

Sonoma County Community Response Teams



HEALTHCARE
FOUNDATION
NORTHERN SONOMA COUNTY



CENTER_{FOR}
WELL-BEING

History of Response Teams

Marin County established Community Emergency Response Teams (CERTs) as a community-driven response to address and recover from public health threats in the most vulnerable communities via **geographic hubs**.

Inspired by the growing network of Sonoma County Community Based Organizations (CBOs) who worked tirelessly on COVID-19 education, mitigation, testing, outreach, and vaccination efforts, **HFNSC** funded a local effort to both capture and continue the work being done to establish Sonoma County Community Response Teams (CRTs).



Thank You to Our Funders!

The **Healthcare Foundation Northern Sonoma County** received funding from Providence & the Peter E. Haas, Jr. Family Fund to support the design of local CRTs.

Participating Lead Agencies include: Center for Well-Being, Corazon Healdsburg, La Luz Center, Petaluma Health Care District, and River to Coast Children's Services.



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Thank You!

Goal of this Presentation

Sonoma County has been hit by floods, fires, and now global pandemic

- We have learned what works & what doesn't
- We leverage this knowledge in recommendations for future emergency response
- We uplift the salient message of:

“Don't do anything for me without me”



Uplifting Community Voice

This presentation was informed by input from community focus groups, community health workers/ promotoras, and community-based organizations.

It is important to acknowledge the **RELATIONSHIPS** that were built between organizations, groups, and individuals during the pandemic response - and the commitment to **UPLIFT**, **SUPPORT**, **SHARE**, and **COLLABORATE** in an effort to promote the recovery and resiliency of ALL in our community.

"I often hear people making decisions say, 'I am part of this community too', but what they don't acknowledge is that there's a huge difference between community and neighborhood, our lived experience is very different and driven by the decision they make."

-Santa Rosa Community Promotora



Collective Impact Results

12 Sonoma County CBOs funded by the Healthcare Foundation & Partnership HealthPlan of California from 9/2021 - 2/2022 for vaccine outreach & education:

- 100 vaccine events were held
- 50 non vaccine events held
- 12,542 vaccine doses were provided



Pandemic Response Summary

*March 2020 -
December 2020*

*December 2020 -
July 2021*

*July 2021 -
December 2021*

*November 2021 -
March 2022*

*March 2022 -
Present*



Stage 1:
Pandemic Hits

Stage 2:
Vaccine Roll-
Out

Stage 3:
Increase in
Vaccine Supply
and Access

Stage 4:
Home Rapid
Tests / Vaccines
for Children &
Boosters

Stage 5:
Entering
Endemic with
no exit plan

Challenges



Messaging and Power Dynamics

"Lived experience is just as valuable as systems knowledge. Once we understood the system and its function we were able to better collaborate with healthcare professionals to create transformation within the system that leveraged social connections and have greater impact within our community/neighborhoods."

County COVID Messaging

Challenges due to:

- Predominantly in English
- Not culturally responsive
- High literacy & medically focused
- Did not reach impacted neighborhoods
- Inherent power dynamic - *some communities have a mistrust of government*



COUNTY OF SONOMA

COVID-19 TESTING INFORMATION

I feel fine but I want to get tested for COVID. What do I do?

Call and schedule a test for COVID-19.
The Sonoma County Emergency website has a list of places you can get tested.
<https://www.socoemergency.org/covid19>

If you have a healthcare provider: Call your provider and request to schedule a test with them.

If you do not have a healthcare provider, or if your provider will not schedule a test for you:

1



CONDADO DE SONOMA

INFORMACIÓN PARA LA PRUEBA DE COVID-19

Me siento bien, pero quiero hacerme la prueba de COVID. ¿Qué debo hacer?

Llame para programar una cita de COVID-19.
La página de emergencias del Condado de Sonoma en la red tiene una lista de lugares donde una puede hacerse la prueba.
<https://www.socoemergency.org/covid19>
Su información es estrictamente confidencial y se le compartirá con otras agencias del gobierno si son funcionarios de inmigración.

Si tiene un consultorio de atención médica: Llame a su doctor y solicite que le hagan una cita para la prueba.

Si no tiene un proveedor de atención médica, o si su doctor no le da una cita: Llame a la línea directa de COVID del Departamento de Salud del Condado de Sonoma para hacer una cita gratuita para la prueba al (707) 565-4667.

1

Obtenga el resultado de su prueba. Si no tiene síntomas y no ha estado en contacto con una persona enferma con COVID, no necesita quedarse en casa mientras espera el resultado de su prueba.

Si usted desarrolla síntomas o tiene contacto con alguien que tenga COVID-19 mientras espera los resultados de su prueba, quédese en su casa. Catorce (14) días es el lapso de tiempo después de la exposición al virus durante el cual uno puede volverse contagioso y pasar el virus a otras personas, aún cuando uno no se sienta enfermo.

2

Si el resultado de su prueba es positivo, quiere decir que tiene COVID-19. Para proteger a su familia, compañeros de trabajo y a la comunidad, necesita aislarse en casa por 10 días para no contagiar el virus a otras personas. Cuando terminen sus 10 días de aislamiento, NO necesita repetir la prueba.

Un administrador de casos del Departamento de Salud o de una entidad colaboradora lo llamará para contestar sus preguntas, compilar información y ayudarle a conseguir recursos (apoyo económico, entrega de alimentos, hospedaje alternativo u otros servicios) para asistirle durante su aislamiento. Se le dará una carta para su empleador en la cual se justificará su ausencia del trabajo. Cuando termine su aislamiento, se le dará una carta de autorización para permitirle regresar al trabajo.

Si se hace la prueba en un lugar que no sea del Condado, pregúntales cuánto y cómo se le darán los resultados.

Si se hace la prueba por medio del Condado, probablemente recibirá un mensaje automático en su teléfono o por correo electrónico indicando el resultado de su prueba, de 2 a 3 días después de la prueba.

3

Si el resultado de su prueba es negativo, quiere decir que probablemente usted no estaba infectado en el momento de hacerse su prueba de COVID-19. Puede terminar su cuarentena 14 días después de haber tenido su última exposición a alguien con COVID.

Gracias por hacerse la prueba. Por favor, tome todas las precauciones normales que todos deberíamos seguir: use una máscara en lugares públicos y especialmente en el interior de edificios, manténgase a 6 pies de distancia de los demás y lávese las manos con frecuencia.

4

If you test infected at the test site COVID-19 steps to go

A case manager is part of the process. If you have any questions, please call the case manager for your area. You are not allowed to

SoCoEmergency.org

Community Covid Messaging

- **Goals:**
 - Community-responsive messaging
 - Leverage "It's Up To Us" campaign
- **Feedback:** Listening session with Latinx community highlighted:
 - *"NOT up to us"*
 - *We do not hold power*
 - *We cannot make change*
- Campaign changed to "Little Actions, Big Results" but never used



Meetings & Missing Voices

- CHI COVID response tactical meeting
- Focus on messaging, mitigation, & vaccines
- Held weekly on Tuesdays at 7:30am
- Attendees primarily healthcare leaders
- Recognition of missing voices:
 - *Frontline workers*
 - *Community-based CHW/Ps*
 - *CBOs who serve marginalized communities*
- **Action: Health Equity Friday Meetings**
 - *Dr. Jenny Fish & Gricelda Correa leveraged social connections within community to invite diverse voices at new Friday meetings*



Health Equity Friday Meeting June 2021

Barriers to Access

"There were a lot of resources but as common folk we don't understand their function. For example, I received a radio but it's still sitting there because I don't know how to use it."

- Santa Rosa Promotora

"I have been displaced since the floods in 2019 and haven't been able to find affordable housing. I wasn't able to access resources that were offered immediately because I had to leave the area and when I came back a few weeks later the resources were gone."

- Guerneville Promotora

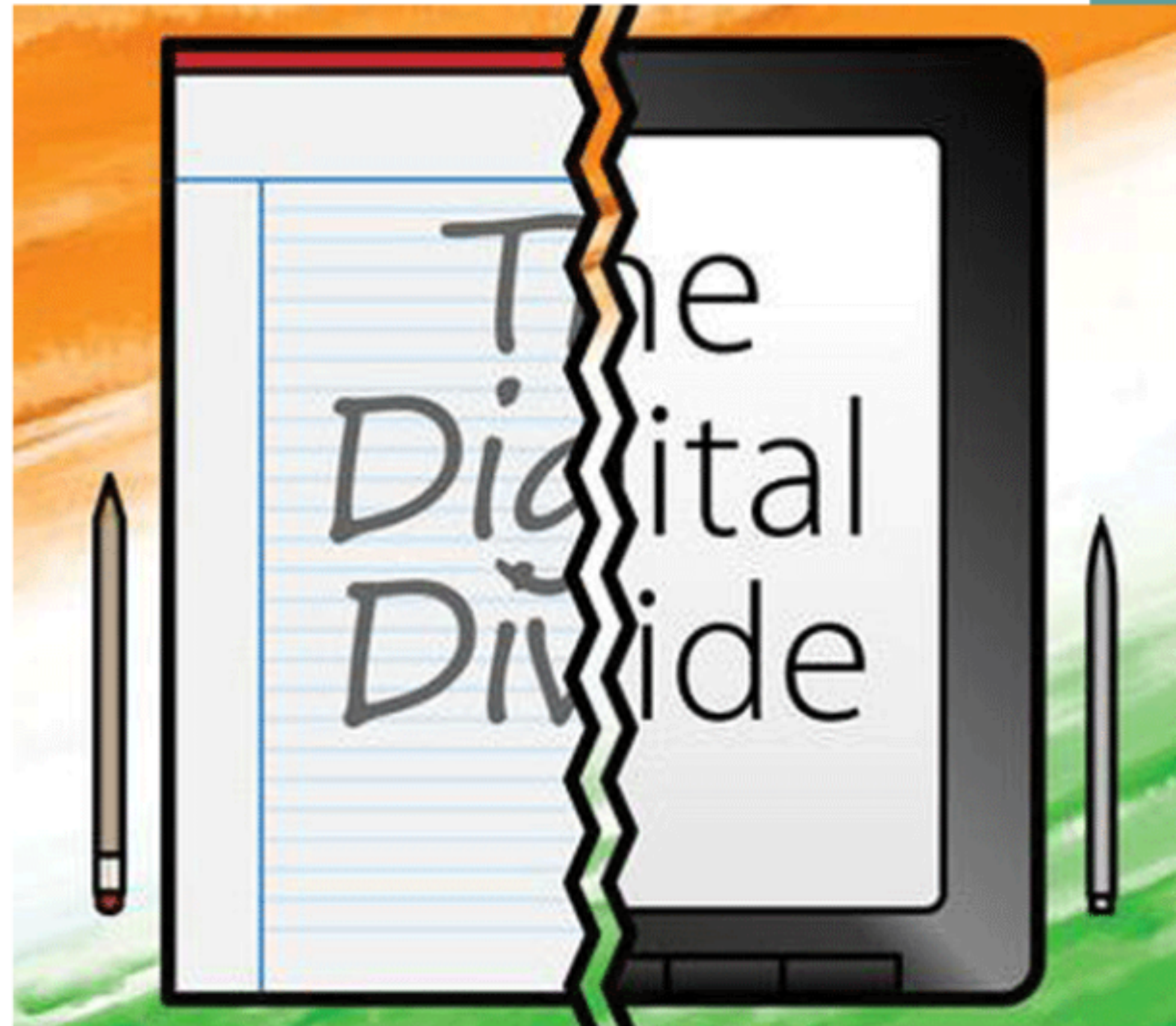
Barriers to Technology

Lack of access to:

- A device to connect to the internet
- Stable, high-speed internet or phone service in rural areas
- Knowledge of how to navigate websites /apps in low income and older communities

Other digital challenges:

- Websites were not user friendly and/or employed complex language
- Vaccine booking system required emails, SSN, medical insurance, etc.



Barriers to Access Resources:

- **Applications difficult to navigate:**
 - Primarily in English
 - Many questions at high literacy level
 - Many applications only available online
- **Excessive requirements:**
 - SSN required for resources
 - Medical insurance needed for testing or vaccines
 - Paystubs required for proof of income level
 - Threshold for poverty level excluded many in need
- **Other challenges:**
 - Lack of timely response
 - Resources provided that lacked instructions:
 - i.e. emergency radios or go bags



Resources During Disasters/Crisis

- **Effectiveness of resources:**
 - Food, clothes, hygiene products provided
 - Specific needs not assessed, and resources provided not always relevant (food/clothes)
 - For those who lost homes or were displaced, shelter was greatest need
- **Duration of availability:**
 - Financial resources termed quickly
 - Essential workers laid off afterwards
 - TANF & unemployment not available to all

Individuals who were most impacted were unable to access the resources that they most needed



Picture from November 7, 2019
ABC News, Kincaid Fire

Intention vs. Impact

*" During the fires we were evacuated and told to go to a shelter. I am an indigenous person and when I arrived there was no one who spoke my language or even Spanish. I was just placed in a corner. Then when it was time to eat it was hard for me because it wasn't the type of food of my culture, it was foreign to me. Then I was asked if I needed clothes and was handed western clothing, I get it beggars can't be choosers **but this really made me feel invisible.**"*

-Indigenous Promotora

Cultural Sensitivity

Messaging:

- No language justice
- Mainly through digital platforms

Donations & Resources:

- Expired food given to BIPOC community
- Made them feel like they weren't worthy or human

Resources:

- Not culturally appropriate to BIPOC communities



Barriers to access vaccines:



- **Signage:**
 - Primarily in English, secondary in Spanish
 - Absence of other languages & dialects spoken in county
- **Registration & Paperwork:**
 - Excessive paperwork at high literacy level
 - Complex medical language
- **Barriers for Pop-up Clinics:**
 - Many barriers such as permits, coordination, space, etc.
 - Hours of operation were not accessible to all
- **Different Abilities:**
 - Lack of responsiveness to those on the spectrum or with different abilities (i.e.: children's vaccine clinic)



Highlights & Key Lessons



It Worked! COVID Health Equity Meetings



- **Who:**

- Key stakeholders such as CBOs, CHWs, & CHW groups
- Collaborative space for community-driven response
- Language justice during meetings

- **Why:**

- Co-create a community-led response
- Share best practices, resources, funding opportunity, etc.
- Support of community CHWs through COC & pay equity

- **What else:**

- Compassion in action - a unified commitment from all members to lead with dignity, respect, humility, and love



*This was a crucial step in starting the switch from
"do for me" to "do with me"*



It Worked! Community Collaboration

- **Co-creation** of culturally responsive messaging with language justice
- **Collaboration** with public health, providers, artists, and CHWs
- **Commitment to** reach the most impacted communities through multiple outreach & communication strategies
- **Consistent** evaluation of messaging to pivot, update, and change based on emerging needs and trends



“ Me pongo mi mascarilla para mantenerme segura, mantener a otros seguros y continuar sirviendo a mi comunidad. ”

This collaboration was essential to bridging and building trust among government, clinics, CBOs and community health workers/Promotoras.

It Worked! Collaboration with CHW/Ps



- **Known & trusted** in their community through years of service as trusted messengers, advocates, and organizers
- **Recognized** for their ability to provide information, resources, & support
- **Respected** for their commitment to build healthier, more equitable communities
- **Uniquely qualified** to address the unique needs of their community through their knowledge and lived experience



Collaborating with CHW/Ps is should continue for future disasters and public health issues

It Worked! CHW/P Organizing & Outreach



- **Support at Vaccine Clinics:**
 - CHW/Ps destigmatized access to vaccines and addressed fears
 - Support for translation, filling out paperwork, children's activities
- **Community Needs Assessment:**
 - Identified and informed where vaccine pop-ups should be held
 - Identified communities that were not being reached & why
- **Outreach & Engagement:**
 - Door to door canvassing, tabling, health fairs, social media, radio
 - Provided up-to-date and critical information and resources
 - Adjusted strategies as needed to reach those most impacted

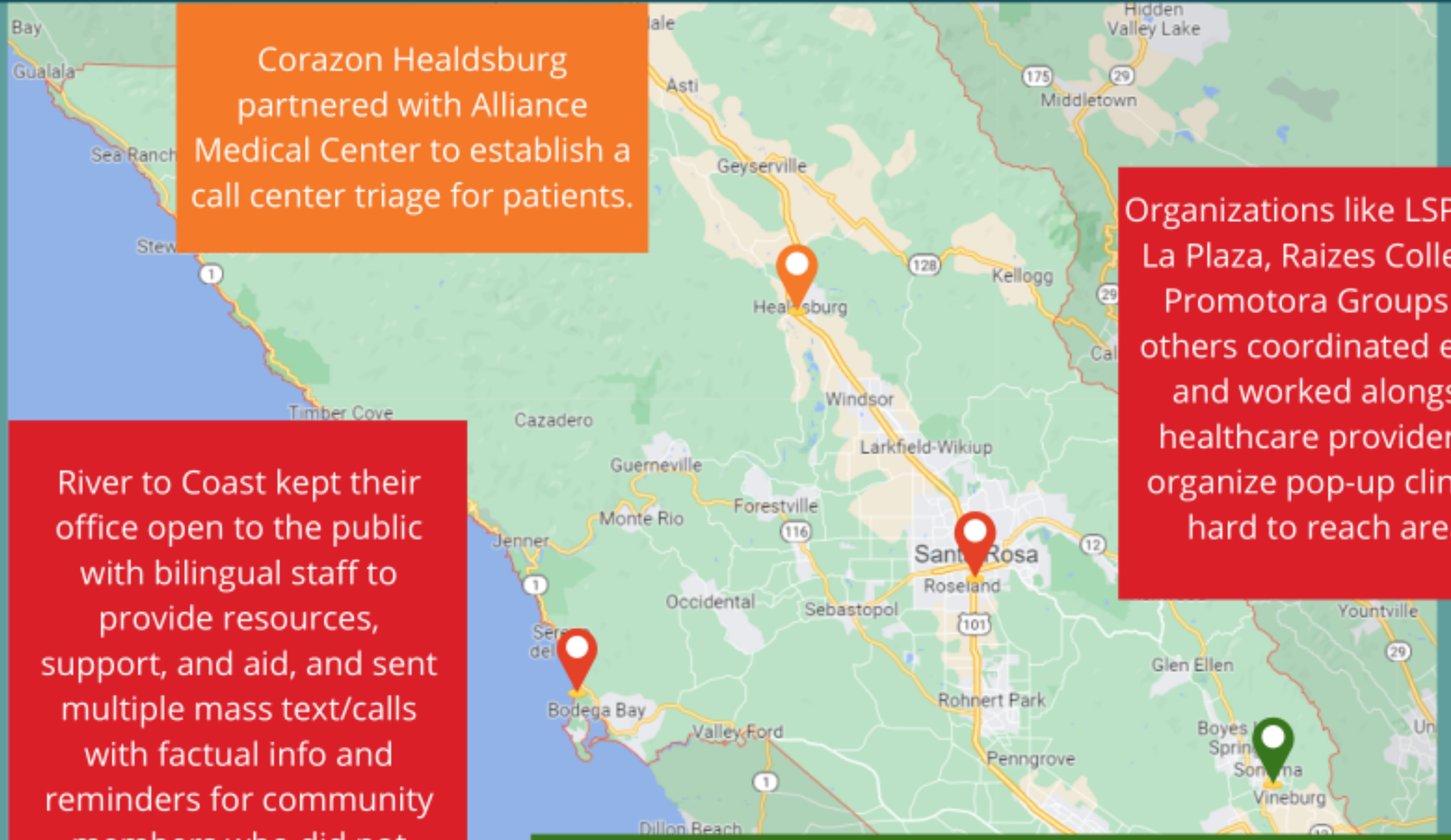


CHW/P driven outreach & communication was key in connecting and reaching marginalized communities

It Worked! Unique Tactics Across the County

Each organization had a region-specific response and understood that one size does not fit all

This was an important step in order to reach communities that otherwise might have gone unseen.



Corazon Healdsburg partnered with Alliance Medical Center to establish a call center triage for patients.

River to Coast kept their office open to the public with bilingual staff to provide resources, support, and aid, and sent multiple mass text/calls with factual info and reminders for community members who did not have social media.

Organizations like LSP, CWB, La Plaza, Raizes Collective, Promotora Groups and others coordinated efforts and worked alongside healthcare providers to organize pop-up clinics in hard to reach areas.

La Luz Center partnered with las Luchadoras, local schools, Sonoma Valley Health center and district rep to provide accurate information and resources to the community through charlas comunitarias and in-person clinics in transited areas.

Recommendations Going Forward



Meet Community Where They Are...

- **Partner with CHW/Ps** as trusted leaders to inform, strategize, and make decisions
- **Share power** with community by engaging and centering them in decisions "not without me"
- **Provide access** to representatives of resources during disasters: i.e. *DMV, Social Security, Consulates, Medi-Cal/Medicare etc.*
- **Distribute resources** by acuity of need via phased approach: i.e. *phase #1 social emotional support and basic needs like shelter*



Respond with Compassion & Care

- **Educate & Empower:** Provide cultural humility and healing informed care trainings for disaster response leadership and support staff to promote environments of healing and recovery
- **Respond & Resource:** Have a culturally responsive lens and humanizing approach when providing resources to individuals such as cultural foods, clothing, and housing



Walk the Talk

- **Hold Awareness:** of the generational & historical trauma of our community members
- **Understand:** the harm our past actions have incurred
- **Respond and Repair:** by transforming disaster response systems to be trauma and culturally responsive



Strengthen Disaster Response by:

North County:

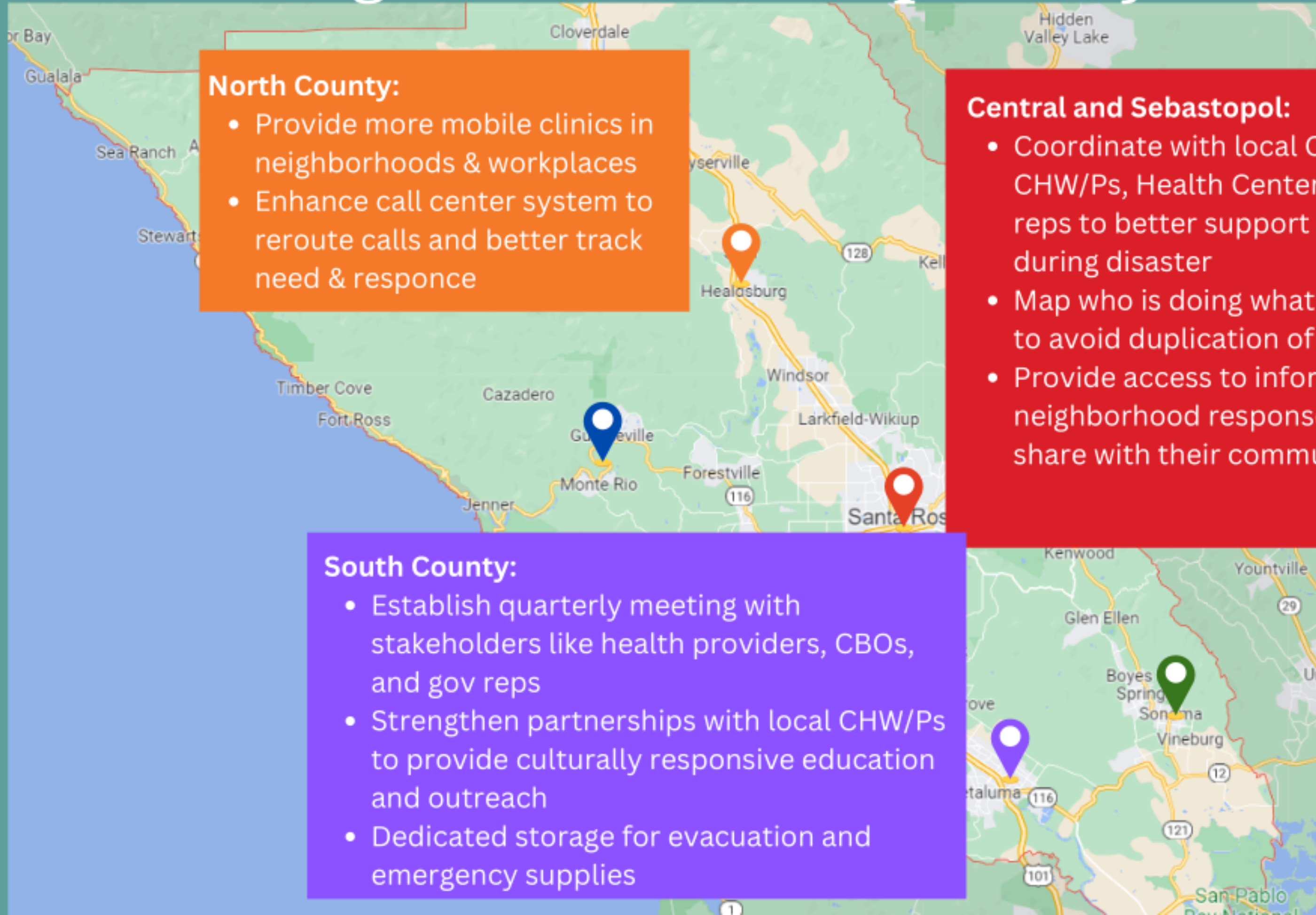
- Provide more mobile clinics in neighborhoods & workplaces
- Enhance call center system to reroute calls and better track need & response

Central and Sebastopol:

- Coordinate with local CBOs, CHW/Ps, Health Centers, and gov reps to better support community during disaster
- Map who is doing what and where to avoid duplication of services
- Provide access to information for neighborhood response teams to share with their communities

South County:

- Establish quarterly meeting with stakeholders like health providers, CBOs, and gov reps
- Strengthen partnerships with local CHW/Ps to provide culturally responsive education and outreach
- Dedicated storage for evacuation and emergency supplies



Coastal Area:

- Engage with other hubs to coordinate response, activities, and messaging
- Support more emergency outreach
- Partner with local community networks

Sonoma & East County:

- Launch more outreach and education for employers, churches, and community groups
- Partner with existing organizations and trusted messengers to deliver services and resources in vulnerable communities

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Why this is important...

Telling this story is important because we need to honor the many individuals who led to this transformation by elevating their feedback, lessons learned, and recommendations to those who hold power to make systemic changes in future emergency response.

"Don't do anything for me without me."



For More Information

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