to include activities and events where children can have positive social interactions with family and other *developmentally appropriate* peer groups in *settings that are safe*. Parents also noted the value of having opportunities for *adult in-person interactions* in locations such as *churches and other places for safe interaction*.

Brandon-specific Community Survey Data (N=58) tells us that:

- Eighty-eight percent (**88%**) of Brandon families **enjoy living in their community**;
- Seventy-two percent (**72%**) of families see **value in social interactions with other families** in their community;
- Seventy-one percent (**71%**) expressed **not knowing of any opportunities** to engage other families in their community; and
- Sixty-nine percent (**69%**) of respondents noted that **feeling a sense of community among their neighbors is important** to their level of community satisfaction.

The top three ways Brandon families traditionally interact with their community include:

- Saying hello and having brief conversations in passing was shared by forty-three (**43%**) of respondents

- Assisting each other in identifying resources was shared by thirty-two (**32%**) of respondents

- Participating in community events and activities was shared by twenty-nine (**29%**) of respondents

The subject of **Traditions** was also brought up and included more in-home traditions most associated with activities connected to their faith like *praying together* and/or *devotionals*.



Brandon Community Town Hall, Virtual Engagement

3 rd - Education					
Education	Structure/ Responsibility	Special Needs	Language	Skills Development	Parenting
12	2	0	0	1	0

Findings: Participants of the Brandon Community Town Hall highlighted the importance of **Education** to their children’s overall success.

A variety of success indicators were presented spanning access to school events including *field trips, school dances and graduation* to *academic consistency through quality education* and *extra tutoring activities to children no longer having to learn virtually*.

This disparate reflection of education priorities makes it difficult to narrow down a primary education-specific focus.

Noted as barriers to a child’s academic success in Brandon was a lack of transportation and significant language barriers for some families.

Brandon-specific Community Survey

Data (N=58) noted among respondents when asked whether their children enjoyed school, seventy-nine percent (**79%**) of families indicated in the affirmative while only ten percent (**10%**) said No or were unsure.

Forty-one percent (**41%**) of families stated that **their child struggles in school subjects** while forty-eight percent (**48%**) of families indicated the opposite.

Sixty-five percent (**65%**) of Brandon families noted **having access to the necessary resources** needed for their children to succeed in school while sixteen percent (**16%**) of families felt they do not and nineteen percent (**19%**) were not sure.

4 th - Neighborhood and Built Environment						
Transportation	Physical Space	Technology	Safety	Outdoor Recreation	Resource Access	Healthy Nutrition Access
1	2	2	2	2	3	1

Findings: Neighborhood and Built Environment was the 4th highest priority among Brandon Town Hall participants. Among the success indicators, issues of Resource Access and neighborhood safety were prevalent while barriers focused on money, transportation and technology. Physical Space noted the need for affordable, adequate and stable housing and space (in the home) to do homework was noted.

Brandon-specific Community Survey

Data (N=58) confirmed, eighty-eight percent (**88%**) of Brandon families **have not** experienced lack of transportation as a barrier over the past six (**6**) months.

Twenty-nine percent (**29%**) of Brandon families indicated “*access to technology including computers and internet*” would have a significant positive impact.

5 th - Economic Stability			
Economic	Employment	Financial Stability	Housing
1	1	4	2

Findings: Brandon Community Town Hall families acknowledged the value **Financial Stability** has on their family’s success. Financial literacy was noted as major success indicator financial stability while language was acknowledged by some families as a significant barrier for employment. Affordable housing and cost of living was shared as barriers for economic stability.

Brandon-specific Community Survey Data (N=58) noted forty-seven percent (**47%**) of Brandon families have been significantly impacted by the coronavirus **through reduced work hours and/or loss of job**.

Key Brandon Takeaways:

- ☞ Having time for physical health-related activities and prioritizing physical health appears to be the greatest challenge to overcome for Brandon families.
- ☞ Although families may be struggling with committing to consistent physical activity, most Brandon families feel physically healthy to somewhat physically healthy.
- ☞ Self-Care was noted as a parent-only issue with time, personal space and peace of mind anchoring that care.
- ☞ Many Brandon families are being impacted mentally by the pandemic with most families seeing mental health support as important to the success of their family.
- ☞ A sizable number of Brandon families would like to see more health and nutrition programming and parenting workshops offered.
- ☞ Opportunities for social interaction for Brandon families both for adults and children are important to the success of their families.
- ☞ Although there are genuine concerns around in-person interactions due to Coronavirus, opportunities should still be created for families to continue building community in safe and healthy ways.
- ☞ Creating virtual and in-person opportunities for families and specifically their children to maintain positive social interactions is important. Equally as important however, is the method by which that information is shared, as many families are still unable to find information on community-based social interaction events and activities in and around their community.
- ☞ Most young people living in Brandon appear to enjoy school. Four (4) out of ten (10) children in the Brandon area struggle with one or more school subjects, with Reading and Math serving as the main subjects of struggle.
- ☞ Two thirds of families in Brandon feel that their children have the necessary resources for them to succeed in school. Families appear to be uncertain about the upcoming educational challenges faced by their children but recognize the importance education has on their success.



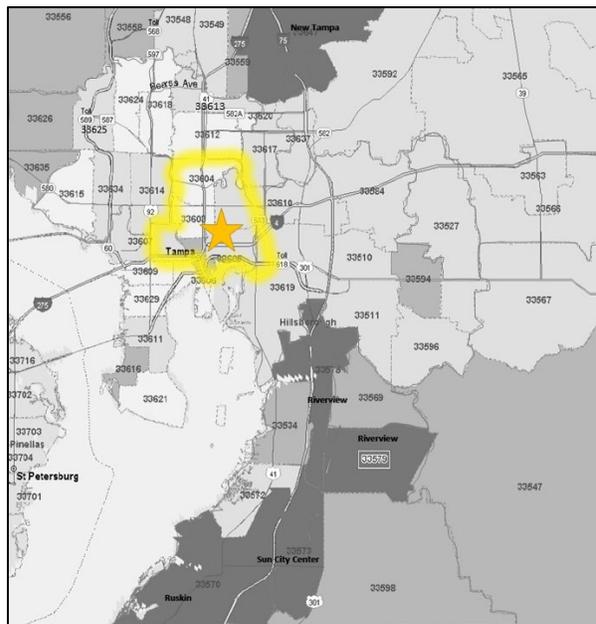


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CENTRAL TAMPA

(*ZIP CODES 33602, 33603, 33604, 33605, 33606, 33607)

Central Tampa community participation included twelve (12) community town hall participants and twenty-eight (28) Central Tampa-specific community survey respondents for a total of forty (40) engaged Central Tampa-specific community participants.



Central Tampa SDoH Domains in Ranked Order

1 st - Health and Health Care
2 nd - Social and Community Context
3 rd - Economic Stability
4 th - Education
5 th - Neighborhood and Built Environment

(*Zip codes listed represent zip codes served by the local Children's Board Family Resource Center)

PRIMARY DOMAIN FINDINGS

1 st - Health and Health Care					
Self-Care	Mental / Emotional Health	Parenting Behaviors	Cleanliness	Physical Health	Food / Nutrition
2	10	2	2	13	2

Findings: Central Tampa community town hall data noted Health and Health Care as their leading SDoH Domain as their success indicators reflected more statements associated with Health and Health Care than any other Domain. **Physical Health** and **Mental / Emotional Health** served as the two-primary health-related issues expressed most.

Physical Health success indicators focused on factors associated overwhelmingly on high quality and affordable physical fitness resources including *sports* and other *exercise related programs*. Physical fitness also highlighted the importance of better *health education resources* and access to resources that *increase health awareness and diagnosis*.

Central Tampa-specific Community Survey Data (N=28) noted seventy-one percent (71%) of respondents consider their family physically healthy to very physically healthy while twenty-nine percent (29%) of respondents acknowledged that their family is somewhat physically healthy to not physically healthy.

Mental / Emotional Health success indicators noted general mental health supports including *emotional and mental health stability* through *emotional management, support groups and counselors*. The only barrier acknowledged that may prevent healthy emotional and mental health was stress.

2 nd - Social and Community Context							
Community	Structural Deficiencies	Resource Awareness	Socialization	Childcare	Traditions	Activities	Programs
3	6	2	5	2	0	4	3

Findings: **Structural Deficiencies** serve as the primary Social and Community Context priority for Central Tampa families while **Socialization** served as the second highest indicator of success among families.

Structural Deficiencies expressed by Central Tampa families focused heavily on barriers to success rather than the positive success indicators. Noting *racism*, the *deportation and incarceration of loved ones* and having a *felony record*, families noted these as significant barriers to their family's success.

Socialization success indicators fell heavily on opportunities for social interactions that allow for *cultural or social engagements* in *environments and spaces that are safe* for themselves and friends and help to *re-engage their social community*.

Central Tampa-specific Community Survey Data (N=26) validates the importance of Socialization for Central Tampa families as seventy-seven percent (**77%**) of respondents see the benefit to positive social interactions with other families in their community.

3 rd - Economic Stability			
Economic	Employment	Financial Stability	Housing
3	7	5	4

Findings: Economic Stability served as the 3rd SDoH Domain priority for Central Tampa Families. Of the success indicators listed during the Community Town Hall, **Employment** was identified as the highest priority of success among families while **Financial Stability** served as the secondary predictor of success.

Although **Employment** included the importance of success indicators like *access to job opportunities* and *employment resources* for their overall *professional health*, more barriers to employment were shared than success indicators. Barriers included *chronic illness*, *ever changing priorities at work*, *felony records* and significant *language barriers*. These barriers are also reflected in the Structural Deficiencies found in the Social and Community Context.

Financial Stability success indicators included an overall sense of financial stability and a stable economic situation although *bad credit and the lack of money* continue to serve as barriers to families' success.

4 th - Education					
Education	Structure / Responsibility	Special Needs	Language	Skills Development	Parenting
3	0	1	2	8	4

Findings: Education is the 4th most significant SDoH Domain among Central Tampa families with **Skills Development** serving as the primary indicator of success for families. These indicators reflected a variety of skills development-focus areas including *conflict resolution trainings, financial literacy, parenting skills, entrepreneurial skills* and most important, *overall life skills* for children and adults.

Central Tampa-specific Community Survey Data (N=29) shows that thirty-six percent (**36%**) of respondents indicated wanting to see parenting workshops offered in their community while fifty-seven percent (**57%**) of families would like to see Education resources and classes. Thirty-six percent (**36%**) of families would also like to see employment training or job skill certification offered in their community.

5 th - Neighborhood and Built Environment						
Transportation	Physical Space	Technology	Safety	Outdoor Recreation	Resource Access	Healthy Nutrition Access
0	2	2	4	1	6	1

Findings: Among the success indicators that highlight Neighborhood and Built Environment, **Resource Access** served as the primary areas of focus while **Safety** represented a secondary area of importance for Central Tampa families.

Resource Access success indicators focused on the overall accessibility of resources rather than the specific resources themselves as there was no consistent theme around resources. Success indicators for resource access included *resources for families in crisis, access to resources for employment and education* including *parent education* and *access to resources for developing talent*.

Safety success indicators were about the built environment acknowledging the importance of *safe neighborhoods, safe shelter* and *feelings of safety throughout their community*.

Central Tampa-specific Community Survey Data (N=28) demonstrates the importance of safety among Central Tampa families as fifty percent (**50%**) of families noted Safety as an area that would have one of the greatest positive impacts on the success of their household.

Key Central Tampa Takeaways:

- ☞ Although most Central Tampa families may consider themselves healthy, many would still like to see an increase in physical fitness programs and other exercise-related activities.
- ☞ Families would like to see an increase in access to mental health supports provided by mediators, counselors and other support group-type models.
- ☞ Many Central Tampa families see the systemic or structural deficiencies in the world around them with particular focus on racism and the long-term implications of incarceration.
- ☞ There is significant value to Central Tampa families to create and maintain healthy levels of socialization throughout their community.
- ☞ Many Central Tampa families see more employment barriers than they see opportunities for them to secure stable employment which further hinders their ability to secure financial stability.
- ☞ Central Tampa families would like to see more opportunities to gain a variety of skills including parenting and workforce development.
- ☞ Access to resources is a concern for families in Central Tampa especially among those in crisis as well as parents in need of supports.
- ☞ Safety is important for families living in Central Tampa not only in the home but throughout the community and neighborhood for which they reside.

EAST COUNTY

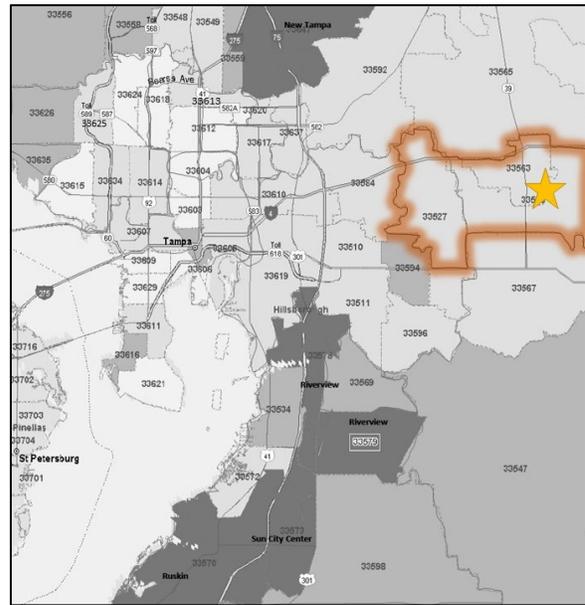
(*ZIP CODES 33527, 33566, 33565)

East County community participation included three (3) community town hall participants and nine (9) East County-specific community survey respondents for a total of twelve (12) engaged East County-specific community participants.

East County SDoH Domains in Ranked Order

1 st - Health and Health Care
2 nd - Neighborhood and Built Environment
3 rd - Education
4 th - Social and Community Context
5 th - Economic Stability

(*Zip codes listed represent zip codes served by the local Children's Board Family Resource Center)



PRIMARY DOMAIN FINDINGS

1 st - Health and Health Care					
Self-Care	Mental / Emotional Health	Parenting Behaviors	Cleanliness	Physical Health	Food / Nutrition
4	9	5	2	7	2

Findings: East County families identified Health and Health Care as the primary **Social Determinants of Health (SDoH)** Domain for their community. **Mental / Emotional Health** success indicators topped the list of the as the priority category with **Physical Health** representing a secondary focus for families.

Mental / Emotional Health success indicators noted the need for *rehabilitation resources, mental health stability* and acknowledge the importance of access to *counselors, therapists, mentors and social workers* as indicators for future success.

Physical Health success indicators noted *positive physical health* and *activity through recreation, proper sleep and access to healthcare* as indicators of success for East County families.



East County Community Town Hall

2 nd - Neighborhood and Built Environment						
Transportation	Physical Space	Technology	Safety	Outdoor Recreation	Resource Access	Healthy Nutrition Access
1	1	4	0	1	4	2

Findings: The second SDoH Domain identified by East County families was Neighborhood and Built Environment. Within this Domain, two (2) primary focus areas were highlighted. **Resource Access** and **Technology** were represented each with four (4) indicators of success.

Technology indicators of success focused exclusively on *access to Wi-Fi* and presented the *lack of access to computers and technology* as the one barrier to family success.

Resource Access included *access to health care* and *other resources* as indicators of success. Some families noted that *sanctions to resource access* were sometimes imposed on families that may not adhere to “strict” resource requirements, for example, when applying for the Women, Infants and Children Nutrition program. This, combined with *lack of knowledge about resources* were noted as the two (2) barriers that prevents family success.

3 rd - Education					
Education	Structure / Responsibility	Special Needs	Language	Skills Development	Parenting
4	1	0	0	4	2



East County Community Town Hall

Findings: Education is the third SDoH Domain identified by East County families and include **Education** and **Skills Development** as the two primary concerns brought up during the Community Town Hall.

The **Education** priority acknowledges *access to education opportunities* and *understanding of tenant rights* as indicators of family success. Families also identified *undereducation* as a barrier to family success.

Skills Development focused on success indicators including *financial literacy and budgeting, life skills* and *conflict resolution*.

4 th - Social and Community Context							
Community	Structural Deficiencies	Resource Awareness	Socialization	Childcare	Traditions	Activities	Programs
1	0	0	2	0	5	1	1

Findings: Of the Social and Community Context **SDoH** Domain, **Traditions** was identified as the primary indicator of success. This subcategory revealed indicators of success specific to household traditions including *family meals with intentional conversations*, *game nights* and *household chores*.

5 th - Economic Stability			
Economic	Employment	Financial Stability	Housing
0	2	3	4

Findings: Economic Stability was identified as the 5th **SDoH** Domain with success indicators reflecting **Housing** priorities and serving as the primary area of focus for this Domain. Of the success indicators shared regarding housing, *tenant rights*, *proper utilities and house rules* served as the primary indicators of success for East County families.

Key East County Takeaways:

- ☞ East County families would like to see more mental health supports in their community to include not just alcohol and drug rehabilitation locations but would also like to see more professional mental health supports like counselors, therapist and others.
- ☞ Physical activity is both important and challenging for families in East County partially due to limited health resources found throughout the community.
- ☞ Many families continue to have technology accessibility challenges including access to computers and consistent internet not only in their homes but throughout the community.
- ☞ Access to resources continues to be a challenge for many families with transportations limitations and other mobility challenges. Services provided by agencies that may be headquartered outside of the East County area, continue to decrease their services to East County residents, as agency needs increase in central Hillsborough County.
- ☞ East County families struggle to know about or understand the resources made available to them while also attempting to manage the barriers confronted when attempting to access said resources.
- ☞ East County families would like to see increases in education and skills development but done so in a way that is still accessible to families that may have work schedules that are not conducive to standard educational hours and families with significant language barriers.
- ☞ East County families appreciate household traditions like family meals and intentional conversations in their homes and throughout their community. Families noted that people interested in engaging, should do so by attempting to understand and honor these traditions.



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NORTH TAMPA

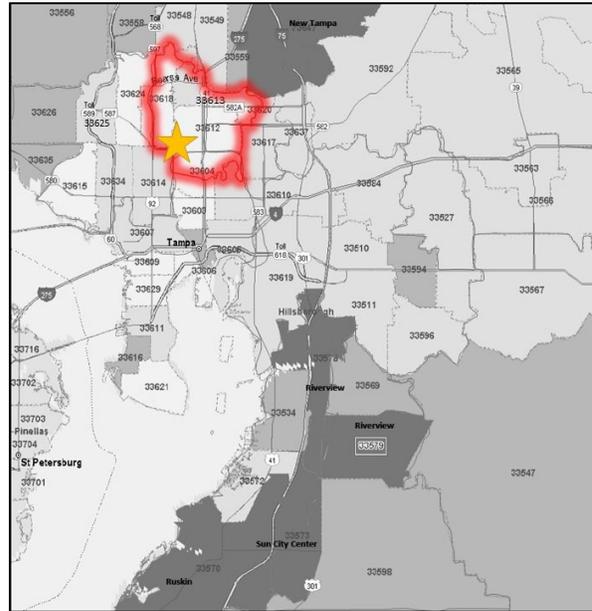
(*ZIP CODES 33604, 33612, 33613, 33618, 33558)

North Tampa community participation included five (5) community town hall participants and thirty-six (36) North Tampa-specific community survey respondents for a total of forty-one (41) engaged North Tampa-specific community participants.

North Tampa SDoH Domains in Ranked Order

1 st - Neighborhood and Built Environment
2 nd - Education
3 rd - Health and Health Care
4 th - Social and Community Context
5 th - Economic Stability

(*Zip codes listed represent zip codes served by the local Children's Board Family Resource Center)



PRIMARY DOMAIN FINDINGS

1 st - Neighborhood and Built Environment						
Transportation	Physical Space	Technology	Safety	Outdoor Recreation	Resource Access	Healthy Nutrition Access
0	7	3	6	3	2	1

Findings: North Tampa families identified Neighborhood and Built Environment as their 1st **Social Determinant of Health (SDoH)** Domain with **Physical Space** serving as the primary subcategory of success and **Safety** serving as the secondary subcategory for success.

Physical Space success indicators focused heavily on external physical space to include *sidewalks, road repair, street lighting, bike lanes, bike and traffic safety and access to outdoor spaces* with one success indicators focused on *enough room* or physical space within the home.

North Tampa-specific Community Survey Data (N=35) revealed forty percent (40%) of North Tampa families identified access to Greenspace to include pools and parks as one of the greatest positive impacts on the success of their household.

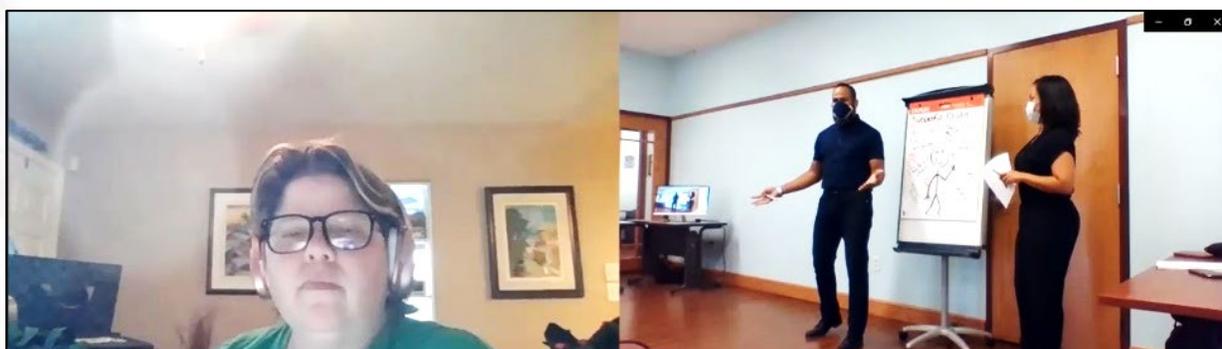
Safety indicators of success also included external physical space and the impact the built environment has on safety and included *bike and traffic safety, sidewalks, street cameras* and in-home safety factors to include the physical space at home with *no code violations*.

2 nd - Education					
Education	Structure / Responsibility	Special Needs	Language	Skills Development	Parenting
9	0	1	1	6	2

Findings: The SDoH Education Domain represents the second area of focus for North Tampa families with general **Education** serving as the primary subcategory while **Skills Development** served as the secondary.

Education success indicators included *completing senior year, driver's education, college access, virtual success and expanding education*. Education barriers were also noted within this subcategory and included concerns regarding *bullying, too many academic standards required for each child, the inability to navigate school supports and resources for parents, first generation in college and not at grade level for reading*

Skills Development success indicators focused heavily on work related skills development including *business education, workforce development and job training*. *Financial literacy and budget management* were also noted as skills development-based indicators of success for families.



North Tampa Virtual Town Hall

3 rd - Health and Health Care					
Self-Care	Mental / Emotional Health	Parenting Behaviors	Cleanliness	Physical Health	Food / Nutrition
7	1	2	0	3	1

Findings: Health and Health Care is the 3rd SDoH Domain identified by families of the North Tampa community town hall. The primary subcategory is centered wholly on self-care.

Self-Care serves as the only primary subcategory in the Health and Health Care Domain. Success indicators for self-care include *intentional successful "me" time, high self-esteem and feelings of safety and confidence*. Barriers cited to the success of self-care included the amount of *available time for parents, lack of clothing and other resources which impacts self-esteem*.

4 th - Social and Community Context							
Community	Structural Deficiencies	Resource Awareness	Socialization	Childcare	Traditions	Activities	Programs
0	0	1	4	2	2	3	1

Findings: Social and Community Context represents the 4th SDoH Domain of importance to the North Tampa Community. Primary and secondary subcategories included **Socialization** and **Activities**.

Socialization among North Tampa families included their *kids feeling safe and comfortable with other kids in playgrounds and attending community events.*

Activities identified as indicators of success include *outdoor activities, dinner time activities and intergenerational activities.*

5 th - Economic Stability			
Economic	Employment	Financial Stability	Housing
1	5	3	3

Findings: Economic Stability represents the least engaged SDoH Domain among all of the success indicators discussed during the Community Town Hall. Of the subcategories found in the Economic Stability Domain, **Employment** served as the primary subcategory.

Employment garnered indicators of success which included *workforce development, part time jobs, jobs training* and *concerns regarding un(der) employment.*



Key North Tampa Takeaways:

- ☞ North Tampa families feel most strongly about the built environment in which they live and would like to see not only new structures added to the landscape like additional lighting, bike lanes and benches but would also like to see repairs to worn, outdated or significantly damaged infrastructure like current streets and sidewalks.
- ☞ Safety is equally as important and is partially informed by the infrastructure needs in the built environment.
- ☞ North Tampa families want to feel safe in their homes with enough physical space for them to get individual time for themselves.
- ☞ Education standards for children are a real concern for parents as well as access and an understanding of the educational parent supports provided for their children to succeed.
- ☞ North Tampa families see opportunity in their own growth and development and would like more opportunities for them to build workforce skills training, business education and job training as well as financial literacy and budget management.
- ☞ Families appear to acknowledge the importance of self-care but lack the time necessary to focus on taking care of themselves.
- ☞ Socialization is important to families in North Tampa but their greatest concern is making sure that their kids are still given opportunities for them to socialize in safe spaces and in healthy ways.
- ☞ Families enjoy at home family activities for increased intergenerational socialization.
- ☞ Families care about access to good, well-paying jobs and want to see more opportunities to increase their workforce, vocational and technical skills while avoiding under-employment or jobs that do not pay a living wage.

SOUTH COUNTY

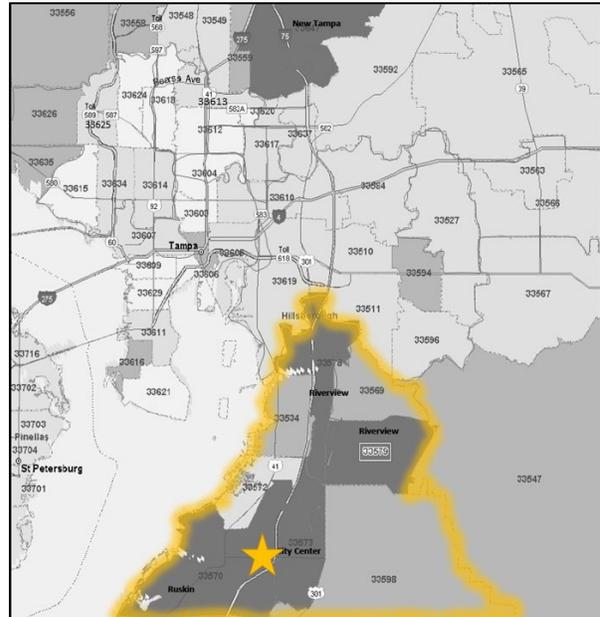
(*ZIP CODES 33534, 33547, 33569, 33570, 33572, 33573, 33579, 33598)

South County community participation included twenty-three (23) community town hall participants and forty-six (46) South County-specific community survey respondents for a total of sixty-nine (69) engaged South County-specific community participants.

South County SDoH Domains in Ranked Order

1 st - Health and Health Care
2 nd - Social and Community Context
3 rd - Neighborhood and Built Environment
4 th - Education
5 th - Economic Stability

(*Zip codes listed represent zip codes served by the local Children’s Board Family Resource Center)



PRIMARY DOMAIN FINDINGS

1 st - Health and Health Care					
Self-Care	Mental / Emotional Health	Parenting Behaviors	Cleanliness	Physical Health	Food / Nutrition
2	7	2	0	7	1

Findings: Health and Health Care serves as the 1st SDoH Domain identified by participants of the South County Community Town Hall. The primary subcategories most of the success indicators equally represented **Mental / Emotional Health** and **Physical Health**. Both Physical and Mental/Emotional Health covered children’s needs as well as parents.

Mental / Emotional Health related success indicators included *emotional support for kids with disabilities, healthy stimulation, mental health supports in English and Spanish, recognizing mental health concerns when needed and finally counseling for parents and others.*

South County-specific Community Survey Data (N=46) reveals that **72%** of respondents see value in mental health support for themselves and their families, likewise **72%** of families see access to mental health support as important to the success of their families.

Physical Health success indicators included *independence from drugs and alcohol, free sports, exercise and activities for parents, access to health screening and free-swimming classes.*

2 nd - Social and Community Context							
Community	Structural Deficiencies	Resource Awareness	Socialization	Childcare	Traditions	Activities	Programs
2	1	1	4	3	0	3	6

Findings: South County’s second priority Domain is Social and Community Context. This Domain includes the primary and secondary subcategories of **Programs** followed by **Socialization**.

Programs included success indicators that focused on a variety of youth-based programs including:

- Leadership programs for young people;
- Programs specifically for middle school students;
- Free swimming classes;
- Afterschool education programs;
- Arts sports and music programs.

Socialization success indicators focused on *healthy play dates for young people* as well as *support groups for parents and single fathers*.

3 rd Neighborhood and Built Environment						
Transportation	Physical Space	Technology	Safety	Outdoor Recreation	Resource Access	Healthy Nutrition Access
1	2	4	4	2	3	0

Findings: The 3rd SDoH Domain for the South County Community is Neighborhood and Built Environment. Within this Domain **Technology** and **Safety** were identified as the primary subcategories with **Resource Access** serving as the secondary.

Technology success indicators focused on *free access to Wi-Fi and internet* as well as multiple technology needs like *compatible computers and computer and technology classes*

Safety success indicators included *overall community safety, being aware of your surroundings* and a *safe space for women to connect with other women*. Also noted in safety was *free swimming classes*.

Resource Access focused on *better access to available resources in and around Ruskin* as well as *more vocational and technical resources specifically for workforce*.

South County-specific Community Survey Data (N=46) revealed that sixty-one percent (**61%**) of families feel that access to more resources would have one of the greatest positive impact on their families



South County Community Town Hall

4 th – Education					
Education	Structure / Responsibility	Special Needs	Language	Skills Development	Parenting
1	0	0	3	7	3

The 4th SDoH Domain is Education with **Skills Development** serving as the primary subcategory for that Domain. Success indicators for **Skills Development** focused on education support for *after school i.e. tutoring, CPR classes and overall skills trainings along with literacy skills for kids and listening proficiency.*



South County Community Town Hall

Economic Stability serves as the 5th Domain for South County families with **Financial Stability** serving as the primary subcategory. Financial stability indicators of success included *financial literacy for kids and their parents and assisting parents in understanding and navigating financial aid and scholarships for post-secondary education.*

5 th - Economic Stability			
Economic	Employment	Financial Stability	Housing
2	1	3	1

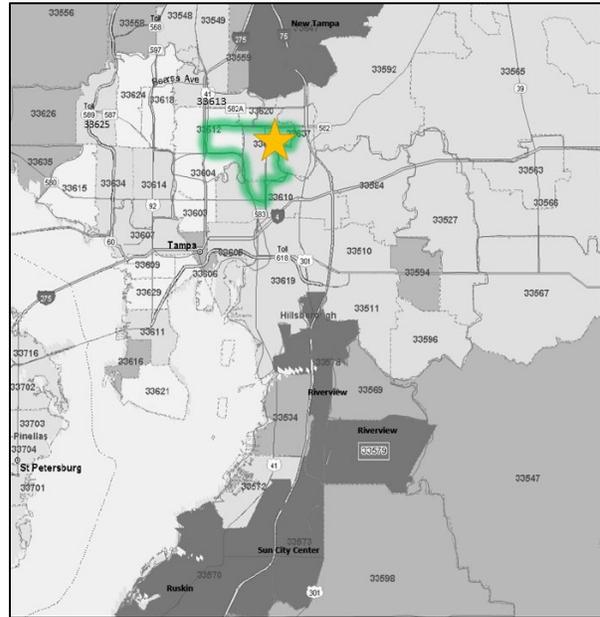
Key South County Takeaways:

- ☞ South County families recognize the importance mental health has on the whole family and would like to see increased mental health resources while ensuring that these resources are provided in multiple languages.
- ☞ Parents care about the physical wellbeing of their families and themselves but may lack the access to healthier food options and physical activities in and around their community.
- ☞ Families would like to see more youth leadership and afterschool programs specifically targeted to the South County areas and made available to their children.
- ☞ Families want opportunities for healthy socialization for their children and access to support group-style engagements for parents.
- ☞ The greatest technology challenge for families in South County is consistent Wi-Fi or internet access. This issue has only become exacerbated as school continues to grapple with dual in-person and virtual learning models.
- ☞ South County families care about community safety in the built environment but want to also make sure that the spaces their families enter are also safe for them. This is especially true for women and community residents with mixed immigration status.
- ☞ Families would like to see better access to resources in their community especially classes and training programs that increase their workforce and literacy skills.
- ☞ Families are concerned about their own financial health with needs focused on workforce development skills and the desire to understand and manage their finances.

TEMPLE TERRACE

(*ZIP CODES 33592, 33617, 33637)

Temple Terrace community participation included ten (10) community town hall participants and thirty-six (36) Temple Terrace-specific community survey respondents for a total of forty-six (46) engaged Temple Terrace-specific community participants.



Temple Terrace SDoH Domains in Ranked Order

1 st - Health and Health Care
2 nd - Education
3 rd - Social and Community Context
4 th - Neighborhood and Built Environment
5 th - Economic Stability

(*Zip codes listed represent zip codes served by the local Children’s Board Family Resource Center)

PRIMARY DOMAIN FINDINGS

1 st - Health and Health Care					
Self-Care	Mental / Emotional Health	Parenting Behaviors	Cleanliness	Physical Health	Food / Nutrition
1	6	3	1	7	3

Findings: Health and Health Care serve as the first **Social Determinants of Health (SDoH)** Domain determined by Temple Terrace families. **Physical Health** and **Mental / Emotional Health** make up the Primary and Secondary priority subcategories respectively.

Physical Health success indicators focused on several key factors that applied to all members of the household including a *sliding fee scale for clinics, health screenings and overall physical fitness by exercising together*. The only barrier noted by families was a *lack of health benefits*.

Mental / Emotional Health success indicators included *access to therapy, counseling and stress relief*. Barriers to success include *lack of emotional support*.

Temple Terrace Community Town Hall



2 nd - Education					
Education	Structure / Responsibility	Special Needs	Language	Skills Development	Parenting
7	0	0	1	8	1

Findings: Education became the 2nd SDoH Domain identified by Temple Terrace families with **Skills Development** and **Education** serving as the primary and secondary subcategories of focus.

Skills Development focused on children and household success indicators including *financial literacy skills and knowing laws and rights for young people* while also building skills in areas of *home economics* as well as learning *“handyman” skills* for the household.

Education success indicators noted *involvement and access to schools*. Quite a few barriers were also identified including the *overall lack of knowledge and education for parents, immigration status of children and adults and lack of resources for home school children*.

Temple Terrace-specific Community Survey Data (N=36) tells us that fifty-six percent (56%) of families identified Education resources and classes as areas they would like to see offered in and around their community.

3 rd - Social and Community Context							
Community	Structural Deficiencies	Resource Awareness	Socialization	Childcare	Traditions	Activities	Programs
3	0	3	0	2	2	2	3

Findings: Social and Community Context revealed three (3) equal primary subcategories among this Domain to include **Community**, **Resource Awareness** and **Programs**.

Community success indicators included *overall community awareness* and an *“it takes a village” mentality* while the one barrier mentioned was the *integration of community events*.

Resource Awareness success indicators noted *knowledge about programs and community resources* with the one barrier acknowledging the *need for community information to be in several languages*.

Programs success indicators noted *youth programs being widely available*, while the barriers noted the *lack of availability of programs after hours* and a *gap of youth programs focused on middle school students (ages 10-12)*.

4 th - Neighborhood and Built Environment						
Transportation	Physical Space	Technology	Safety	Outdoor Recreation	Resource Access	Healthy Nutrition Access
2	0	3	2	0	4	3

Findings: The Neighborhood and Built Environment **SDoH** Domain serves as the 4th Domain of focus for Temple Terrace families with **Resource Access** serving as the primary subcategory and **Technology** and **Health Nutrition** reflecting equal secondary subcategories.

Resource Access noted *access to therapy* and *sliding fee scales for clinics* as success indicators while also noting barriers including the need for *resource information to be in several languages* and an *overall lack of knowledge to available resources and education*.

Technology success indicators mentioned by families were *access to technology programs and less technology distractions*. The one technology barrier noted by families was *too much exposure for young people to internet and that technology access, not being monitored*.

Health Nutrition success indicators noted *access to vitamins* while the barriers to healthy nutrition identified *lack of access to healthy foods like fresh fruits and vegetables especially among those living in food deserts*.

Temple Terrace-specific Community Survey Data (N=36) noted fifty-three percent (**53%**) of Temple Terrace families would like to see nutrition programs offered in their community.

5 th - Economic Stability			
Economic	Employment	Financial Stability	Housing
1	3	2	1



Temple Terrace Community Town Hall

Findings: Economic Stability was the last domain identified by Temple Terrace families with **Employment** serving as the primary area of focus.

Employment success indicators were represented by *workplace job placement* while the barriers to employment included *lack of education, skills trade* and *immigration status*.

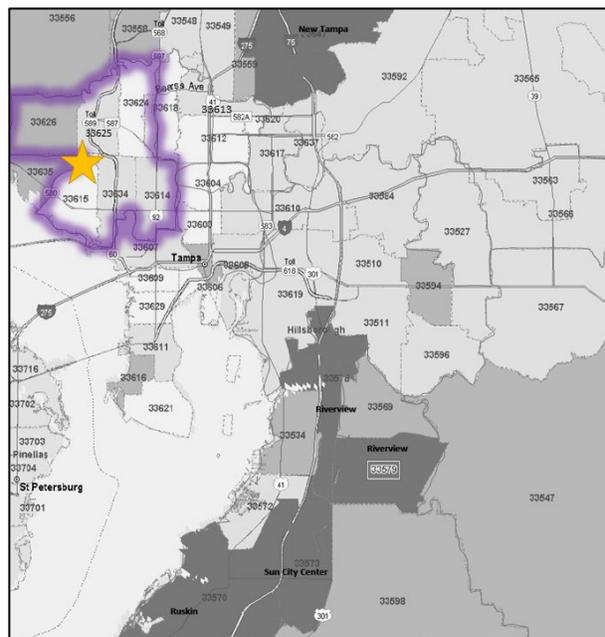
Key Temple Terrace Takeaways:

- ☞ Temple Terrace parents care about their physical health and would like to see more health-related resources made available that would allow them to better manage their own health and that of their families.
- ☞ Mental health supports have also been acknowledged as an important part of the overall health of their household and families would like to see more access to mental health professionals. This would include professional therapists, counselors, and others.
- ☞ Temple Terrace families want to develop their skills in a few different areas including workforce, parenting, financial literacy, and home economic-type skills.
- ☞ Families see the value of being more involved with school but may feel like immigration status may present barriers in addition to the overall lack of familiarity with the education system.
- ☞ Families care about their community and want to continue to cultivate that sense of community but may not know what opportunities exist for them to safely build community.
- ☞ Families want to utilize existing resources but may not know what resources are available or where to go to get the information. Some families will continue to struggle with accessing resources if resource information is not shared in multiple languages.
- ☞ Families want to see youth programs be more widely available in multiple locations throughout the community. This need for increased youth programs should make sure to include middle school-aged children from 10-12 years of age.
- ☞ Families noted the over-exposure to technology and the negative impacts it may have on their children and themselves, especially when that exposure is not monitored or managed by parents.
- ☞ Temple Terrace families would like to see and have access to more nutrition-specific opportunities or resources like vitamins, healthy food options, and fresh fruits and vegetables especially in areas where they are not easily accessible.
- ☞ Families care about being employed and in positions that will provide them with a living wage and are willing to increase their job skills to access better paying jobs.

TOWN 'N COUNTRY

(*ZIP CODES 33609, 33614, 33615, 33624, 33625, 33626, 33634, 33635)

Town 'N Country community participation included five (5) community town hall participants and seventy-eight (78) Town 'N Country-specific community survey respondents for a total of eighty-three (83) engaged Town 'N Country-specific community participants.



Town 'N Country SDoH Domains in Ranked Order

1 st - Health and Health Care
2 nd - Neighborhood and Built Environment
3 rd - Education
4 th - Social and Community Context
5 th - Economic Stability

(*Zip codes listed represent zip codes served by the local Children's Board Family Resource Center)

PRIMARY DOMAIN FINDINGS

1 st - Health and Health Care					
Self-Care	Mental / Emotional Health	Parenting Behaviors	Cleanliness	Physical Health	Food / Nutrition
2	2	8	0	4	1

Findings: Health and Health Care was the first **SDoH** Domain identified by Town 'N Country families with **Parenting Behaviors** serving as the primary focus. Parenting Behaviors was included under Health and Health Care due to its intimate connection to the mental wellbeing of parents.

Parenting Behaviors indicators of success include *the ability to say no, significant parent involvement, being a role model, listening and being respectful and teaching love, compassion and empathy. Individual responsibility* was noted as the one barrier to this success.



Town 'N Country Community Town Hall

2 nd - Neighborhood and Built Environment						
Transportation	Physical Space	Technology	Safety	Outdoor Recreation	Resource Access	Healthy Nutrition Access
0	2	2	0	2	4	0

Findings: Neighborhood and Built Environment become the 2nd SDoH Domain for Town 'N Country families with **Resource Access** serving as the primary subcategory.

Resource Access success indicators include *access to education for young people* and *access to addiction services*.

3 rd - Education					
Education	Structure / Responsibility	Special Needs	Language	Skills Development	Parenting
4	0	0	1	3	1

Findings: Education serves as the 3rd SDoH Domain identified by Town 'N Country families with **Education** serving as the primary concern followed by **Skills Development** as the secondary.

Education success indicators mentioned the importance of young people *knowing their gifts and talents* and an *overall access to education*. The one noted barrier to success was *fear of failure in successfully accomplishing academic goals*.

Skills Development indicators of success include the *ability to navigate virtual learning environments*, *access to parenting workshops* and *the ability to say "no"*.

4 th - Social and Community Context							
Community	Structural Deficiencies	Resource Awareness	Socialization	Childcare	Traditions	Activities	Programs
1	0	1	2	0	2	2	0

Findings: No primary findings could be identified due to the low number of responses to this Domain, however, a few success indicators were noted. Town 'N Country families would like to see *safe spaces for healthy social interactions* to include *outdoor activities and goal setting or working as a team*.

5 th - Economic Stability			
Economic	Employment	Financial Stability	Housing
0	2	2	1

Findings: No primary findings could be identified due to the low number of responses to the Economic Stability Domain. A few barriers to success were mentioned, however. Town 'N Country's noted barriers in economic stability included *domestic violence, lack of housing, cost of living, and language barriers*.

Key Town 'N Country Takeaways:

- ☞ Town 'N Country families are able to acknowledge the impact their own parenting behaviors can have on the success of their home and want to continue to manage their homes with love, compassion and respect.
- ☞ Families want access to good quality education for their children as well as access to services for families that may be struggling with addiction or abuse.
- ☞ Families want to ensure that overall access to education for themselves and their children is critically important to the success of their family.
- ☞ Town 'N Country families want to be able to navigate the various virtual learning environments that are required of them during the pandemic.
- ☞ Families would like to utilize various workshop and training opportunities especially those that support them in becoming better parents.
- ☞ Town 'N Country families want to continue to see safe spaces for healthy social interactions both for their children and for themselves.
- ☞ Families are facing many barriers to their own economic stability including domestic violence, increased housing and living costs, underemployment and significant language barriers.





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COMMUNITY TOWN HALL DATA PRESENTED BY SDOH DOMAIN SUMMARY

Graphic 1.1 – Social Determinants of Health Domains

The following Community Town Hall data is being presented through the **Social Determinants of Health’s (SDoH)** five (5) key determinant areas or domains (*graphic 1.1 – Social Determinants of Health Domains at right*).

Each of these five (5) determinant areas reflect a number of key issues or subcategories that make up the underlying factors in each **SDoH** arena.



Each Domain represents a grouping of subcategories identified as part of the capture of Town Hall data and analysis process. For example: the **SDoH Social and Community Context** Domain - reflects the following subcategories as identified by Community Town Hall data:

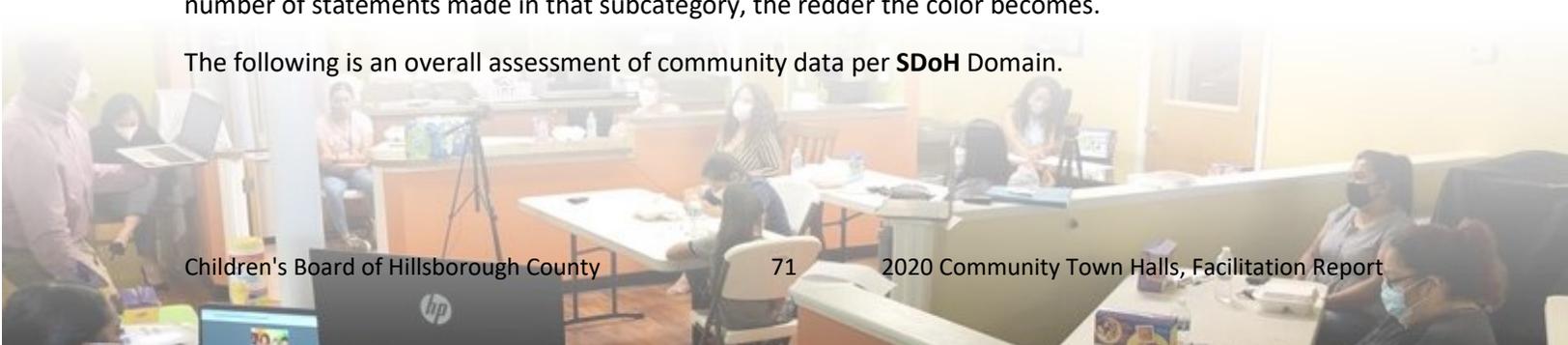
- Community
- Socialization
- Childcare
- Structural Deficiencies
- Resource Awareness
- Traditions
- Activities
- Programs

Each of the seven (7) Community Town Hall-engaged communities is represented in each domain along with the findings associated with each subcategory reflected in the following colors.

Low Priority	Medium Priority	High Priority	Highest Priority
--------------	-----------------	---------------	------------------

The number in each cell reflects the number of statements made by each community per subcategory and impacts the priority level. Ten (10) statements in one category will reflect a higher priority and redder shade in that cell than three (3) statements in another which will show a greener shade. Low priority (green shading) means less statements were made regarding that subcategory. The higher the number of statements made in that subcategory, the redder the color becomes.

The following is an overall assessment of community data per **SDoH** Domain.



Community Town Hall Data by SDoH Domain Summary

Health and Health Care							
	Self-Care	Mental / Emotional Health	Parenting Behaviors	Cleanliness	Physical Health	Food / Nutrition	
Brandon	6	2	4	1	6	4	23
Central Tampa	2	10	2	2	13	2	31
East County	4	9	5	2	7	2	29
North Tampa	7	1	2	0	3	1	14
South County	2	7	2	0	7	1	19
Temple Terrace	1	6	3	1	7	3	21
Town 'N Country	2	2	8	0	4	1	17
	24	37	26	6	47	14	154

Education							
	Education	Structure / Responsibility	Special Needs	Language	Skills Development	Parenting	
Brandon	12	2	0	0	1	0	15
Central Tampa	3	0	1	2	8	4	18
East County	4	1	0	0	4	2	11
North Tampa	9	0	1	1	6	2	19
South County	1	0	0	3	7	3	14
Temple Terrace	7	0	0	1	8	1	17
Town 'N Country	4	0	0	1	3	1	9
	40	3	2	8	37	13	103

Neighborhood and Built Environment								
	Transportation	Physical Space	Technology	Safety	Outdoor Recreation	Resource Access	Healthy Nutrition Access	
Brandon	1	2	2	2	2	3	1	13
Central Tampa	0	2	2	4	1	6	1	16
East County	1	1	4	0	1	4	2	13
North Tampa	0	7	3	6	3	2	1	22
South County	1	2	4	4	2	3	0	16
Temple Terrace	2	0	3	2	0	4	3	14
Town 'N Country	0	2	2	0	2	4	0	10
	5	16	20	18	11	26	8	104



Social and Community Context									
Community	Structural Deficiencies	Resource Awareness	Socialization	Childcare	Traditions	Activities	Programs		
Brandon	0	1	1	8	1	5	2	1	19
Central Tampa	3	6	2	5	2	0	4	3	25
East County	1	0	0	2	0	5	1	1	10
North Tampa	0	0	1	4	2	2	3	1	13
South County	2	1	1	4	3	0	3	6	20
Temple Terrace	3	0	3	0	2	2	2	3	15
Town 'N Country	1	0	1	2	0	2	2	0	8
	10	8	9	25	10	16	17	15	110

Economic Stability					
	Economic	Employment	Financial Stability	Housing	
Brandon	1	1	4	2	8
Central Tampa	3	7	5	4	19
East County	0	2	3	4	9
North Tampa	1	5	3	3	12
South County	2	1	3	1	7
Temple Terrace	1	3	2	1	7
Town 'N Country	0	2	2	1	5
	8	21	22	16	67

Community-specific Social Determinants of Health – Cumulative Reflection Summary

	Neighborhood and Built Environment	Education	Social and Community Context	Health and Health Care	Economic Stability	Other
Brandon	13	15	19	23	8	6
Central Tampa	16	18	25	31	19	9
East County	13	11	10	29	9	15
North Tampa	22	19	13	14	12	2
South County	16	14	20	19	7	9
Temple Terrace	14	17	15	21	7	7
Town 'N Country	10	9	8	17	5	14
	104	103	110	154	67	62



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**Thank you for participating in the
Children's Board of Hillsborough County's
Community Survey!**

Before you get started, there are just a couple of things you should know:

- The purpose of the Children's Board Community Survey is to create a level of understanding regarding the needs and the status of children and families in Hillsborough County.
- Your contribution today will be added to surveys collected by families across Hillsborough County and will help to inform future funding and program service delivery.
- Because we believe it is important to hear from the various generations living in your household, some questions will be specific to women, children, parents, and older adults living in your home.
- In an effort to identify any gender disparities among our families, a few questions will specifically ask the gender of the person(s) in your household including your child(ren). Although you may choose not to answer this question, we hope that you will.
- Although we would like you to respond to the questions you feel most comfortable answering, please consider answering **all** of the questions as we hope to receive the most accurate reflection of families.
- This survey consists of fifty-five (55) questions. I know that may seem like a lot but they are primarily multiple choice and check boxes so it won't take you as long as you might think.
- If you choose to share your email to receive more information regarding the upcoming Children's Board Community Town Halls, your email will not be shared in any public documents and will only be used to send you information regarding the Community Town Halls.
- All data collected as part of this survey will be kept confidential by the staff and Board of both the **Children's Board of Hillsborough County** and Community Town Hall consultant, **16 Point Compass Consulting, LLC**.

The first few questions of the Community Survey will focus on basic household identifier questions:

Household Zip Code: _____ Gender _____ (the parent/guardian completing survey)

How did you hear about the Community Survey?

- | | | |
|---|--|---|
| <input type="checkbox"/> Local Children's Board
Family Resource Center | <input type="checkbox"/> Local business
Social Media | <input type="checkbox"/> Children's Board of
Hillsborough County |
| <input type="checkbox"/> Community Nonprofit | <input type="checkbox"/> Friend/family
Group or Association | <input type="checkbox"/> Other: _____ |

How many people are living in your household? _____

How many children living in your household?

(Please note the number of children in each age bracket)

_____ Birth – 5 years old	_____ Middle School (6-8)
_____ Kindergarten – 5 th grade	_____ High School (9-12)

Coronavirus Household Impact Questions

Was your household significantly impacted by the Coronavirus pandemic?

- Yes No Not Sure Other:

If yes, in what ways? (please mark all that apply)

<input type="checkbox"/> Loss of child support	<input type="checkbox"/> Physical Health	<input type="checkbox"/> Mental health concerns
<input type="checkbox"/> Reduced work hours	<input type="checkbox"/> Job loss	(depression, increased anxiety, etc)
<input type="checkbox"/> Academic hardship(s) for child(ren)	<input type="checkbox"/> Food insecurity (<i>unsure about where the next meal will come from</i>)	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Lack of basic resources		

Were helpful resources made available or accessible to you and/or your family?

- Yes No Not Sure Other:

Was your family able to utilize any of the resources made available to you?

Yes No Not Sure Other:

If yes, what resources did you utilize?

Open ended response: _____

Did you need any vital resources that were not available to you and your family? (if so, please list below)

Open ended response: _____

Moving forward, what do you anticipate will be your pressing family/household concern?

Open ended response: _____

General Community Satisfaction Questions

Do you enjoy living in the community you are currently living in?

- Yes No Not Sure Other:

Do you interact with members from your community? i.e. neighbors

Yes No Not Sure Other:

Do you feel a sense of community among your neighbors in and around your neighborhood?

- Yes No Not Sure Other:

Is that important to your level of community satisfaction?

Yes No Not Sure Other:

In what ways do you find yourself interacting with members of your community?

Open ended response: _____

If your family could identify one community-issue that you would like fixed, what would it be?

Open ended response: _____

Did you/Do you feel isolated due to Coronavirus?

- Yes No Not Sure Other:

Household Question(s)

Have you reached out to any community organizations, city or county services, faith-based institutions or other human service organizations for resources associated with your household?

- Yes No Not Sure Other:

Are you currently experiencing any hardships related to your household that are not associated with Coronavirus?

- Yes No Not Sure Other:

If yes, in what ways and in what areas?

Open ended response: _____

*What areas would have the greatest positive impact on the success of your household?
(Please check all that apply)*

- | | |
|--|--|
| <input type="checkbox"/> Accessible and or reliable transportation | <input type="checkbox"/> Access to technology, computers, internet |
| <input type="checkbox"/> Mental Health Wellness resources | <input type="checkbox"/> General Child Safety, etc. |
| <input type="checkbox"/> Access to greenspace to include pools and parks | <input type="checkbox"/> Community safety initiatives |
| <input type="checkbox"/> Whole family recreational activities | <input type="checkbox"/> Safe, affordable and/or available housing |
| <input type="checkbox"/> Resources like groceries, etc. | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Utilities, rent and other financial supports | |

Intergenerational Questions

*How many generations are currently living in your home?
(grandparent + parent + child = 3 generations)*

Are there any intergenerational interactions between generations in your household?

- Yes No Not Sure Other:

If yes, what types of intergenerational activities and interactions do you participate in with the rest of the family?

Open ended response: _____

Education Question – Child

Does your child(ren) enjoy school?

- Yes No Not Sure Other:

Does your child(ren) struggle in school with any subjects?

- Yes No Not Sure Other:

Do you and your child have access to the necessary resources needed for your child(ren) to succeed in their schooling?

- Yes No Not Sure Other:

What do you find to be the greatest academic/school challenge your child(ren) faces?

Open ended response: _____

Education Question – Adult

(For the following three (3) questions, please mark all responses that apply to you with an X)

What areas of adult development are available to you?

- | | | |
|---|---|---|
| <input type="checkbox"/> Parenting workshops | <input type="checkbox"/> Educational resources and classes | <input type="checkbox"/> Health and Nutrition Programming |
| <input type="checkbox"/> Recreational activities | <input type="checkbox"/> Employment training or certification | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Physical Health Services | | |

Which if any has anyone in your household utilized within the past 6 months?

- | | | |
|---|---|---|
| <input type="checkbox"/> Parenting workshops | <input type="checkbox"/> Educational resources and classes | <input type="checkbox"/> Health and Nutrition Programming |
| <input type="checkbox"/> Recreational activities | <input type="checkbox"/> Employment training or certification | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Physical Health Services | | |

Which areas would you like to see offered in your community?

- | | | |
|---|---|---|
| <input type="checkbox"/> Parenting workshops | <input type="checkbox"/> Educational resources and classes | <input type="checkbox"/> Health and Nutrition Programming |
| <input type="checkbox"/> Recreational activities | <input type="checkbox"/> Employment training or certification | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Physical Health Services | | |

Family Health

Physical Health

How would you describe your family's overall physical health?

- Not physically healthy
 Somewhat physically healthy
 Physically healthy
 Very Physically healthy

*What would you say contributes **MOST** to your family's physical health (positive (+) or negative (-))?*

- Physical health resources
 Physical health education
 Time for physical activity
 Prioritizing physical health

Mental Health & Wellness

Do you see value in mental health support for you and/or your family?

- Yes
 No
 Not Sure
 Other:

Is access to mental health support important to the success of your family?

- Yes
 No
 Not Sure
 Other:

Food

*Which of these statements best describes the food eaten in your household **BEFORE** Coronavirus began?*

- Enough of the kinds of food we want to eat
 Enough, but not always the kinds of food we want to eat
 Sometimes there's not enough to eat
 Often there's not enough to eat

*Which of these statements best describes the food eaten in your household **DURING** the Coronavirus?*

- Enough of the kinds of food we want to eat
 Enough, but not always the kinds of food we want to eat
 Sometimes there's not enough to eat
 Often there's not enough to eat

Have you and/or anyone in your household in the last 6 months had to skip any meals because there wasn't enough access to food?

- Yes
 No
 Not Sure
 Other:

Transportation

Is or has lack of transportation become a barrier for any part of your household within the past 6 months?

- Yes
 No
 Not Sure
 Other:

Does or has the lack of access to reliable transportation options have/had a negative impact on you and or your family's success?

- Yes
 No
 Not Sure
 Other:

Please explain: _____

Social

Have you or any member of your family participated in in any community -wide social functions like a fair, block party, or other community event in the past 6 months?

- Yes No Not Sure Other:

Are there opportunities for your family to get to know or engage other families in your community in healthy ways like a community picnic or block party?

- Yes No Not Sure Other:

Is getting to know other families in your neighborhood important to you and your family?

- Yes No Not Sure Other:

Do you see any benefit to positive social interactions with other families in your community?

- Yes No Not Sure Other:

Parent Involvement

Are you involved in any programs, services, activities or community groups related to parenting or to building a healthy family?

- Yes No Not Sure Other:

If Yes, what programs services or community groups?

Open ended response: _____

If No, why not?

Open ended response: _____

Are programs, services, activities, or community groups related to parenting or building a healthy family important to the overall success of your family?

- Yes No Not Sure Other:

Where do you currently get news and information regarding programs and services available to you and others in your household?

Open ended response: _____

Additional Concerns

In this space, please include any concerns that may not have been brought up in this survey and that is or has recently impacted your family/household.

CBFRC Received: ___/___/___ by: _____

Child/Family Dynamic Questions – Questions for the Child

Parents: This next section is meant for your child(ren) to complete.
Please answer the following two (2) questions only before they begin.

Gender of child completing survey? _____

Grade of child completing survey? _____

How do you normally feel at home?

(Check all that apply)

- | | | | |
|--------------------------------|----------------------------------|---------------------------------|---------------------------------|
| <input type="checkbox"/> Happy | <input type="checkbox"/> Excited | <input type="checkbox"/> Joy | <input type="checkbox"/> Sad |
| <input type="checkbox"/> Bored | <input type="checkbox"/> Angry | <input type="checkbox"/> Scared | <input type="checkbox"/> Other: |

Before stay-at-home orders, were you part of any afterschool programs like sports, clubs, groups or any other place that was not school or home?

- | | | | |
|------------------------------|-----------------------------|-----------------------------------|--------------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Not Sure | <input type="checkbox"/> Other |
|------------------------------|-----------------------------|-----------------------------------|--------------------------------|

If yes, what kinds of activities were you involved in?

(Check all that apply)

- | | |
|--|---|
| <input type="checkbox"/> Sports | <input type="checkbox"/> Art Classes |
| <input type="checkbox"/> School club | <input type="checkbox"/> Hanging out at parks/playgrounds |
| <input type="checkbox"/> Community center | <input type="checkbox"/> A job |
| <input type="checkbox"/> Faith or place of worship | <input type="checkbox"/> Other: _____ |

*Place a check next to all the activities **you do** at home?*

- | | | |
|--|--|---|
| <input type="checkbox"/> Watch TV | <input type="checkbox"/> Video games | <input type="checkbox"/> Reading |
| <input type="checkbox"/> Homework | <input type="checkbox"/> Virtual hangouts with friends | <input type="checkbox"/> Internet |
| <input type="checkbox"/> Games at home | <input type="checkbox"/> Drawing or painting | <input type="checkbox"/> Musical instrument |
| <input type="checkbox"/> Play outside | <input type="checkbox"/> Music | <input type="checkbox"/> Write |
| <input type="checkbox"/> On social media | | <input type="checkbox"/> Other: _____ |

*What types of activities **would you like to do** at home?*

Open ended response: _____

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FULL SET OF RESPONSES TO ALL COMMUNITY SURVEY QUESTIONS

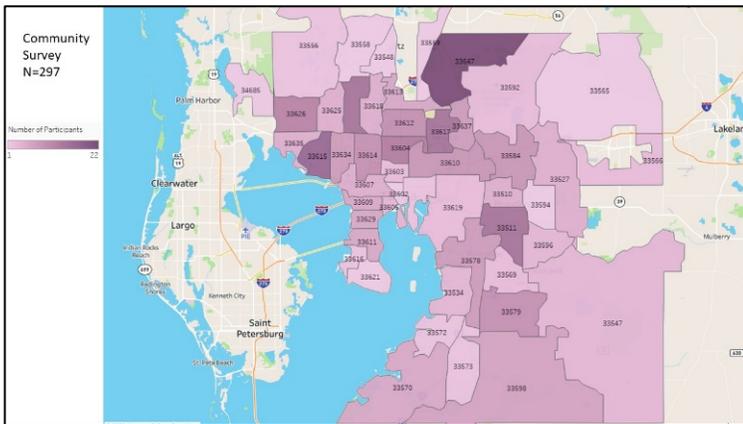
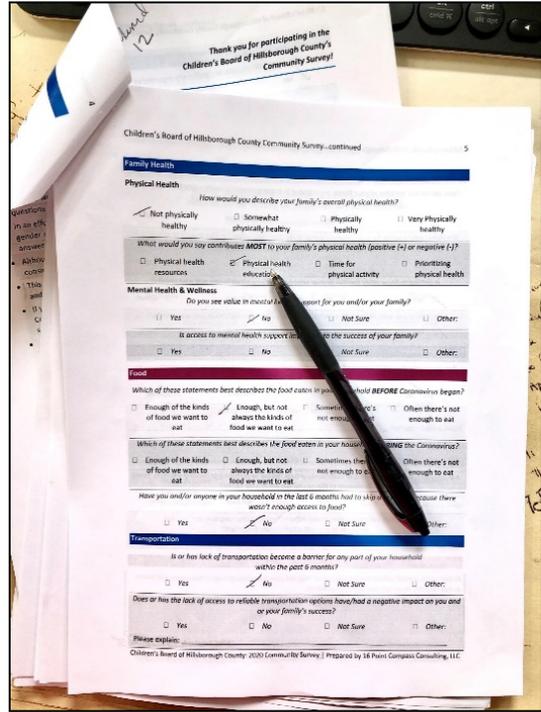
The following information represents the data collected as part of the County-wide Community Survey consisting of seventy-six (55) questions.

Opportunities to complete the Community Survey were provided through a digital submission process as well as a downloadable paper printout, both found on the website, www.CBHC2020.com.

Additionally, paper surveys were promoted and made available at each of the Children’s Board Family Resource Centers and the Children’s Board of Hillsborough County.

The Community Survey was presented in both English and Spanish versions.

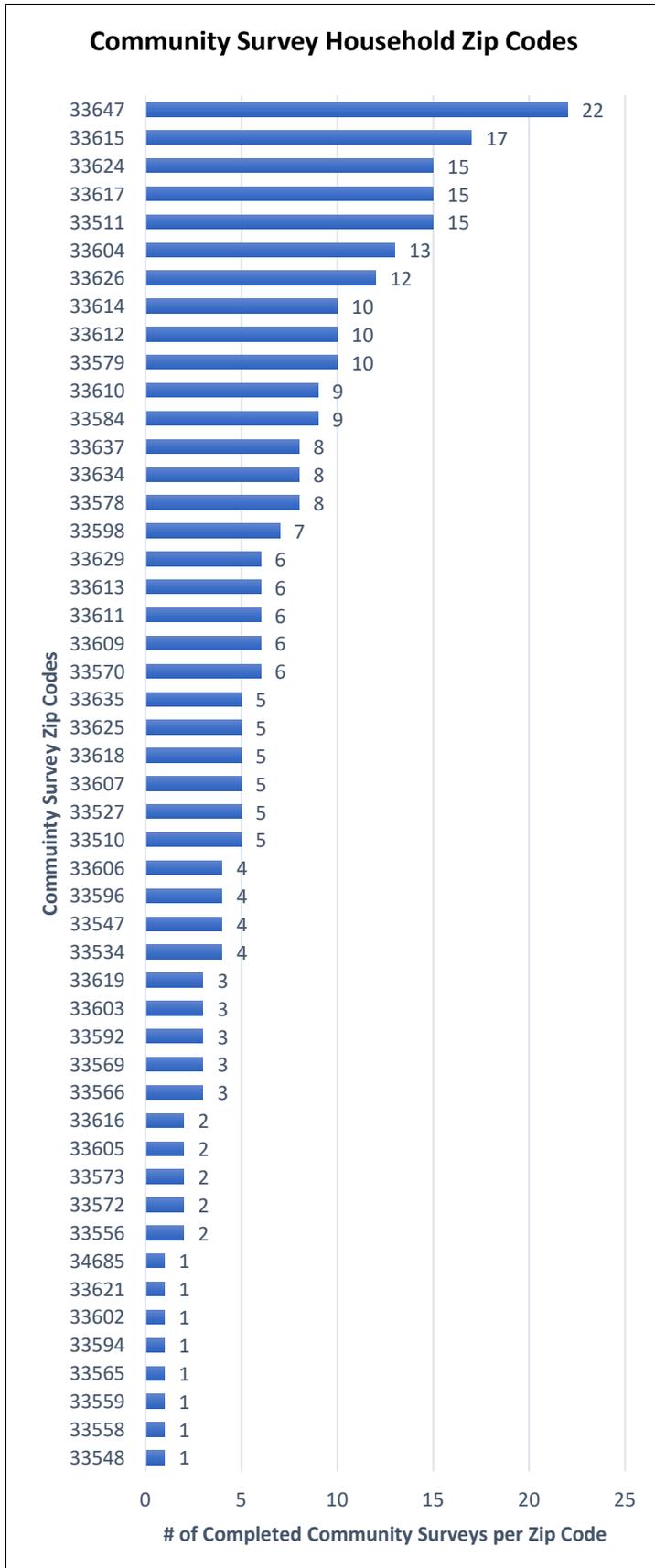
The Community Survey was promoted through a significant number of community partners, media outlets and digital platforms.



This collection of data represents two hundred ninety-seven (297) unique or individual adult respondents and three hundred seventeen (317) children that completed the child portion of the survey. The community survey was completed throughout Hillsborough County representing forty-nine (49) zip codes found throughout the County.

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Of fifty-three (**53**) zip codes found throughout Hillsborough County, two hundred ninety-three (**297**) total completed Community Surveys represents ninety-two percent (**92%**) or forty-nine (**49**) of the fifty-three (**53**) Hillsborough County zip codes.

Of the seven (**7**) Children’s Board Family Resource Center-focused communities, the **percentage of Community Survey data received per community** in ranking order are as follows:

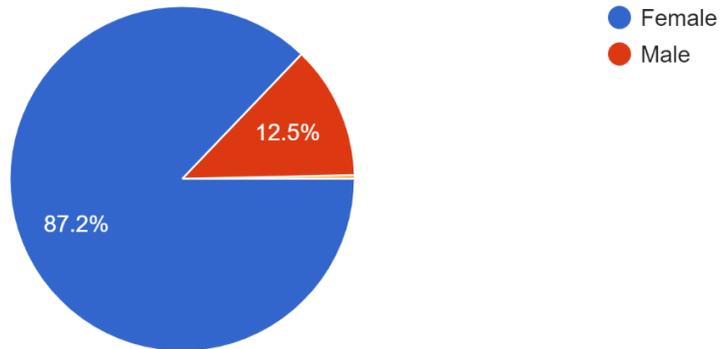
- Town ‘N Country @ **26%**
- Brandon @ **20%**
- South County @ **15%**
- North Tampa @ **12%**
- Temple Terrace @ **12%**
- Central Tampa @ **9%**
- East County @ **1%**

The Top five (**5**) Community Survey Data-represented zip codes and corresponding communities are as follows:

- 33647 (New Tampa) @ **7%**
- 33615 (Town ‘N Country) @ **6%**
- 33624 (Town ‘N Country) @ **5%**
- 33617 (Temple Terrace) @ **5%**
- 33511 (Brandon) @ **5%**

Gender (of the parent/guardian completing the survey)

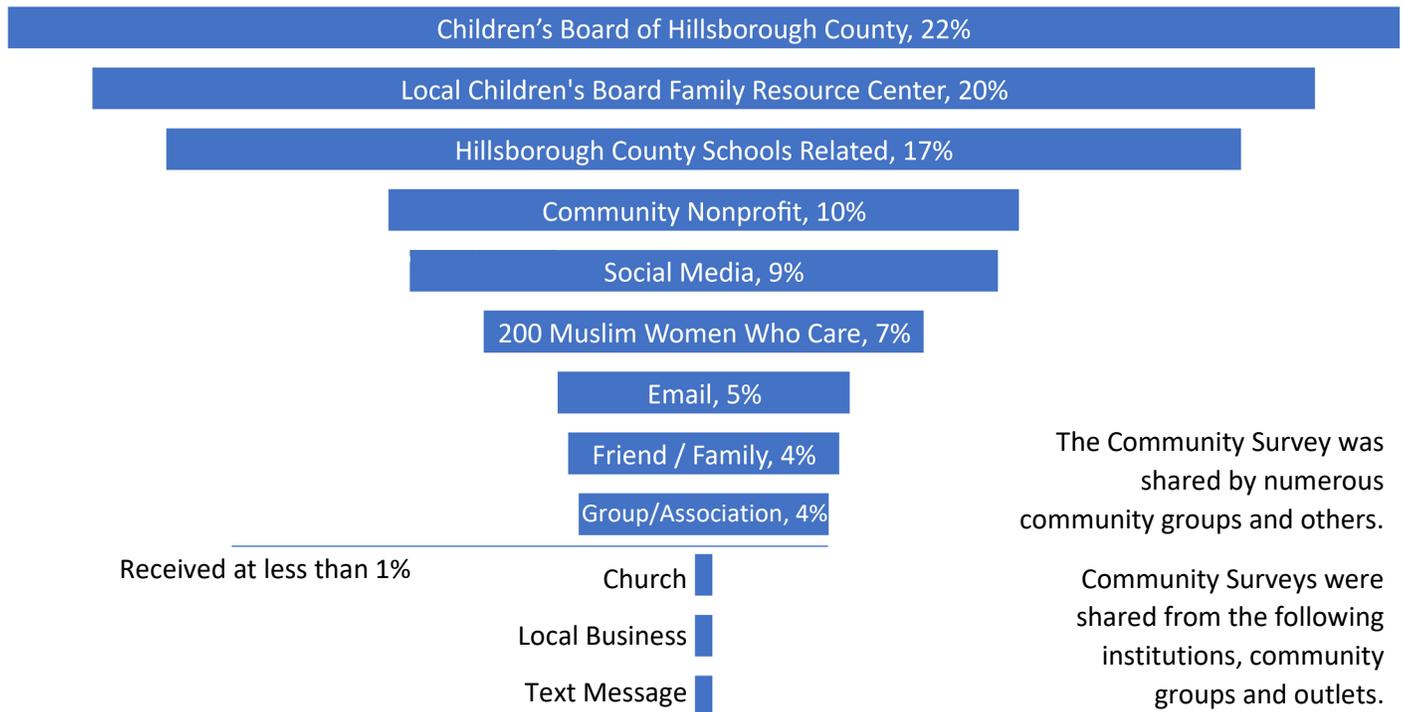
296 responses



Of the two hundred ninety-six (296) Community Survey data respondents, eighty-seven-point two percent (87.2%) identified as female while twelve-point five percent (12.5%) identified as male.

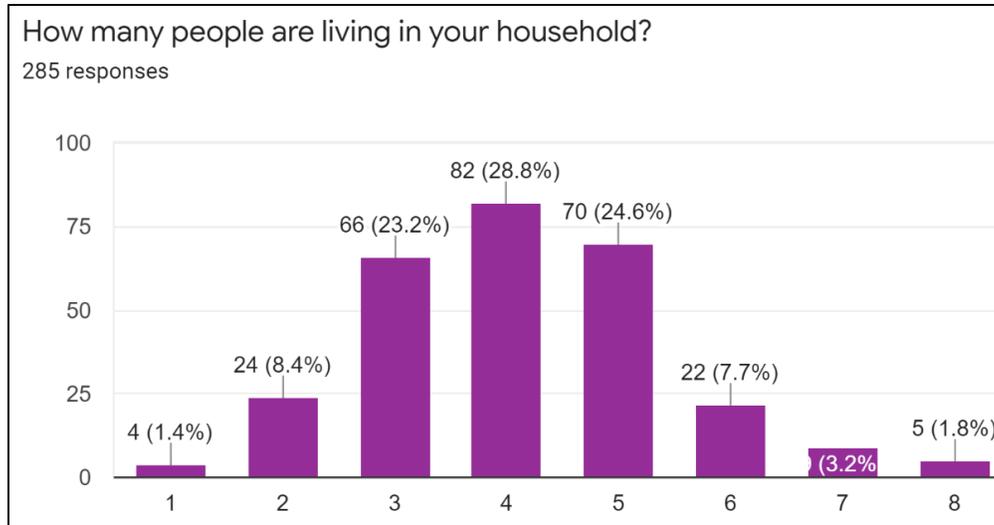
*☝ This Community Survey question specifically asked about the **gender** of respondents as opposed to the **sex** of respondents. The given response options however, are associated with the identities of **sex** rather than **gender**. Although this can be seen as a flaw in the question itself, it did not impact the results, as the responses of sex rather than gender **female/woman** and **male/man** were similarly implied.*

How respondents heard about the Community Survey (N=296)



The Community Survey was shared by numerous community groups and others.

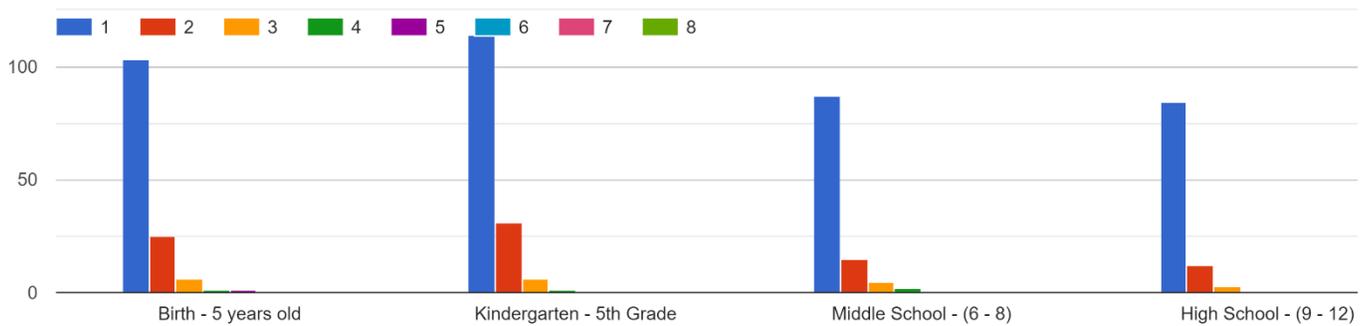
Community Surveys were shared from the following institutions, community groups and outlets.



Of the two hundred eighty-five (**285**) responses to the Community Survey question of household size, the majority or twenty-eight-point eight percent (**28.8%**) of households had four (**4**) people living with them. This was followed by twenty-four-point six percent (**24.6%**) of households with five (**5**) people residing in the home and twenty-three-point two percent (**23.2%**) with three (**3**) members of the household. Nine-point eight percent (**9.8%**) of families had no more than two (**2**) members in the household while almost thirteen percent (**13%**) or thirty-eight (**38**) families had family sizes of six (**6**) or more members of the household.

The average household size of Community Survey data respondents was four-point one (**4.1**) persons per household.

How many children living in your household?



Six hundred twenty-three (**623**) children were identified in their respective age/grade levels.

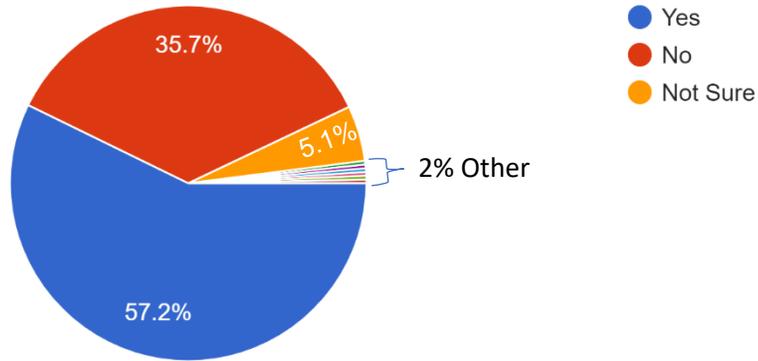
The number of children listed in the homes of families who responded to the survey included more children from Kindergarten – 5th grade at thirty-two percent (**32%**). Twenty-eight percent (**28%**) of children were ages birth – 5 years old, twenty-two percent (**22%**) of children represented were middle school grades 6 – 8th and nineteen percent (**19%**) of the six hundred twenty-three (**623**) children were high school students.



Coronavirus Household Impact Questions

Was your household significantly impacted by the Covid-19 pandemic?

297 responses



One hundred seventy (**170**) or fifty-seven-point two percent (**57.2%**) of households indicated being impacted by the Covid-19 pandemic while one hundred six (**106**) or thirty-five-point seven (**35.7%**) indicated not being impacted by the pandemic. Five-point one percent (**5.1%**) indicated **not sure** with two percent (**2%**) stating other.



**Female and male respondents indicated similar impact percentages with men being impacted at a rate of fifty-nine percent (59%) while women indicated being impacted by the pandemic at a rate of fifty-eight percent (58%).*

Of the one hundred seventy (**170**) affirmative responses to the question of *households impacted by the Covid-19 pandemic*, the top eight (**8**) areas impacted in ranked order were:

- | | |
|--|---|
| 1. Reduced work hours @ 47.6% | 5. Lack of basic resources @ 27.6% |
| 2. Mental health concerns (depression, increased anxiety) @ 47.1% | 6. Food insecurity @ 20% |
| 3. Academic hardships for children @ 44.7% | 7. Physical health @ 15.3% |
| 4. Job loss @ 41.2% | 8. *Loss of child support @ 10.6% |

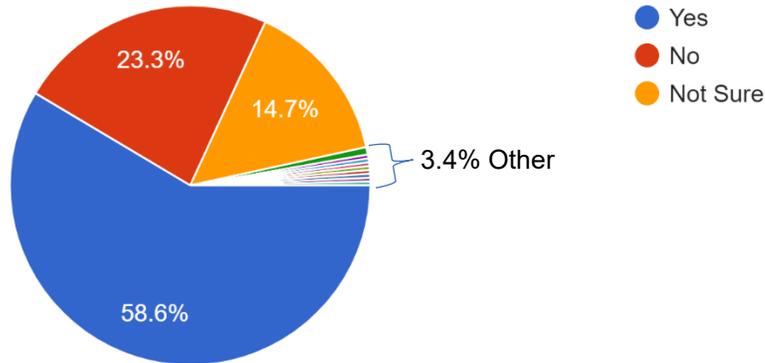


**Loss of child support was the only Covid-19 impact category that impacted female respondents almost exclusively.*

Coronavirus Household Impact Questions

Were helpful resources made available or accessible to you and/or your family?

292 responses



Fifty-eight-point six percent (**58.6%**) of respondents noted that resources were made available or accessible to their families while twenty-three-point three percent (**23.3%**) of families indicated resources not being made available or accessible to their families.

Fourteen-point seven percent (**14.7%**) of families were not sure if resource were made available or accessible.

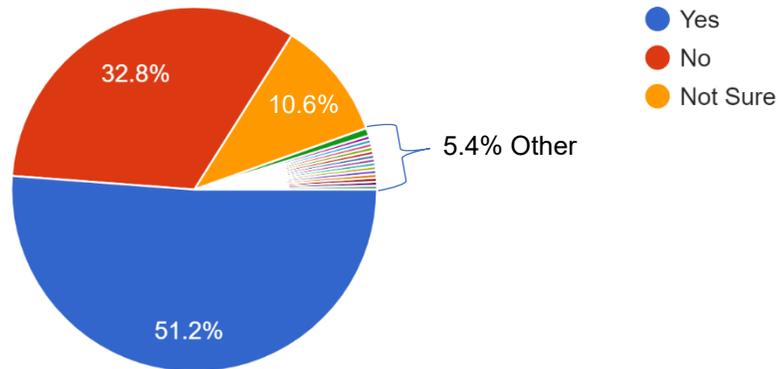
Three-point four percent (**3.4%**) of families noted responses other than **yes**, **no** or **not sure**.

**No significant statistical differences were noted between female and male respondents.*

Coronavirus Household Impact Questions

Was your family able to utilize any of the resources made available to you?

293 responses



One hundred fifty (**150**) or Fifty-one-point two percent (**51.2%**) of families were able to utilize resources made available to them while thirty-two-point eight percent (**32.8%**) of families indicated their family was not able to utilize available resources.

Ten-point six percent (**10.6%**) of families were not sure while five-point four percent (**5.4%**) indicated “other”.

**No significant statistical differences were noted between female and male respondents.*

Among the one hundred fifty (**150**) families that were able to utilize resources made available to them, the top 8 resources utilized in ranked order were:

- | | |
|------------------------------------|-----------------------------------|
| 1. Food-related @ 42% | 5. Employment-related @ 9% |
| 2. School-related @ 11% | 6. Childcare-related @ 8% |
| 3. Technology-related @ 11% | 7. Health-related @ 7% |
| 4. Housing-related @ 9% | 8. Economic-related @ 4% |

Eighty-three (**83**) of one hundred ninety-six (**196**) or forty-two percent (**42%**) of families indicated needing specific vital resources that were not made available to them. Unavailable resources of note outlined in priority levels among families included:

Highest level of priority among families

Economic and physical and mental health-related

Middle level of priority among families

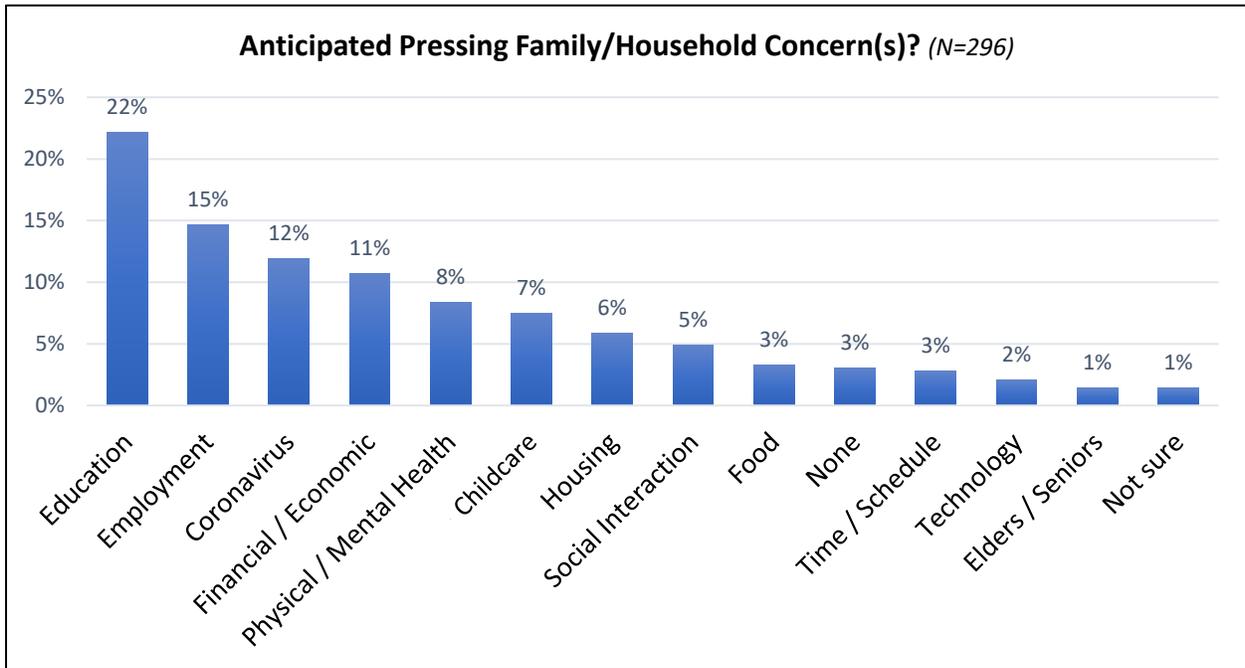
Childcare, food and employment-related

Lowest level of priority among families

Housing, school and technology-related

**No significant statistical differences were noted between female and male respondents.*

Coronavirus Household Impact Questions



Two hundred eighty-seven (**287**) respondents expressed four hundred twenty-nine (**429**) anticipated pressing concerns. Of the noted concerns, ***education** garnered the greatest amount of concern among families.

**Focus on Education as the primary concern among families could be attributed to the timing of the community survey implementation tool taking place just weeks prior to the start of the new school year with reopening plans amid the pandemic gaining increased media coverage.*

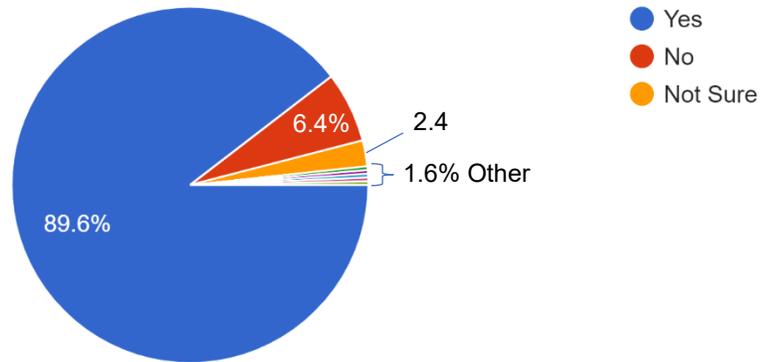
The second greatest anticipated concern related to **employment** followed by issues related specifically to the **Coronavirus**. **Financial and economic concerns** followed by **physical and mental health** concerns were considered 4th and 5th areas of anticipated concern, respectively.

**No significant statistical differences were noted between female and male respondents.*

General Community Satisfaction Questions

Do you enjoy living in the community you are currently living in?

297 responses



The vast majority of respondents *enjoy living in the community they are currently living in* at eighty-nine-point six percent (**89.6%**) versus six-point four percent (**6.4%**) of respondents that do not *enjoy living in the community they are currently living in*. Two-point four percent (**2.4%**) indicated being not sure while one-point six percent (**1.6%**) indicated a response other than **yes**, **no** or **not sure**.

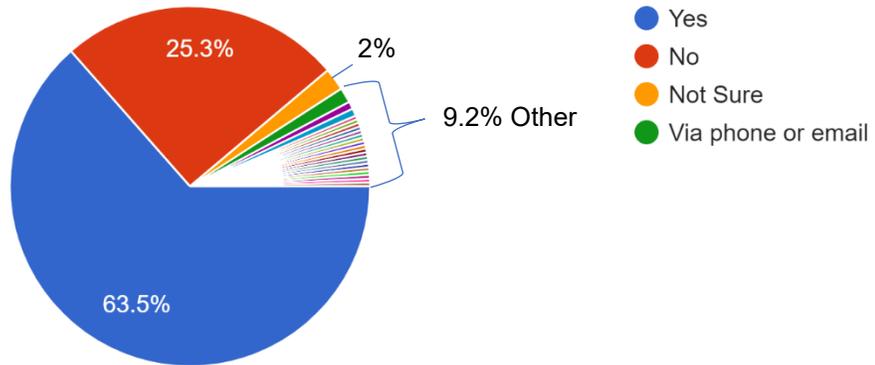
This sentiment was reflected among all seven (7) Community Town Hall-engaged communities.

**No significant statistical differences were noted between female and male respondents.*

General Community Satisfaction Questions

Do you interact with members from your community? i.e. neighbors

296 responses



Roughly two-thirds (**2/3**) or sixty-three percent (**63.5%**) of respondents indicated having *interactions with members of their community*. While twenty-five-point three (**25.3%**) of respondents indicating having *no interactions with members of their community*. Two percent (**2%**) of respondents were *not sure*. Nine-point two percent (**9.2%**) of respondents provided a response other than **yes, no** or **not sure** with one-point four percent (**1.4%**) indicating their interactions happen primarily *via phone or email*.

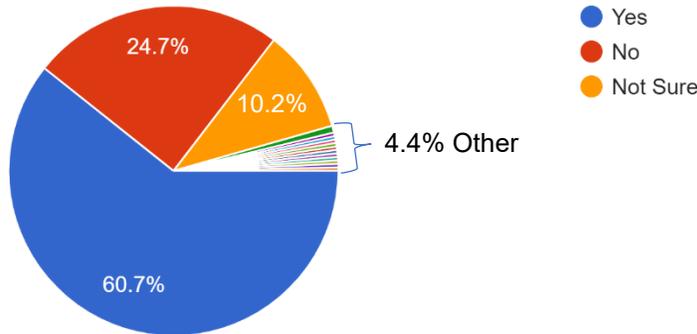
The top seven (**7**) ways families most often *interacted with other members of their community* in ranked order included:

- | | |
|--|---|
| 1. In passing conversation and just saying hi @ 29% | 4. Virtually/digitally through neighborhood apps, social media and by phone @ 8% |
| 2. Outside recreation activities, walking pets and bringing kids to the park @ 15% | 5. Places of worship @ 3% |
| 3. Intentionally supporting one another through information and resource sharing @ 8% | 6. Intentional check-ins @ 2% |
| | 7. Little to no interactions @ 9% |
| | 8. Other @ 27% |

**No significant statistical differences were noted between female and male respondents.*

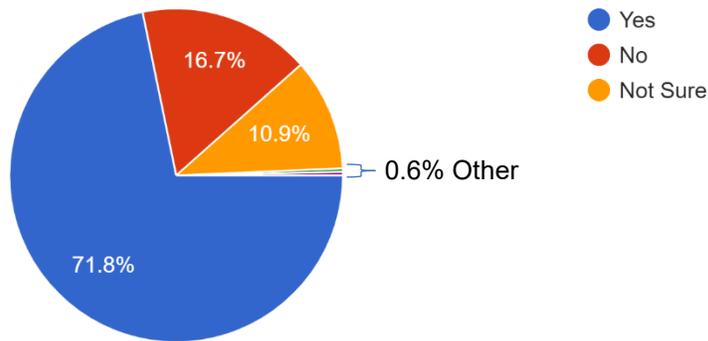
General Community Satisfaction Questions

Do you feel a sense of community among your neighbors in and around your neighborhood?
295 responses



Sixty-point seven percent (**60.7%**) of respondents indicated *feeling a sense of community among their neighbors* while twenty-four-point seven percent (**24.7%**) indicated feeling *no sense of community among their neighbors in and around their neighborhood*. Ten-point two percent (**10.2%**) of respondents were unsure while four-point four percent (**4.4%**) provided a response other than **yes, no or not sure**.

Is feeling a sense of community among your neighbors important to your level of community satisfaction?
294 responses



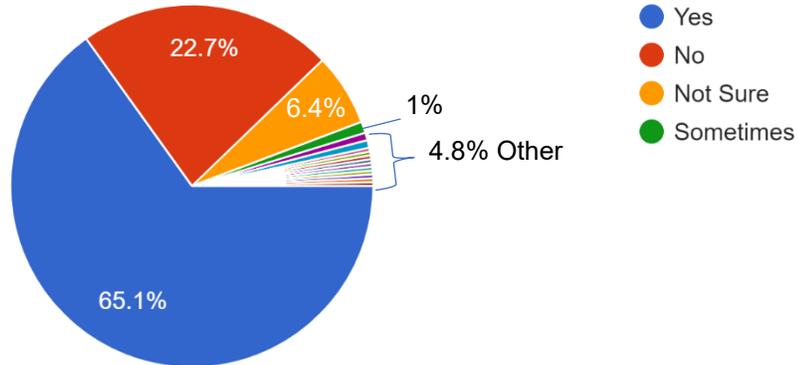
Seventy-one-point eight percent (**71.8%**) of respondents indicated feeling a sense of community among their neighbors is important to their level of community satisfaction while sixteen-point seven percent (**16.7%**) did not feel it was important to their level of community satisfaction. Ten-point nine percent (**10.9%**) were unsure while point-six percent (**0.6%**) indicated a response other than **yes, no or not sure**.

**No significant statistical differences were noted between female and male respondents.*

General Community Satisfaction Questions

Did you/Do you feel isolated due to Covid-19?

295 responses



Sixty-five-point one percent (**65.1%**) of respondents indicated *feeling isolated due to Covid-19* while twenty-two-point seven (**22.7%**) of respondents indicated *not feeling isolated*. Six-point four percent (**6.4%**) were not sure while one percent (**1%**) *feel isolated due to Covid-19 sometimes* with four-point eight percent (**4.8%**) indicating a response other than **yes, no, not sure** or **sometimes**.



A significant gender difference was discovered between female and male respondents.

Female respondents indicated feeling isolated due to Covid-19 at a percentage of seventy-three percent (**73%**) while male respondents indicated feeling isolated due to Covid-19 at a percentage of fifty-six percent (**56%**). This reflects a seventeen percent (**17%**) increase in feelings of isolation among female respondents.

This echoes similar findings discovered by the Kaiser Family Foundation through a recent ¹poll published in August of this year among men and women which found:

“A broad body of research links social isolation and loneliness to poor mental health. In particular, isolation and loneliness during the pandemic may present specific mental health risks for households with adolescents and for older adults....Polling data shows that women with children under the age of 18 are more likely to report major negative mental health impacts than their male counterparts.”

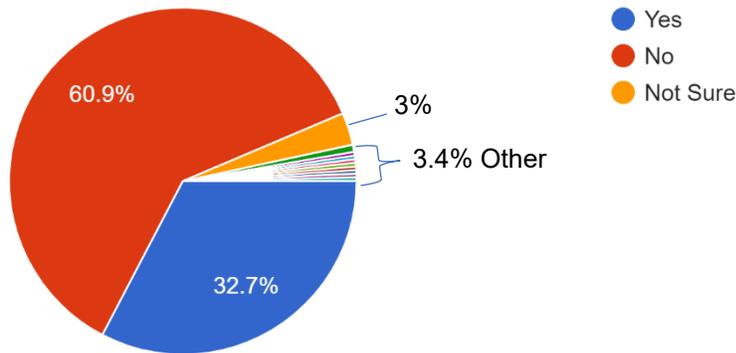
“in general, women more often report negative mental health impacts due to worry and stress from the coronavirus than men (57% vs. 50%, respectively, in the mid-July [KFF Tracking Poll](#))”

¹ <https://www.kff.org/coronavirus-covid-19/issue-brief/the-implications-of-covid-19-for-mental-health-and-substance-use/>

Household Questions

Have you reached out to any community organizations, city or county services, faith-based institutions or other human service organizations for resources associated with your household?

297 responses

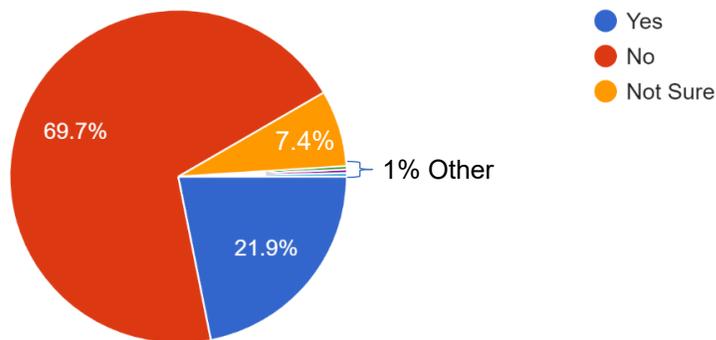


Sixty-point nine percent (**60.9%**) of respondents have indicated not *reaching out to any community organizations, city or county services among others for resources associated with their household* while thirty-two-point seven percent (**32.7%**) indicated in the affirmative to reaching out for resources for their household. Three percent (**3%**) noted being *not sure* with three-point four percent (**3.4%**) providing a response of other than **yes, no or not sure**.

**No significant statistical differences were noted between female and male respondents.*

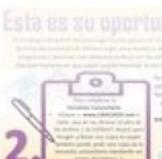
Are you currently experiencing any hardships related to your household that are not associated with Covid-19?

297 responses



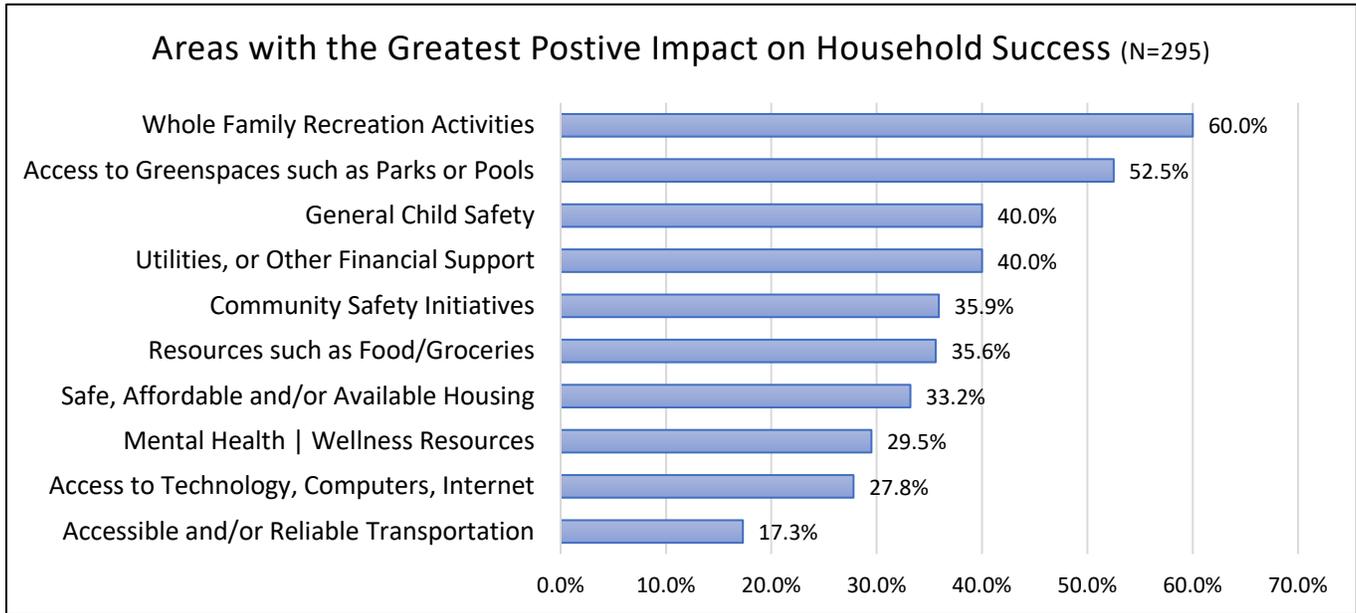
Sixty-nine-point seven percent (**69.7%**) of respondents are not *currently experiencing hardships that are not associated with Covid-19* while twenty-one-point nine percent (**21.9%**) of households are *experiencing hardships other than those associated with Covid-19*. Seven-point four percent (**7.4%**) of households were *not sure* with one percent (**1%**) providing a response other than **yes, no or not sure**.

**No significant statistical differences were noted between female and male respondents.*



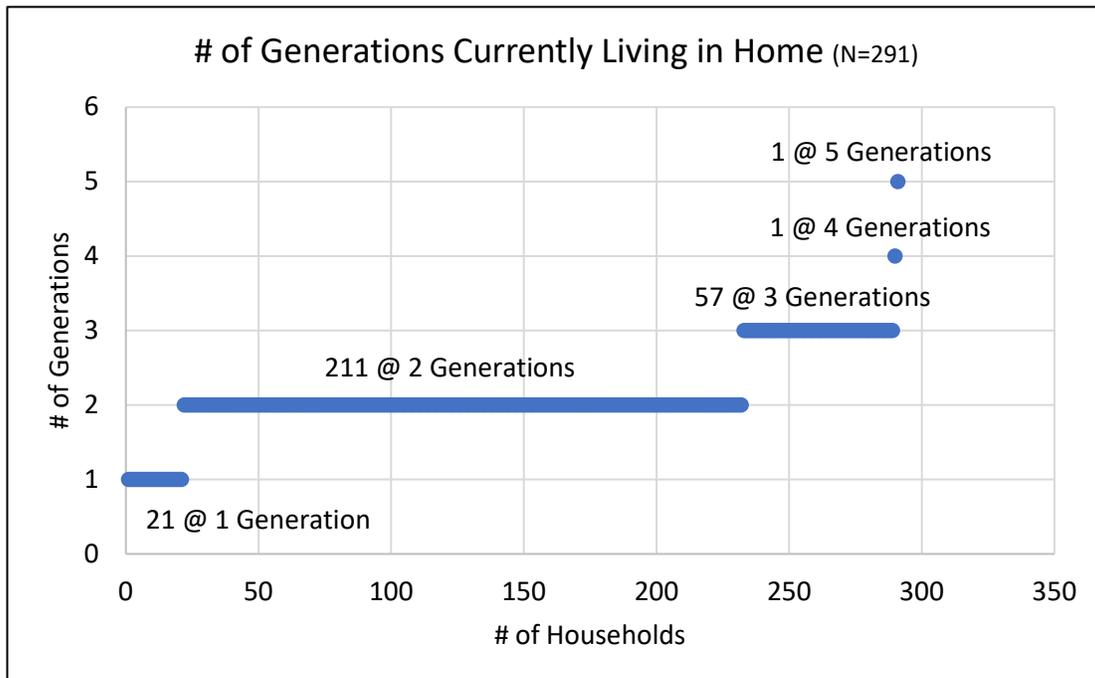
Household Questions

Among the two hundred ninety-five (295) respondents to the question of *what areas would have the greatest positive impacts on the success of households*, the following responses are presented in ranking order:



**No significant statistical differences were noted between female and male respondents.*

Intergenerational Questions



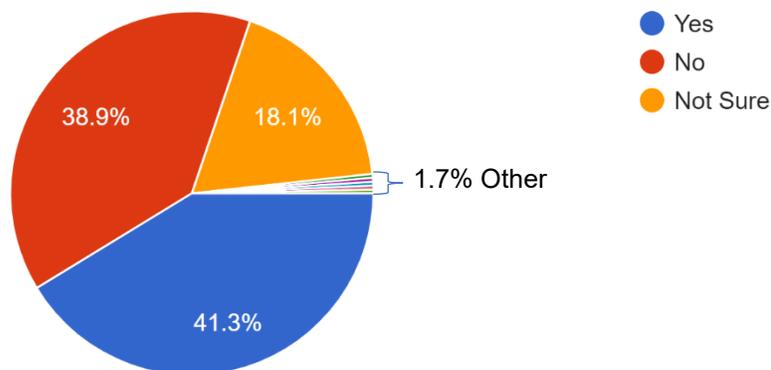
Among the two hundred ninety-one (**291**) respondents indicating the number of generations currently living in their household:

- Twenty-one (**21**) or seven percent (**7%**) of families indicated living in a one (**1**) generation home
- Two hundred eleven (**211**) or seventy-three percent (**73%**) of families indicated living in a two (**2**) generation home
- Fifty-seven (**57**) or twenty percent (**20%**) of families indicated living in a three (**3**) generation home
- Less than one percent (**1%**) of families indicated living in a home with four (**4**) or more generations

Intergenerational Questions

Are there any intergenerational interactions between generations in your household?

293 responses



Forty-one-point three percent (**41.3%**) of two hundred ninety-three (**293**) respondents indicated having intergenerational interactions between generations in their household while thirty-eight-point nine percent (**38.9%**) do not. Eighteen-point one percent (**18.1%**) were not sure with one-point seven percent (**1.7%**) indicating a response other than a **yes**, **no** or **not sure**.

The thirty-eight-point nine percent (**38.9%**) stating no intergenerational interactions is inclusive of the seven percent (**7%**) of one (**1**) generation households which leaves thirty-one-point nine percent (**31.9%**) of households with two (**2**) or more generations not taking part in intergenerational interactions despite having more than one (**1**) generation living within the home. One-point seven percent (**1.7%**) provided a response other than **yes**, **no** or **not sure**.

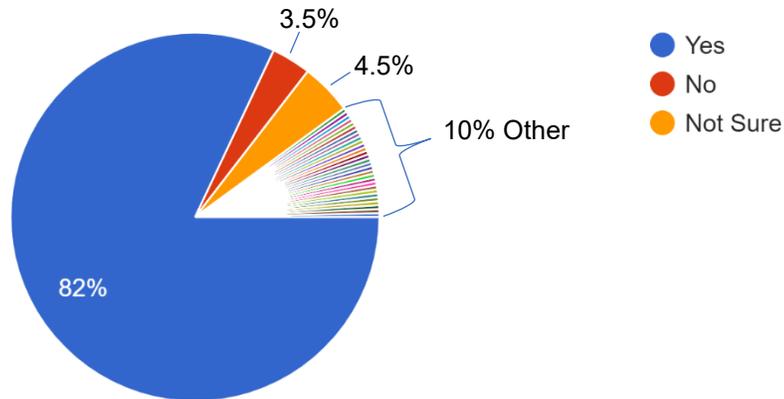
One hundred eight (**108**) responses make up the types of intergenerational interactions among forty-one-point three percent (**41.3%**) of households that indicated having intergenerational interactions, presented in ranking order:

1. Baking, cooking, eating together and other food-centered activities @ **31%**
2. Board games, cards, puzzles and other in-home engaging activities @ **27%**
3. Outdoor recreation including walks, parks, beach, fishing and other outdoor activities @ **26%**
4. Television and movies @ **22%**
5. Regular conversations @ **17%**
6. Exercising including working out, biking and sports @ **8%**
7. Books and story time @ **5%**
8. Church and other worship-type activities @ **5%**

Education Questions – Child

Do(es) your child(ren) enjoy school?

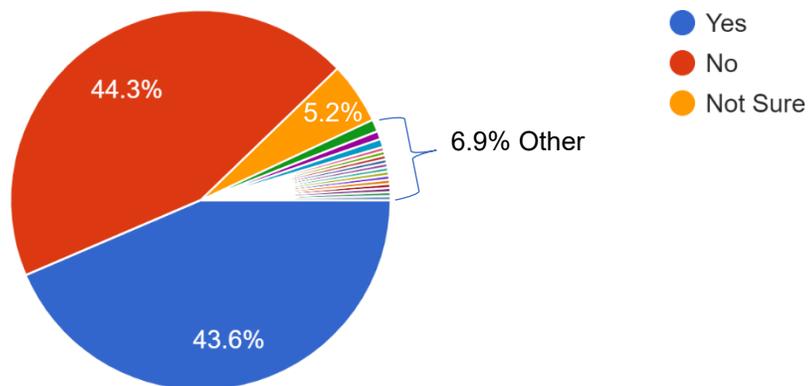
289 responses



Eighty-two percent (**82%**) of families indicated that their children *enjoy school* while three-point five percent (**3.5%**) families indicated that their children do not *enjoy school*. Four-point five percent (**4.5%**) of families were not sure if their child(ren) enjoy school. Ten percent (**10%**) of households provided a response other than **yes**, **no** or **not sure**. This ten percent (**10%**) is inclusive of households that are only one (**1**) generation and do not have children currently living in their home.

Do(es) your child(ren) struggle in school with any subjects?

287 responses

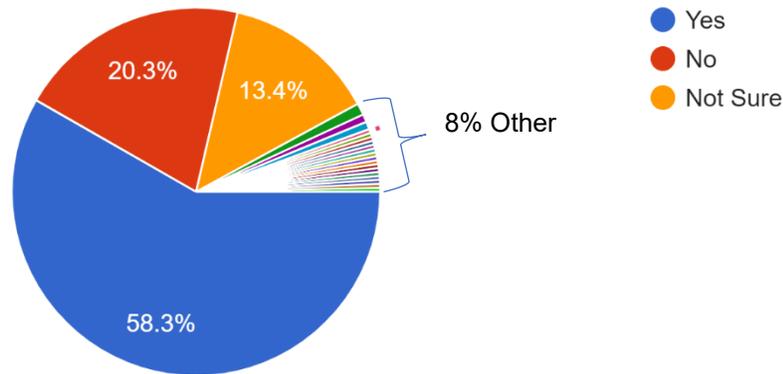


Forty-three-point six percent (**43.6%**) of respondents noted their child(ren) do *struggle in school with a particular subject* while forty-four-point three percent (**44.3%**) noted that their child(ren) do not *struggle with any school subjects*. Five-point two percent (**5.2%**) were not sure, with six-point nine percent (**6.9%**) noting a response other than **yes**, **no** or **not sure**.

Education Questions – Child

Do you and your child have access to the necessary resources needed for your child(ren) to succeed in their schooling?

290 responses



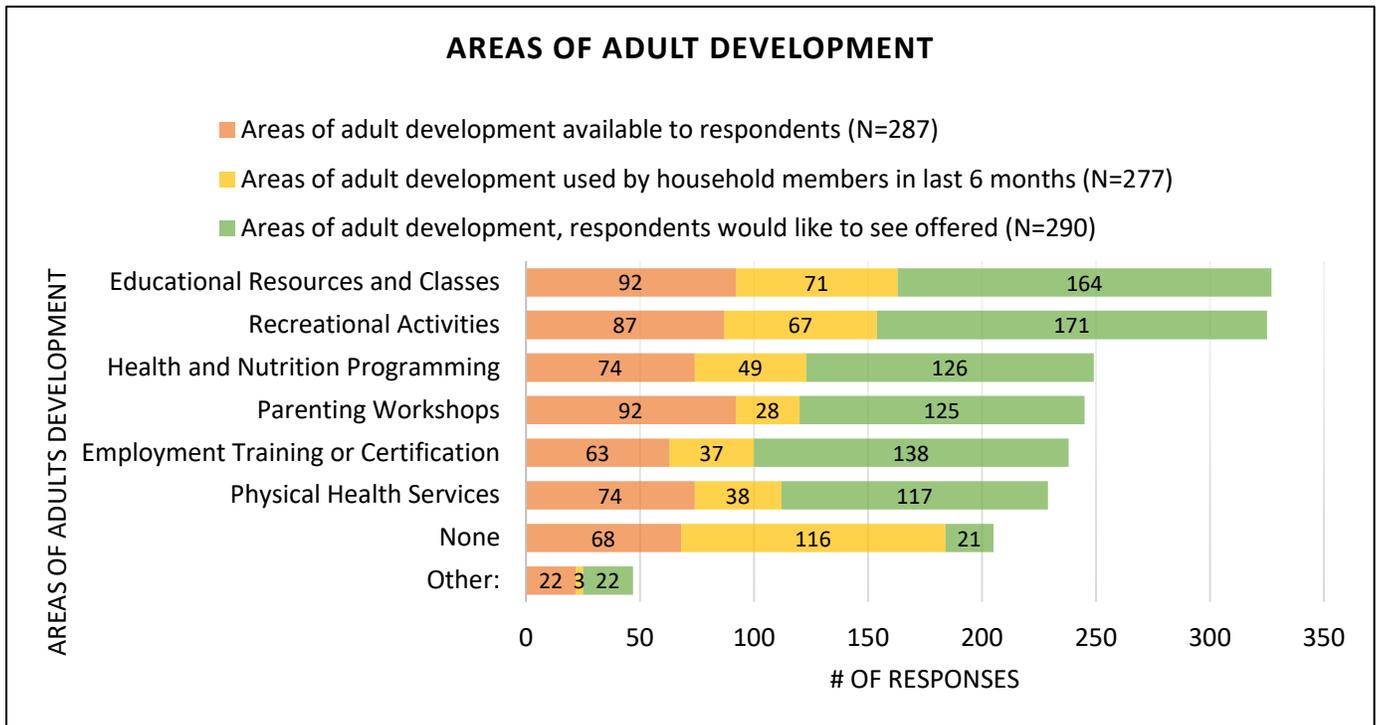
Fifty-eight-point three percent (**58.3%**) of households *have access to the necessary resources needed for their child(ren) to succeed* while twenty-point three percent (**20.3%**) do not *have access to the necessary resources*. Thirteen-point four percent (**13.4%**) were not sure while eight percent (**8%**) of households noted a response other than **yes**, **no** or **not sure**. The eight percent (**8%**) is inclusive of those families indicating no children currently living in the home.

Two hundred fifty-three (**253**) respondents made up the top nine (**9**) greatest academic school challenges faced by their child(ren) and presented in ranking order:

1. School subject specific concerns including math, English and reading @ **23%**
2. Safety among students returning to school during Covid-19 @ **12%**
3. Virtual, E-learning and online courses @ **9%**
4. Language barriers among non-English speaking students @ **9%**
5. Educational supports including tutoring and educational resources @ **8%**
6. Socialization among students and isolation for students attending virtually @ **7%**
7. Technology resources including computers and internet access @ **6%**
8. Supports for students with Autism, ADHD and other Developmental concerns @ **6%**
9. Distraction, lack of concentration and focus @ **5%**

**No significant statistical differences were noted between female and male respondents.*

Education Questions – Adult



Questions regarding areas of adult development presented the following results:

Thirty-two percent (**32%**) or ninety-two (**92**) respondents indicated *Educational Resources and Classes* and *Parenting Workshops* were available to them while thirty percent (**30%**) of respondents indicated *Recreational Activities* were made available.

Twenty-six percent (**26%**) or seventy-one (**71**) households utilized *Educational Resources and Classes* over the past six (**6**) months while twenty-four percent (**24%**) or sixty-seven (**67**) households utilized *Recreational Activities* offered.

Fifty-nine percent (**59%**) would like to see *Recreational Activities* offered throughout their community while fifty-seven percent (**57%**) of households would like to see *Educational Resources and Classes* offered. Forty-three percent (**43%**) of households would like to see *Health and Nutrition Programming* and *Parenting Workshops* offered throughout their community.

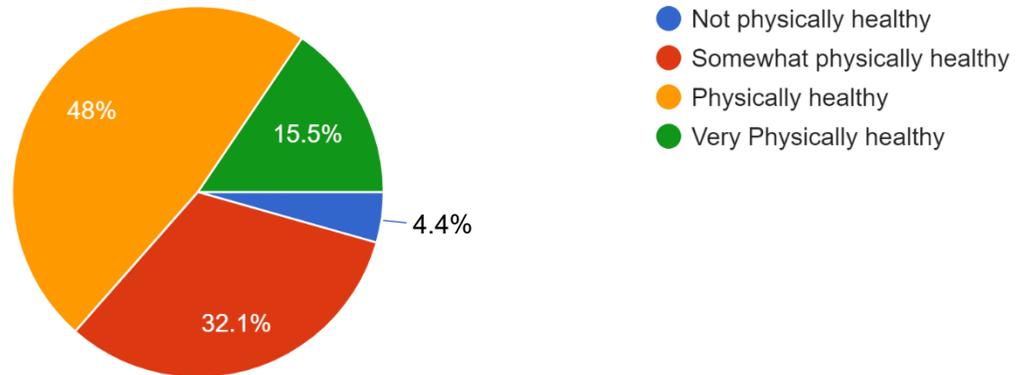
Among all three questions, **Educational Resources and Classes** elicited the highest number of responses followed closely by **Recreational Activities**. **Health and Nutrition Programming** and **Parenting Workshops** garnered the next set of highest responses and **Employment Training or Certification** and **Physical Health Services** placed 5th and 6th levels of priority among households, respectively.

**No significant statistical differences were noted between female and male respondents.*

Family Health

How would you describe your family’s overall physical health?

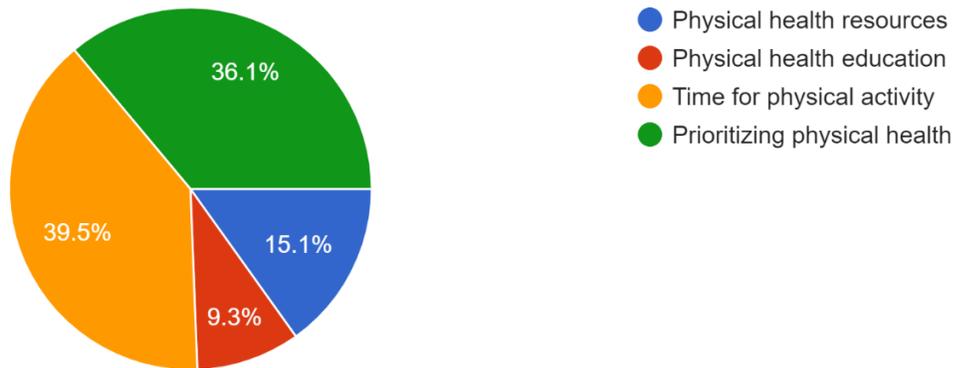
296 responses



Eighty-point one percent (**80.1%**) of households indicated their overall family’s physical health as *Physically Healthy* or *Very Physically Healthy* while nineteen-point nine percent (**19.9%**) of households noted their families were less than physically healthy with *Somewhat Physically Healthy* or *Not Physically Healthy* at all.

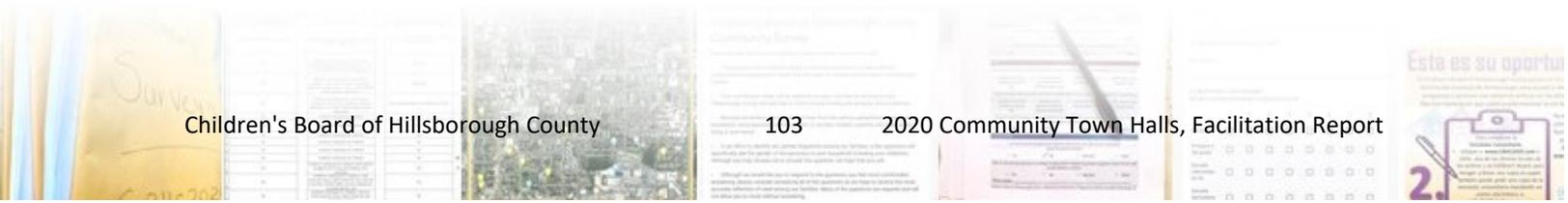
What would you say contributes MOST to your family’s physical health (positive (+) or negative (-))?

291 responses

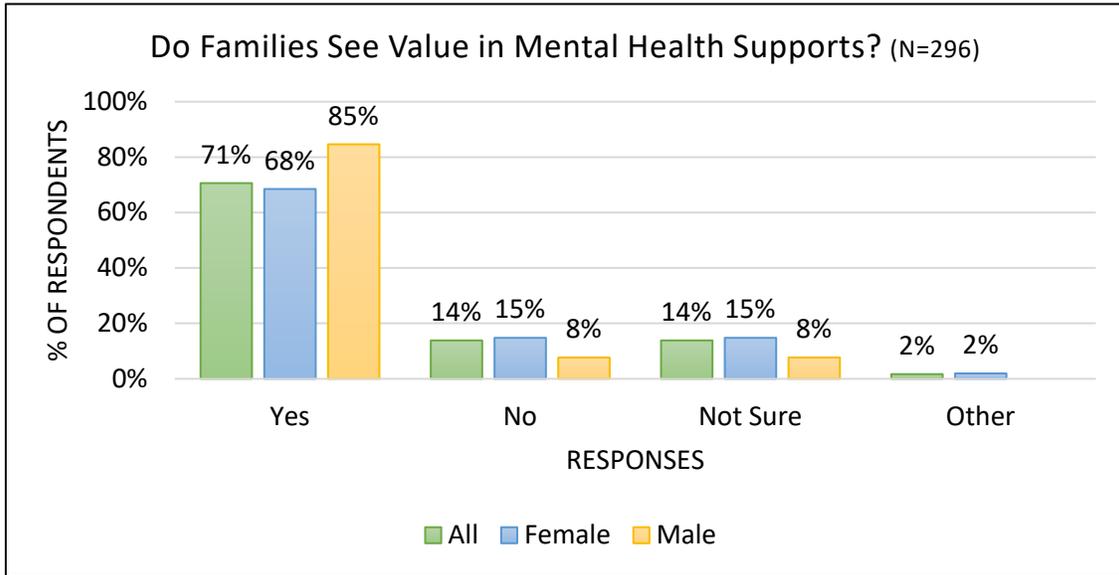


Of the two hundred ninety-one (**291**) respondents, thirty-nine-point five percent (**39.5%**) indicated *Time for physical activity* contributed the greatest to the current state of the their family’s physical health while thirty-six-point one percent (**36.1%**) of families concluded that *Prioritizing their physical health* was the greatest contributing factor to their family’s physical health.

A smaller percentage of households at twenty-four-point four percent (**24.4%**), noted *Physical health resources and education* as their largest contributing factors to their family’s physical health.



Family Health



Of the two hundred ninety-six (**296**) total respondents, seventy-one percent (**71%**) of families see value in mental health supports while fourteen percent (**14%**) of families do not see value in mental health supports for their families. This is mirrored by those who are not sure at fourteen percent (**14%**).

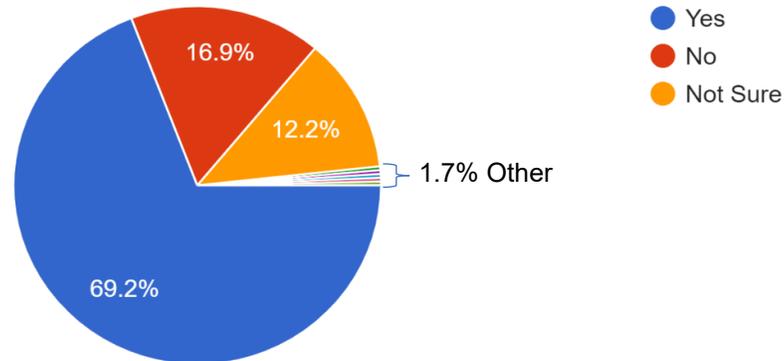


When separating the data according to gender/sex, there appears to be a higher value placed on mental health supports among Male respondents than those of female respondents at a percentage difference of sixteen percent (**16%**). This difference is also noted in those who do not see value in mental health supports as the female responses are seven percent (**7%**) higher than those of the male respondents.

Family Health

Is access to mental health support important to the success of your family?

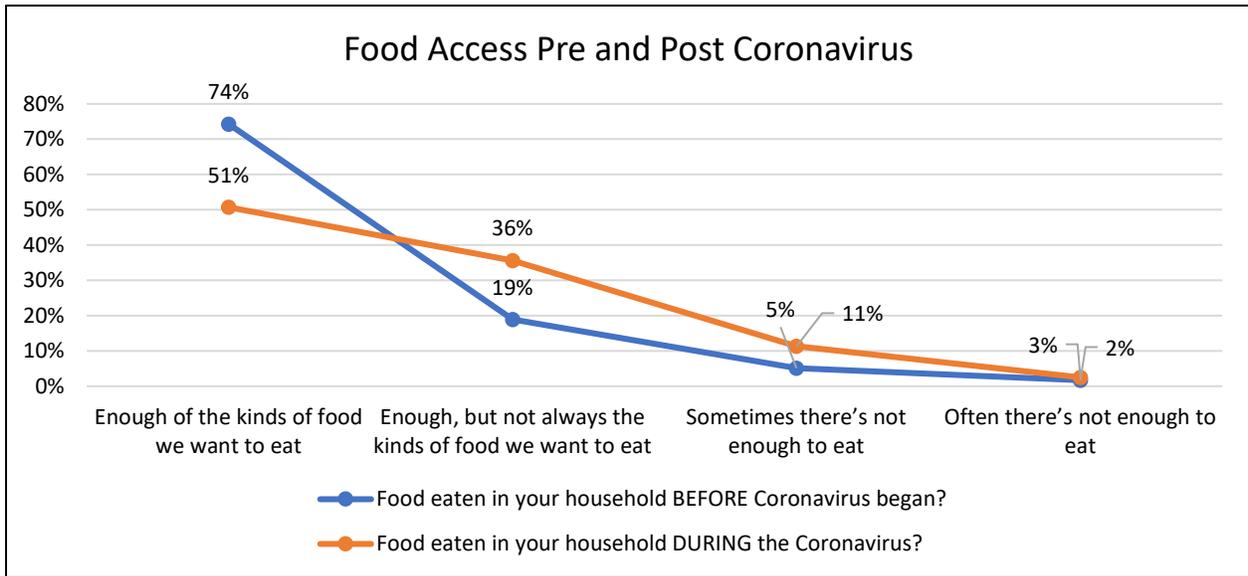
295 responses



Access to Mental Health supports closely mimicked the percentages noted among those household that see value in mental health supports with sixty-nine-point two percent (**69.2%**) of households *seeing mental health support as important to the success of their family* while sixteen-point nine percent (**16.9%**) of families *Do Not*. Twelve-point two percent (**12.2%**) of families indicated *Not Sure* while one-point seven percent (**1.7%**) noted a response other than **yes**, **no** or **not sure**.

**No significant statistical differences were noted between female and male respondents.*

Food



Prior to the Coronavirus, seventy-four-point three percent (**74.3%**) of households indicated having *Enough of the foods their families want to eat* before the Coronavirus while eighteen-point nine percent (**18.9%**) of households indicated having *enough to eat but not always the foods they want to eat*. Five-point one percent (**5.1%**) of families indicated *not always having enough to eat* while one-point seven (**1.7%**) of households indicated *often not having enough to eat*.

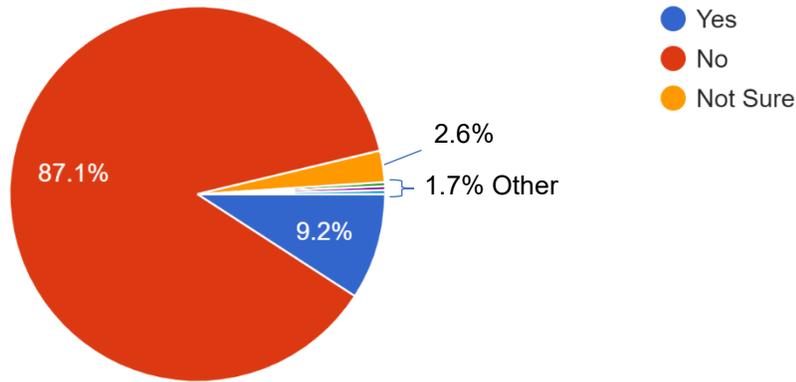
During the Coronavirus, there was a noted twenty-three percent (**23%**) decline in families' access to *Enough of the foods their families want to eat* at fifty-one percent (**51%**) while showing an increase of seventeen percent (**17%**) among families indicating *access to enough food to eat but not always the kind of foods that wanted to eat*. Also demonstrated was an increase of six (**6%**) in families who *sometimes experience feeling there is enough to eat* while finding a one percent (**1%**) increase in families experiencing *not enough to eat often*.

**No significant statistical differences were noted between female and male respondents.*

Food

Have you and/or anyone in your household in the last 6 months had to skip any meals because there wasn't enough access to food?

295 responses



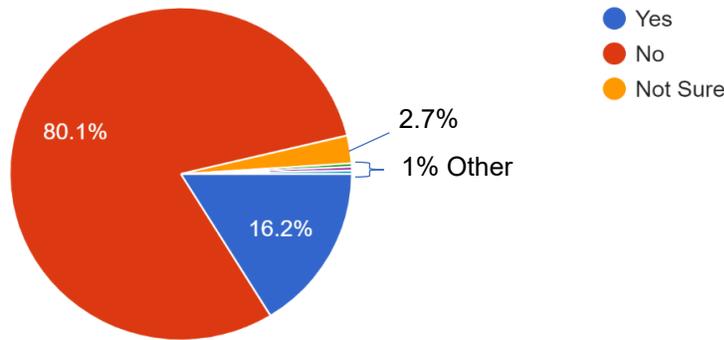
Eighty-seven-point one percent (**87.1%**) of households did not have to skip a meal in the past six (**6**) months because there wasn't enough food while nine-point two percent (**9.2%**) of households did have to skip meals. Two-point six percent (**2.6%**) said they were not sure while one-point seven percent (**1.7%**) noted a response other than **yes**, **no** or **not sure**.

**No significant statistical differences were noted between female and male respondents.*

Social

Have you or any member of your family participated in in any community-wide social functions like a fair, block party, or other community event in the past 6 months?

296 responses

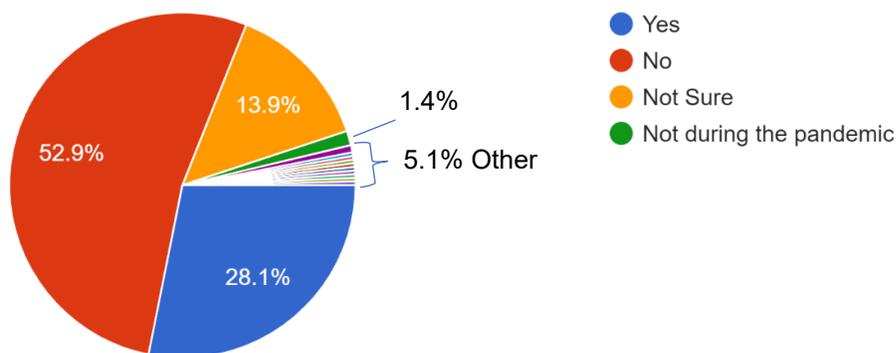


Eighty-point one percent (**80.1%**) of families indicated they did not *participate in any community-wide social functions like a fair, block party or other community event in the past six (6) months* while sixteen-point two percent (**16.2%**) of families indicated having *participated in community-wide events in the past six (6) months*. Two-point seven percent (**2.7%**) of families were not sure if they had while one percent (**1%**) of responses consisted of responses other than **yes, no or not sure**.

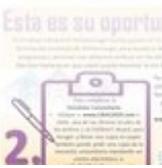
This results to this question were likely impacted by Coronavirus precautions of social distancing, stay at home orders and other CDC Safety Guidelines.

Are there opportunities for your family to get to know or engage other families in your community in healthy ways like a community picnic or block party?

295 responses



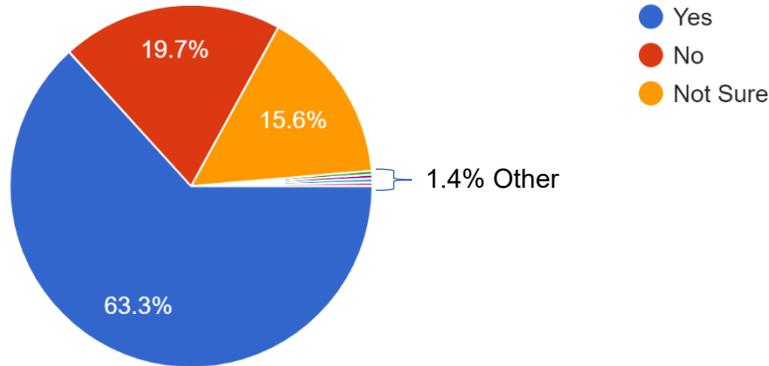
Fifty-two-point nine percent (**52.9%**) of families indicated *no opportunities to engage other families in their community* while twenty-eight-point one percent (**28.1%**) of families responded with a **yes to knowing of opportunities to engage with other families in their community**. Thirteen-point nine percent (**13.9%**) were not sure while one-point four percent (**1.4%**) noted *not during the pandemic*. Five-point one percent (**5.1%**) noted a response other than **yes, no or not sure or not during the pandemic**.



Social

Is getting to know other families in your neighborhood important to you and your family?

294 responses

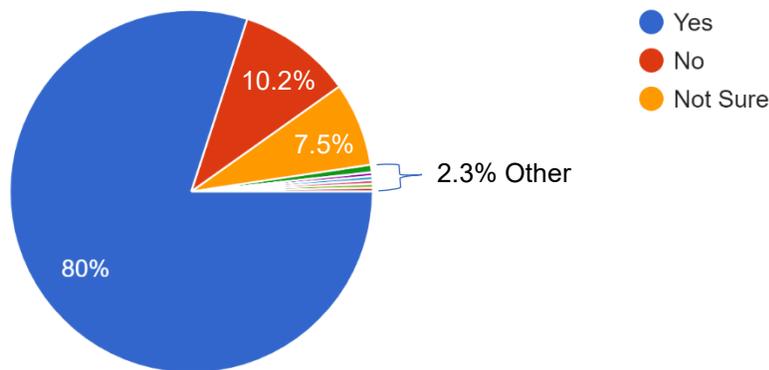


Getting to know other families in their neighborhood is important to sixty-three-point three percent (63.3%) of two hundred ninety-four (294) respondents while it is not important for nineteen-point seven percent (19.7%) of respondents and fifteen-point six percent (15.6%) are not sure if it is important to them. One-point four percent (1.4%) of respondents noted a response other than **yes**, **no** or **not sure**.

**No significant statistical differences were noted between female and male respondents.*

Do you see any benefit to positive social interactions with other families in your community?

295 responses



Eighty percent (80%) of families see a benefit to positive social interactions with other families in their community while seventeen-point seven percent (17.7%) collectively do not or are not sure. Two-point three percent (2.3%) of respondents provided a response other than **yes**, **no** or **not sure**.

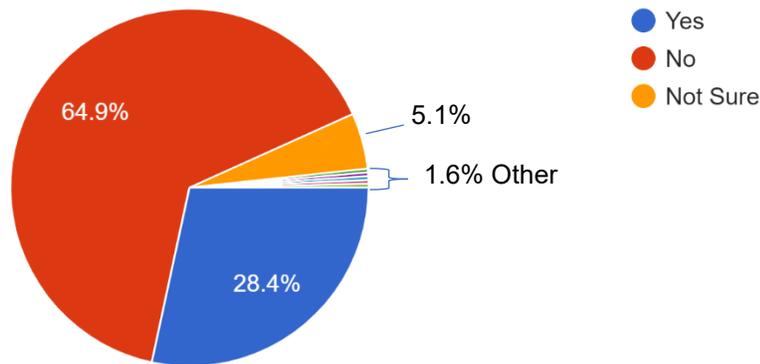
**No significant statistical differences were noted between female and male respondents.*



Parent Involvement

Are you involved in any programs, services, activities or community groups related to parenting or to building a healthy family?

296 responses



Of the two hundred ninety-six respondents (**296**), sixty-four-point nine percent (**64.9%**) of families are not involved in *any program, services, activities or community groups related to parenting or building a healthy family* while twenty-eight-point four percent (**28.4%**) of families are in a *program, service, activity or community group related to parenting or building a healthy family*. Five-point one percent (**5.1%**) of families were not sure while one-point six percent provided a response other than **yes, no or not sure**.

Of the twenty-eight-point four percent (**28.4%**) of the families who indicated their involvement in programs, services, activities, or community groups, have done so through a variety of opportunities including:

- Faith-based activities @ **27%**
- Community Groups @ **13%**
- PTA and other education-centered activities @ **7%**
- In connection with non-profits such as the 200 Muslim Women Who Care, Enterprising Latinas, Hispanic Services Council, Girls Scouts, Champions for Children and the YMCA @ **38%**

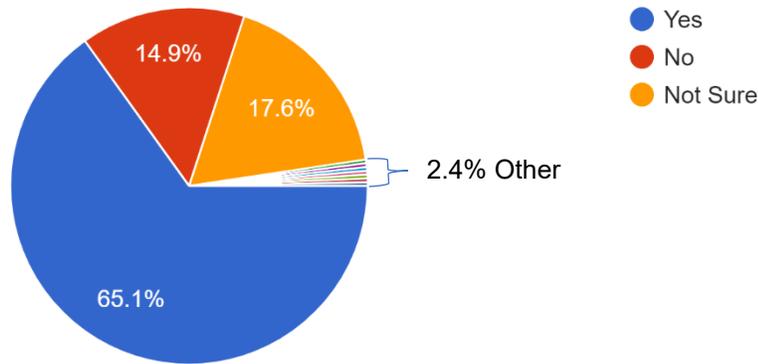
Of the sixty-four-point nine percent (**64.9%**) of families that indicated no involvement in programs, services, activities or community groups have not done so because they were unaware of what opportunities exist in their area for them to get involved. This was exhibited by forty-three percent (**43%**) of families followed by not having enough time, shared by twenty-seven percent (**27%**) of families. Coronavirus concerns was represented by eighteen percent (**18%**) of families.

**No significant statistical differences were noted between female and male respondents.*

Parent Involvement

Are programs, services, activities, or community groups related to parenting or building a healthy family important to the overall success of your family?

295 responses



Sixty-five-point one percent (**65.1%**) of families *believe programs, services, activities or community groups are important to the success of their family* while fourteen-point nine percent (**14.9%**) of families *do not feel that these program, services, activities or community groups are important to the success of their families*. Seventeen-point six percent (**17.6%**) of respondents are not sure if they are or not, while two-point four percent (**2.4%**) provided responses other than **yes, no or not sure**.

**No significant statistical differences were noted between female and male respondents.*

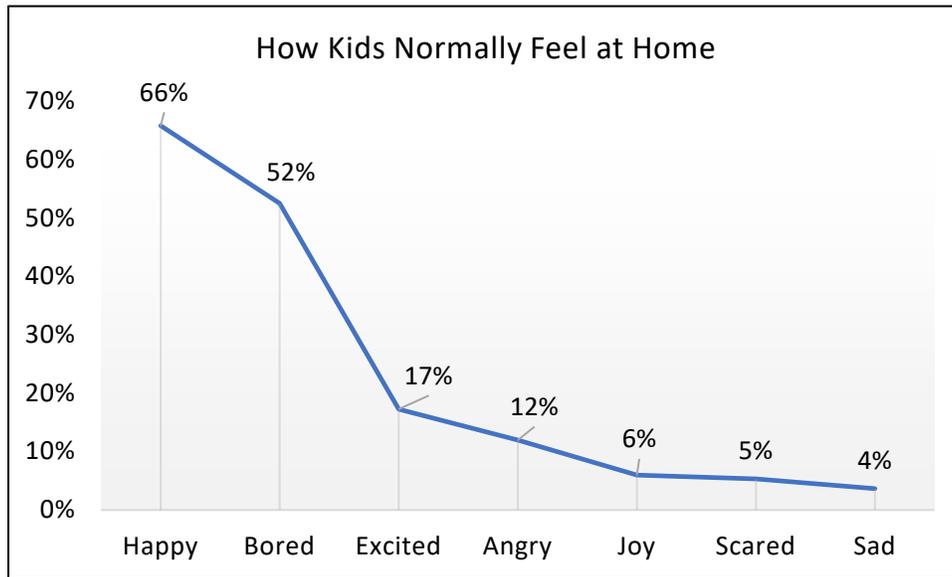
Families currently get their news and information regarding programs and services from the following ranked sources representing three hundred ten (**310**) responses:

Hillsborough County Schools via Peach Jar and other Information Emails	16%
Social Media like Facebook and other platforms	16%
News media outlets and platforms	14%
Community nonprofits	14%
Internet searches	13%
Emails	9%
Word-of-mouth	6%
Children's Board of Hillsborough County	4%
Hillsborough County	4%
Places of Worship	3%
Children's Board Family Resource Centers	3%

Child/Family Dynamic Questions - Child

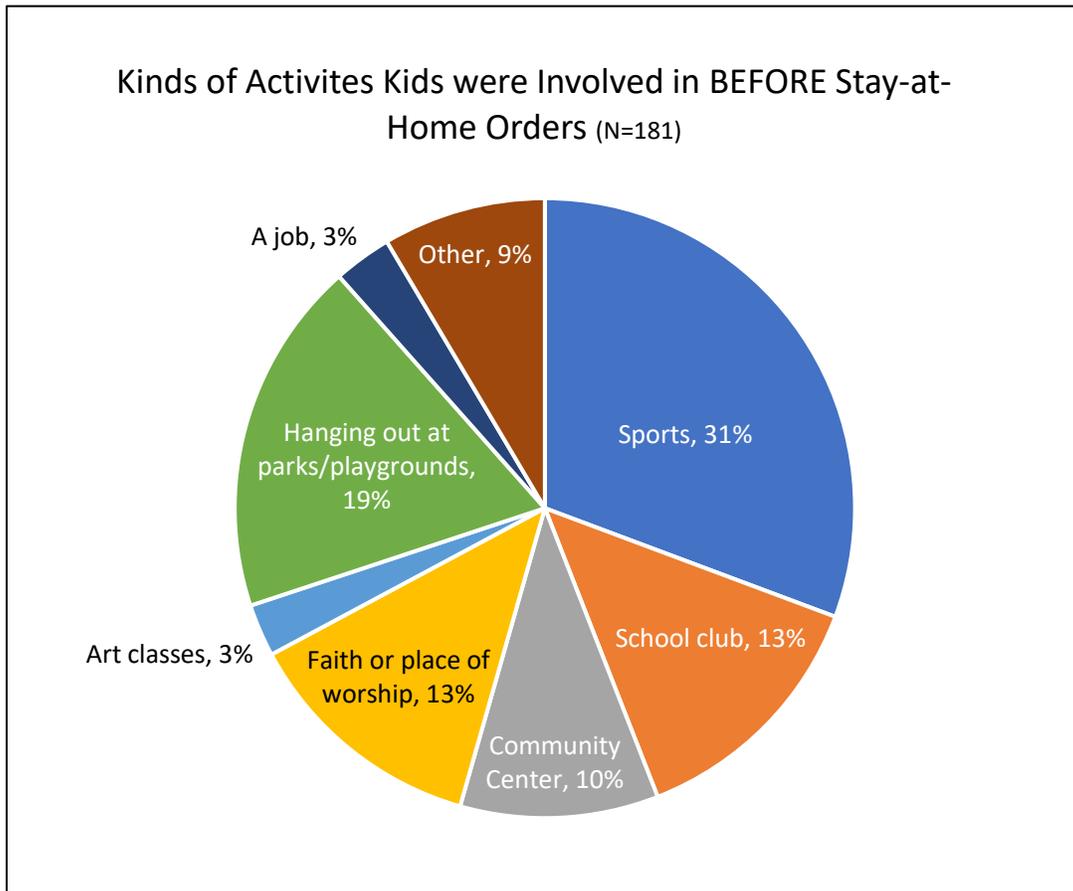
Three hundred seventeen (**317**) children under the age of eighteen (**18**) completed the child survey portion of the community survey. Among the three hundred seventeen (**317**) respondents, one hundred sixty-eight (**168**) or fifty-nine percent (**59%**) were male with one hundred thirty-three (**133**) or forty-four percent (**44%**) identifying as female and sixteen (**16**) not providing their gender/sex.

Among the three hundred one (**301**) responses provided, respondents indicated how they normally feel at home in ranked order:



Child/Family Dynamic Questions - Child

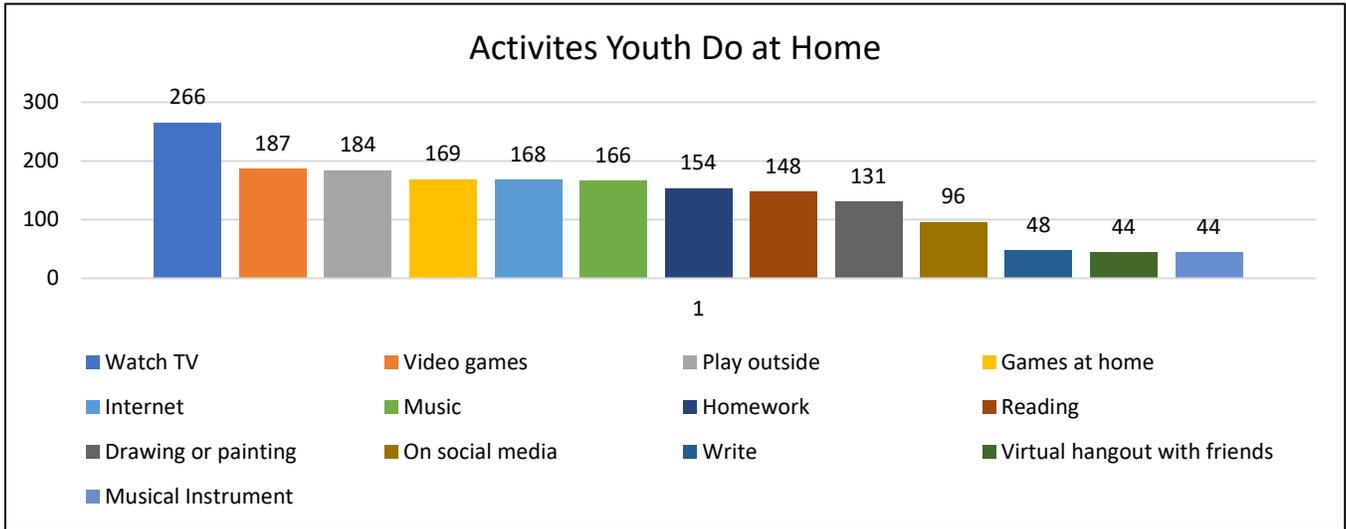
One hundred eighty-one (**181**) or fifty-seven percent (**57%**) of respondents stated they were part of an *afterschool program, sports, club or other after school activity* while one hundred twenty-three (**123**) or thirty-nine percent (**39%**) of respondents indicated not being a part of an after-school program.



Of the one hundred eighty-one (**181**) or fifty-seven percent (**57%**) of respondents that stated they were part of an afterschool program, sports, club or other after school activity, thirty-one percent (**31%**) indicated participating in *sports* while nineteen percent (**19%**) noted *hanging out at parks/playgrounds*. These served as the top two (**2**) kinds of activities kids were most involved in prior to stay-at-home orders. This was followed in ranked order by:

- Thirteen percent (**13%**) Faith or place of worship and school clubs
- Ten percent (**10%**) community centers
- Nine percent (**9%**) other
- Followed by art classes and a job at three percent (**3%**) each

Child/Family Dynamic Questions - Child



The top five (5) activities youth do at home consist mostly of *watching television* followed by *playing video games, playing outside, playing games at home and being on the internet.*

2020 Community Town Halls
Facilitation Report Completed by:



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