



How Local Communities Can Align with United Nations' Sustainable Development Goals: A Santa Cruz County Case Study

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6.1 Introduction

Now in its 25th year, Santa Cruz County has been collecting data through the Community Assessment Project (CAP) as part of its goal to achieve wellbeing and equity for everyone. Prior to the CAP, social data for the county were collected in a disaggregated way with little “cross-pollination” across sectors and organizations. When the CAP was formed and data began to be collected and organized in a unified manner throughout the county, it presented a significant change to provide a more integrated snapshot of local conditions. More recently, the County has been moving the CAP toward local alignment with the United Nations' 17 Sustainable Development Goals (SDG) established in September 2015.

To help the County achieve wellbeing for all its residents, the United Way of Santa Cruz County (United Way) engaged Applied Survey Research (ASR) as research partner. ASR, a California-based social research organization, has long recognized and shared the story of how communities link their efforts to work collectively toward shared results. ASR has considered the conditions required for communities to work

well in a participatory way, to better understand disparities in outcomes, to determine the necessary steps to reduce achievement gaps, and to increase equity in results.

In other words, what outcomes are being realized? What structures and commitments must be in place? What capacity is required for continuous improvement of the ways to achieve desired change? These questions help to position natural integration with the SDGs, which in turn helps communities achieve wellbeing for all.

In this chapter, we will explain the three conditions necessary for applying the international goals of the SDGs locally: commitment to wellbeing for all, population measures of wellbeing, and ability to coordinate action (Fig. 6.1). Then we will provide examples of how Santa Cruz County is aligning those SDGs to its goals by leveraging data from the CAP. Finally, we will show how other communities can do the same.

When considering the three conditions necessary for localizing the SDGs, it is first essential to commit to and work from a position of enabling wellbeing and equity for all. Secondly, communities must link measures of individual and population wellbeing via social connectedness. The third condition captures the ability to align and coordinate action through results-based accountability (RBA) and collective impact models. These approaches yield a great many choices that communities can customize and connect to the

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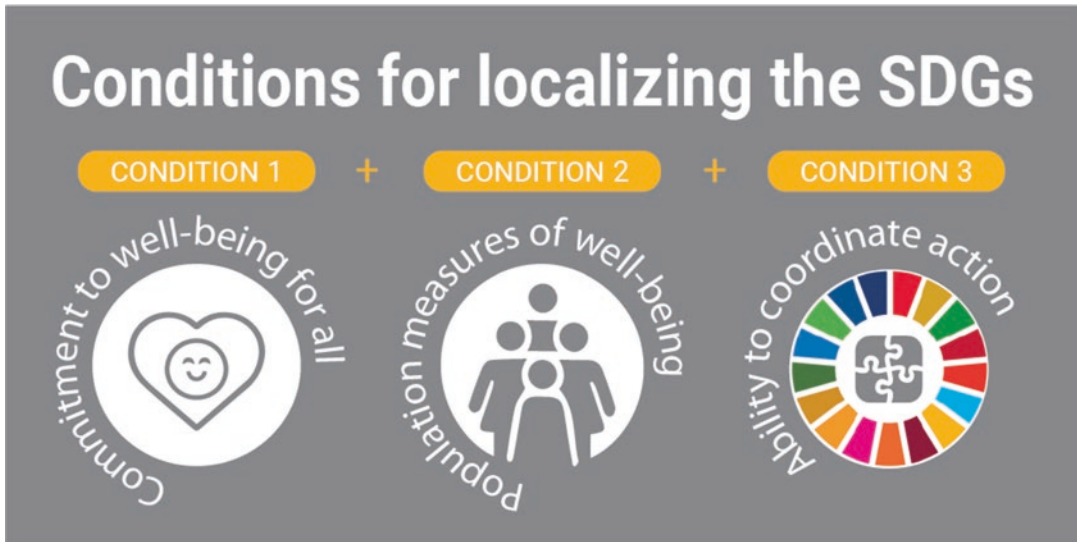


Fig. 6.1 The three conditions necessary for localizing the goals of the SDGs. From Applied Survey Research (2020). Conditions for localizing the SDGs. [Graphic]. (Reprinted with permission)

SDGs in ways that best fit their particular environments.

As these conditions are explored, the Santa Cruz County CAP report and related efforts serve as examples. While the journey to help localize the SDGs will be unique across communities, the conditions considered here offer an orienting framework as a way to achieve universal wellbeing.

6.2 Santa Cruz County Background and the CAP's History

Santa Cruz County is situated alongside the Pacific Ocean on the central coast of California, just south of San Francisco. Of the state's 58 counties, Santa Cruz County ranks in the lower half population-wise, with nearly 276,000 residents (U.S. Census Bureau 2019). Santa Cruz County is composed of four cities—Capitola, Santa Cruz, Scotts Valley, and Watsonville—and its unincorporated areas. While the tech industry of Silicon Valley is just to the north, technology is not a significant part of the local economy. Many local people may be employed in Silicon Valley and may bring home their tech salaries, but the

primary drivers of Santa Cruz County's economy include higher education, tourism, and agriculture (Applied Survey Research 2017).

The Community Assessment Project was established in 1994 by leading local entities, most notably the United Way of Santa Cruz County (United Way), with the initial idea coming from Dominican Santa Cruz Hospital. CAP serves the community by guiding plans and processes, examining quality-of-life domains, tracking well-being indicators, and establishing and monitoring community-generated goals. Using these data, Santa Cruz County government, along with other organizations and agencies, seeks to improve the quality of life for all residents. The long-standing success of this community initiative can be attributed to the significant pillars of strong leadership and a commitment to sustainability and innovation.

The CAP showcases how organizations and institutions in Santa Cruz County can work together for the common good of all residents in their respective jurisdictions. It is fundamental to have stable and competent leadership sustaining this effort. Since the CAP's inception, the United Way has been the valuable backbone organization for the project, with ASR serving as its research partner. Other organizations have

supported the effort and used this shared dataset, such as local hospitals, law enforcement agencies, educational institutions, and more. Indeed, the CAP steering committee is large, reflecting almost all community initiatives and partnerships.

6.3 Community Conditions Necessary for Applying the UN's SDGs

6.3.1 Condition 1: Commitment to Wellbeing for All

For 25 years, the CAP has orientated its efforts using a five-step community improvement cycle (Fig. 6.2). In so doing, data-informed accountability was embedded in all CAP reports. A commitment to the community to pursue equitable quality of life for all its residents remains prominent. Inclusive engagement is at the forefront of the community improvement cycle, as it is essen-

tial for diverse perspectives representing the entire community to be included.

For example, the CAP is governed by a steering committee of more than 30 individuals representing diverse sectors of the county, including nonprofit organizations, government, higher education, and businesses, as well as individual community people. This varied membership holds a collective commitment to equitable wellbeing for all county residents. It is this shared mission that galvanizes their efforts, such as the biennial production of a comprehensive report, including enhancements leveraging past features to support new data, new strategies for engagement of partners, and new ways to share and utilize the findings.

Indeed, CAP's collaborative leadership has helped to position the project at the center of the dedicated work required to establish a county-wide Culture of Health. Defined as the circumstances that are cultivated to create and foster equity for all, a Culture of Health seeks to pursue and realize health and wellbeing across various



Fig. 6.2 The five-step cycle of community improvement. From Applied Survey Research (2020). Cycle of Community Improvement. [Graphic]. (Reprinted with permission)

social and economic sectors (Evidence for Action n.d.).

While the CAP, under the stewardship of United Way, has received several awards and acknowledgments over its long history, perhaps the most important was inclusion in the 2013 inaugural Culture of Health Award winners. This prize, afforded by the Robert Wood Johnson Foundation (RWJF) and the University of Wisconsin Population Health Institute (UWPHI), recognized Santa Cruz County for centering its efforts in data, ensuring that decision-making was informed, could be measured, and, importantly, could be acted upon (Robert Wood Johnson Foundation 2013). More specifically, acknowledgment was given to the CAP's sustained and continuously improving process to use community assessment data to examine disparities and assets, to ensure community voice is expressed, and to coordinate and motivate initiatives to action through the development of community goals.

In these ways, the CAP put in place a culture of accountability and, notably, supported a nimble system of partnerships that could leverage each other's work. Several partnerships and initiatives were developed in response to CAP findings, including Healthy Kids of Santa Cruz County (health-care program insuring children), *Jóvenes SANOS* (initiative empowering county youth to advocate for their own health and well-being), the Youth Violence Prevention Task Force, and the formerly titled Together for Youth, now named Community Prevention Partners.

Receipt of this recognition elevated the CAP's goals and connected Santa Cruz County with other leaders, partners, and communities throughout the United States who are engaged in similar pursuits for equity and wellbeing. Consequently, new resources and capacities were made available that are usually inaccessible to smaller counties such as Santa Cruz. United Way continues to participate in generating new insights from the growing list of Culture of Health Award recipients from across the United States. It is also providing innovation assistance and action for the CAP and, subsequently, Santa Cruz County to innovate through exploring and adopting new

data, indicators, and communication and action strategies (Fig. 6.3). The Culture of Health Alumni network consists of a network of alumni participants from all over the country—a key example of leadership, support, and innovation all working from a shared commitment to wellbeing for everyone.

As the CAP leadership has long maintained the ability to hold itself accountable in striving for a Culture of Health—for wellbeing for all—so do the SDGs hold themselves to a similar standard. This alignment of accountability for intention and action is a foundation for localizing the SDGs, and it sets the stage for adopting the shared measures required to achieve them.

6.3.2 Condition 2: Individual and Population Measures of Well-Being via Social Connectedness

Individual well-being is composed of four domains: physical, mental, emotional, and spiritual. Community well-being, in contrast, is captured in the CAP through five domains: Economic Stability; Education; Social and Community Context; Health and Health Care; and Neighborhood and Built Environment. The intermediary between these two realms of wellbeing is social connectedness, which attests to the role relationships and engagement play both at the individual and the collective levels. The PERMA (Positive emotions, Engagement, Relationships, Meaning, and Accomplishments) model put forth by Dr. Martin Seligman names these five qualities as the foundational elements of wellbeing (Positive Psychology Program 2017). Research supports the idea that the more of these items one has, the more his or her connections are increased, subsequently improving overall health and wellbeing (Kern et al. 2015). That said, the opposite also holds true, as isolation and a lack of connections can negatively impact one's health and wellbeing (Seppala 2014).

In 2016, at a Community Indicator Consortium (CIC) session regarding social connectedness, ASR presented a workshop on how to align these



Fig. 6.3 RWJF Culture of Health Prize Alumni Network, Robert Wood Johnson Foundation (2019). RWJF Culture of Health Prize Winners. [Graphic]. Retrieved from:

<https://www.countyhealthrankings.org/learn-others/rwjf-culture-health-prize/past-winners>

levels of wellbeing and the subsequent implications for the field of wellbeing research and application as a whole (Applied Survey Research 2016). Several takeaways from this session had the most impact, including (1) wellbeing exists in domains beyond those aforementioned; (2) it is important to achieve wellbeing for *all*; and (3) equity has an important role in this conversation.

In effect, this session demonstrated that without these noted components, social connectedness as a bridge between individual and community wellbeing is incomplete and cannot be leveraged or attained. Wellbeing is not a concept that can be measured in a vacuum. It also has a positive impact at individual and community levels by changing the way people work together.

The CAP addresses these concerns and the relationship between individual and collective wellbeing by using common indicators to report population-level data, trend data, and integration of a community survey, which captures the sentiments of a representative sample of the county every two years. CAP secondary data are composed of a public set of population-level quantitative and qualitative measures of

wellbeing derived from sources that include the US Census Bureau's American Community Survey. Through the community survey, asset-based measures of subjective and objective aspects of wellbeing are collected and disaggregated, delivering trend data that focuses on both individual and community strengths. Further analysis allows us to explore these data by age, gender, region, housing status, race/ethnicity, and income level. Measures are regularly reviewed to remain comparable with global efforts. This work is supported by associations that Santa Cruz County has cultivated with RWJF and UWPHI's County Health Rankings and its participation in the CIC and the Organisation for Economic Co-operation and Development (OECD), specifically connecting to OECD's work on the Better Life Index. Sustained relationships with these national and international organizations have provided Santa Cruz County the unique opportunity to learn and leverage best practices locally to better explore and understand the alignment between individual and group wellbeing at local, national, and international levels.

As the CAP moves into its 25th year, the natural ways in which the SDGs are present in the report become more formalized, further aligning the goals of both these efforts. Additionally, many of these overlapping measures, as well as those specific to the CAP, offer the necessary information to influence activities intended to strengthen and create connections within the community. This action is at the heart of the final condition and gateway to localizing the SDGs.

6.3.3 Condition 3: Alignment and Ability to Coordinate and Leverage Action

Continuous community improvement necessitates establishing a culture of accountability. This goes beyond intentionality and commitment guided by the tenets of a Culture of Health and implementation of population wellbeing measures informed by community connectedness. This means that resources are applied equitably to population-level community programming efforts in order to coordinate and leverage action.

Early in the CAP process, Santa Cruz County adopted Results-Based Accountability (RBA), developed by Mark Friedman, founder and director of the Fiscal Policy Studies Institute (FPSI) in Santa Fe, New Mexico. This is a way to connect program and population data through a structured way of thinking and acting in order to turn the curve for community change (Friedman 2015). Understanding the work necessary to turn the curve—or to bend data trends toward desired results—is supported through theories of change outlined in community-wide action plans. In fact, the ability to “turn the curve” may be considered one of the most valuable skills to develop if a community is serious about improving outcomes.

A theory of change defines what is required to achieve results, is ideally created with an equity approach, and is predicated upon the notion that working together in specific ways, with certain groups, is essential for community-level change in resource-constrained environments.

Consequently, a theory of change provides coordinated programs and initiatives, a framework by which data can guide the way communities work toward wellbeing for all. This is achieved by manifesting individual and group-level contributions and by monitoring and measuring those contributions transparently. A culture of accountability is created through leveraging RBA alongside a theory of change to solicit responses to the following questions:

1. *How much did we do?* Effectively, this question seeks to understand the number of inputs given toward a particular effort.
2. *How well did we do it?* This question addresses the effort’s equity and sustainability.
3. *Is anyone better off?* Ultimately, this question asks whether the desired results were achieved, and if people’s lives were improved as a consequence of pursued interventions.

6.4 Santa Cruz County: An Example of Success

For reference, we will explain how Santa Cruz County now aligns its goals with the UN’s SDGs. We have included sample results from the 2019 CAP survey.¹ These data will be a valuable resource to guide local governments and other agencies in their quest to improve quality of life for all county residents.

For the 2019 CAP survey, more than 850 county residents age 18 and over were selected by random digit calling. All calls, including those to mobile phones, were done manually to comply with Telephone Consumer Protection Act (TCPA) rules. Selections were adjusted to deliver a fair and equitable representation of local residents. Using Spanish and English, surveyors asked questions in several quality-of-life categories, and the results were tabulated and compared with the data from previous years. This helped to provide a “progress map” that revealed trends in various classifications, such as employment sta-

¹The complete report is available at www.appliedsurvey-research.org

tus, food security, access to health care, educational attainment, and other relevant categories. As with past CAP reports, positive trends will be further supported, while negative or neutral trends will be examined for opportunities to improve outcomes.

6.5 Specific SDGs Directly Connected to CAP Social Determinants of Health (SDOH) Components

The primary purpose of the United Nations' SDGs is to balance the three dimensions of sustainable development—economic growth, environmental sustainability, and social inclusion. The CAP report has recently incorporated these

SDGs while continuing to address the SDOH inequities and resource disparities that were uncovered in Santa Cruz County during previous surveys. As such, the CAP data are now organized in relationship to the five key areas of SDOH: Economic Stability; Education; Social and Community Context; Health and Health Care; and Neighborhood and Built Environment.

Three SDGs—No Poverty; Zero Hunger; and Decent Work and Economic Growth—were aligned to the Economic Stability SDOH and its accompanying goals:

- Goal 1: By 2020, reduce the winter unemployment rate by one-half percent, creating 725 new winter jobs in Santa Cruz County.
- Goal 2: By 2020, increase the housing stock by 1000 units in Santa Cruz County.

ECONOMIC STABILITY



NO POVERTY

End poverty in all its forms everywhere. Economic growth must be inclusive to provide sustainable jobs and promote equality.



ZERO HUNGER

End hunger, achieve food security and improved nutrition, and promote sustainable agriculture.



DECENT WORK AND ECONOMIC GROWTH

Promote sustained, inclusive and sustainable economic growth, full and productive employment, and decent work for all.

Agriculture is one of the two largest employment sectors in Santa Cruz County, and the county has a high concentration of jobs in this sector when compared with the rest of California.²

Tourism also ranks as one of the top employers and revenue-producing industries in Santa Cruz County, breaking the \$1 billion mark in travel-related spending for the first time in 2017 and for a second time in 2018.³ Visitor dollars help to support Santa Cruz County by providing business and tax revenues, which contribute to

local employment; open space, beaches, and parks; and locally owned small businesses.⁴

The 2019 CAP report shows that the gap has continued to narrow between the available workforce and total employment (141,700 workforce vs. 97,600 jobs in 2010; 144,900 workforce vs. 113,800 jobs in 2018). Tourism jobs have also increased (7580 in 2010 vs. 11,403 in 2018). Therefore, the County is on a positive track and should continue with current activities.

²Santa Cruz County. (2014). *Economic Vitality Study*.

³Dean Runyan Associates, Inc. (2019). *California Travel Impacts 2010-2018p*.

⁴Visit Santa Cruz County (VSCC). *Tourism Facts*. Accessed on July 26, 2016, from <http://www.santacruzca.org/partners/tourism-facts.php>

The County learned through the 2019 CAP report that residents are not feeling better off financially now than they were a year ago—40.5% feel better off, which is a decline of 1.6% over the past 12 years. However, between 2009 and 2017, respondents reporting annual family income of at least \$75,000 increased by 27%.

According to the California Housing Partnership (CHP), Santa Cruz County must create 11,873 more affordable rental homes, equivalent to 27% of the existing rental stock, to meet affordable housing needs.⁵

munity, and they will see their school as a welcoming, essential, and safe place.

- Goal 2: By 2020, all students will have broader access to courses and enrichment activities, including visual and performing arts, career technical education, and digital technology.
- Goal 3: By 2020, all students will be provided sufficient behavior, health, and counseling services to succeed in their chosen educational and career pathways.

EDUCATION



QUALITY EDUCATION

Ensure inclusive and equitable quality education, and promote lifelong learning opportunities for all. This is the foundation for improving people's lives and creating sustainable development.

The CAP report revealed that median home prices have increased significantly since 2012—from \$426,000 to \$743,000. This means that only 17.3% of homes are affordable to median-income families, versus 53.8% in 2010. (The US median home price in 2019 was \$260,000, with 61.4% affordable for median-income families.)

Therefore, the County has learned that, while incomes and employment opportunities may be increasing, the ability to afford housing in the local market has declined. Perhaps this is why fewer people believe they are better off financially than they were a year ago even though they are earning more.

One SDG—Quality Education—was aligned to the Education SDOH and its accompanying goals:

- Goal 1: By 2020, all students will be fully connected and engaged with their school com-

High quality, developmentally appropriate early childhood education (ECE) produces positive effects on children's cognitive and social development.⁶ Moreover, studies of the costs and long-term benefits of these ECE programs have consistently found substantial savings derived over decades, such as reduced need for remedial and special education, reduced incarceration rates, and lower rates of teen pregnancy. Analyses of the costs and benefits of ECE show a 13% per year return on investment. Additionally, research has found that high quality and reliable child care increases employee productivity and improves the bottom line for business.^{7,8}

⁶NAEYC. A Call for Excellence in Early Childhood Education. Accessed on October 2, 2019, from <https://www.naeyc.org/policy/excellence>

⁷University of California, Berkeley, Center for Labor Research and Education. *Economic Impacts of Early Care and Education in California*.

⁸Heckman, James, The Life-cycle Benefits of an Influential early Childhood Program. Accessed on October 17, 2017, from <https://heckmanequation.org/the-heckman-equation/>

⁵California Housing Partnership. (2018 September). *Santa Cruz County's Housing Emergency and Proposed Solutions*.

However, according to the 2019 CAP report, 41.1% of parents say that finding affordable child care is a “somewhat serious” or “very serious” problem. Here is another area where relevant partners are collaborating to solve these issues.

Studies in the United States and internationally show that the more developmental assets young people acquire, the better their chances of succeeding in school and becoming happy, healthy, and contributing members of their communities.⁹ Importantly, they are less likely to engage in high-risk behaviors.¹⁰

The 2019 CAP report revealed that 50% of seventh-grade students say they have someone at school who encourages them and expects the best. By eleventh grade, that number drops to 41%. This is an opportunity for education-related initiatives to support students, teachers, and staff developing stronger relationships.

America’s schools must meet the educational needs of an increasingly diverse student population.¹¹ English Learners (ELs) are the fastest-growing student population within the United States, and a large achievement gap exists between ELs and their non-EL classmates.¹²

In Santa Cruz County, the number of ELs has dropped from 28.9% in 2010 to 25.8% in 2018. During the same time, special education enrollment has increased from 11.3% to 13.2%. All of these figures are higher than the average for the state of California.

High school graduation rates have remained at about 81.7% between 2011 and 2018, but they did reach a high of 87.4% in 2014. In all but one year, the rate has exceeded that of California.

Without a college degree, children born in the bottom income quintile have a 45% chance of remaining there as adults. With a degree, they have less than a 20% chance of staying in the bot-

tom quintile and a roughly equal chance of ending up in any of the higher income quintiles.¹³

The CAP survey reveals that enrollment in Cabrillo College (the local community college) dropped from 13,825 to 11,648 between 2012 and 2018. However, enrollment at the University of California, Santa Cruz, increased from 17,404 to 19,700.

Graduation rates are at around 90% or more for most schools, although in reality, all students should be achieving a high school diploma or its equivalent. They also should be moving on to college, vocational schools, or career training so they can have healthy and successful lives as adults.

As one example, Pajaro Valley Unified School District in Santa Cruz County has been addressing the literacy challenge head-on. It instituted *Paso a Paso* (Step by Step), which offers a variety of reading and alphabet assignments for children from toddlerhood up to third grade. Parents can download the assignments, given in English and Spanish, and work with their children on fun activities such as tracing letters, singing The Alphabet Song, reading stories, or engaging in related endeavors. At the completion of each set of tasks, the child receives a certificate.

One SDG—Good Health and Well-Being—was aligned to the Health and Health Care SDOH and its accompanying goals:

- Goal 1: By 2020, all Santa Cruz County residents will have a regular source of primary care and integrated behavioral health services with a focus on:
 - Decreasing disparities
 - Decreasing reliance on Emergency Rooms as a regular source of health care
 - Increasing access to mental health and substance use disorder treatment
- Goal 2: By 2020, obesity in Santa Cruz County will be reduced by 10%.

⁹Search Institute. Accessed on August 2, 2016, from <http://www.search-institute.org/research/developmental-assets>

¹⁰Search Institute. Accessed on August 2, 2016, from <http://www.search-institute.org/research/developmental-assets>

¹¹U.S. Department of Education. 2010. *Diverse Learners*.

¹²U.S. Department of Education. 2010. *Diverse Learners*.

¹³U.S. Department of the Treasury with the U.S. Department of Education. 2012. *The Economics of Higher Education*.

HEALTH AND HEALTH CARE



GOOD HEALTH AND WELL-BEING

Ensure healthy lives and promote well-being for all ages, which is essential for sustainable development.

Individuals without a dependable source of health care have more difficulties obtaining needed care, receive fewer preventive health services, are more likely to wait until their conditions worsen before seeking treatment, and are more likely to require hospitalization compared with those who have a dependable source of health care.^{14,15} Children's access to primary health care is especially important to monitor healthy growth and development¹⁶ and to prevent everyday illnesses from progressing into more serious problems. Children with a usual source of care are more likely to utilize preventive services and to have better health outcomes and fewer disparities overall.¹⁷

CAP survey respondents in 2019 (88%) reported at similar percentages to previous years that in the past 12 months they were able to receive the health care that they needed, although Whites were more likely to receive it than Latinos. About 60% received care in a regular doctor's office, while about 25% received it at a community clinic or hospital. The remainder had no reliable source.

A lack of health insurance coverage is a barrier to accessing health services. Families and individuals without health insurance coverage often have unmet health needs, receive fewer preventive services, suffer delays in receiving appropriate care, and experience more hospitalizations.¹⁸

Children who have health insurance learn better in school, miss fewer days of school, are more likely to have a regular source of primary care, and are less likely to be hospitalized for conditions that could have been treated by a primary care physician.¹⁹

Pregnancy can provide an opportunity to identify existing health risks in women and to prevent future health problems for women and their children. The risk of pregnancy-related complications and maternal and infant mortality can be reduced by increasing access to quality care.²⁰ Regular prenatal care reduces the risk of adverse birth outcomes, including preterm and low birth weight babies.²¹

In Santa Cruz County, about 87% of pregnant women receive prenatal care during the first tri-

¹⁴U.S. Department of Health and Human Services, Agency for Healthcare Research and Quality. (2011). National Healthcare Disparities and Quality Report. Washington, DC.

¹⁵Billings, J., Bidman, A.B., Grumbach, K., et al. (1995). Preventable hospitalizations and access to health care. *Journal of American Medical Association*, 274(4): 305–311.

¹⁶ChildStats.gov. *America's Children: Key National Indicators of Well-Being*. Usual Source of Health Care. 2015. <http://www.childstats.gov/americaschildren/care2.asp>. Accessed October 21, 2015.

¹⁷U.S. Department of Health and Human Services, Health Resources and Services Administration, Maternal and Child Health Bureau. *Child Health USA 2014*. Rockville, Maryland: U.S. Department of Health and Human Services, 2014.

¹⁸U.S. Department of Health and Human Services. (2011). Healthy People 2020 objectives. Retrieved from <http://healthypeople.gov/2020/topics/objectives/2020/overview.aspx?topicid=1>

¹⁹Bernstein J, Chollet D, Peterson S. *How Does Insurance Coverage Improve Health Outcomes?*. ISSUE BRIEF 2010. Available at: http://www.mathematica-mpr.com/~media/publications/pdfs/health/reformhealthcare_ib1.pdf. Accessed October 21, 2015.

²⁰U.S. Department of Health and Human Services, Healthy People 2020. Healthy People 2020. Accessed on August 9, 2016, from <https://www.healthypeople.gov/2020/topics-objectives/topic/maternal-infant-and-child-health>

²¹What is PedNSS/PNSS? *Centers for Disease Control and Prevention* 2011. Available at: http://www.cdc.gov/pedness/what_is/pnss_health_indicators.htm. Accessed October 2015.

mester. That's an increase of four percentage points from 2012. Teen mothers are less likely to receive this care than mothers in older age groups.

Teen parents and their children are often at greater risk for experiencing negative short- and long-term consequences in the areas of health, school, and economic success, as compared with parents who wait to have children.²² Research from the National Campaign to Prevent Teen and Unplanned Pregnancy links teen pregnancy to preterm births, low birth weight, and a host of social issues, including poverty, responsible fatherhood, and overall wellbeing.²³

There is good news from the 2019 CAP report. Girls from 15–17 years are less likely to become pregnant now than in 2012 (12.4% vs. 4.2%). The same is true for girls 18–19 years (26.6% vs. 10.6%).

When asked about their mental health, the percentage of CAP overall survey respondents who had felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities increased from 6.0% in 2017 to 8.0% in 2019. In 2019, Latino survey respondents were slightly more likely than White respondents to feel this way—8.0% and 4.2%, respectively. Adolescent hospitalizations for emotional issues also increased. For every 1000 children from 5–14 years old, 2.2 were hospitalized in 2016, along with 9.4 of every 1000 aged 15–19 years.

Healthful diets and healthy body weights reduce the risk of chronic diseases and promote optimum health.²⁴ Efforts to change diet and

weight should address individual behaviors, as well as the policies and environments that support these behaviors in settings such as schools, worksites, health care organizations, and communities. For example, having healthful food available and affordable in food retail and food service settings allows people to make more healthful food choices.²⁵

To address some of these issues, the United Way established *Jóvenes SANOS*, a youth advocacy and leadership program seeking to empower, educate, and raise awareness about childhood obesity within the community. The purpose is to shift the local culture by encouraging businesses to offer healthful food choices and encouraging people to increase their physical activity.

For example, *Jóvenes SANOS* has prompted corner markets to offer more fresh, non-processed foods; it encouraged restaurants to include more healthful choices on their menus; and it requested that the local Metro service include at least 50% healthful items in its vending machines.

Survey respondents overall have consistently described their general health as Excellent, Very Good, or Good (83.7% in 2019) at percentages exceeding the Healthy People 2020 target of 79.8%. In 2019, Latino survey respondents (80.6%) were significantly less likely than White survey respondents (85.7%) to describe their health as Very Good or Excellent. Over the past 10 years, there has been a steady increase in the number of overall survey respondents who were obese and overweight based on BMI calculation (61.7% in 2019). Latino survey respondents (76.3%) were more likely than White survey respondents (53.7%) to be obese or overweight in 2019. Clearly, the organizations across the county must educate the population and motivate them to reduce their weight and follow better health practices.

On a positive note, children in Santa Cruz County are much less likely than their statewide counterparts to drink one or more sugar-

²²Kaye K, Stewart Ng A. TEEN CHILDBEARING, EDUCATION, AND ECONOMIC WELLBEING. *Why It Matters: Teen Childbearing, Education, and Economic Wellbeing* 2012. Available at: <https://thenationalcampaign.org/sites/default/files/resource-primary-download/childbearing-education-economicwellbeing.pdf>. Accessed October 2015.

²³National Campaign to Prevent Teen and Unplanned Pregnancy. *Why it matters: Teen pregnancy*. 2012. Accessed November 2015 from: http://www.thenationalcampaign.org/why-it-matters/wim_teens.aspx

²⁴U.S. Department of Health and Human Services, Healthy People 2020. Healthy People 2020. Accessed December 2015 from <https://www.healthypeople.gov/2020/topics-objectives/topic/nutrition-and-weight-status>

²⁵Centers for Disease Control and Prevention. Overweight & Obesity. *Healthy Food Environments*. Accessed December 2015 from <http://www.cdc.gov/obesity/strategies/healthy-food-env.html>

sweetened beverages per day. In 2011, the rate was 30% in Santa Cruz County versus 41% in California. By 2015, those numbers were 17% and 43%, respectively.

According to the 2019 CAP report, binge drinking has increased in Santa Cruz County, moving from a low of 12.2% in 2009 to a high of 21.2% in 2019. Likewise, adolescents who ever have had an alcoholic drink have moved from a low of 18.6% in 2014 to a level of 54.3% in 2019. However, that has decreased from a high of 65.1% in 2015.

Two SDGs—Reduced Inequalities and Sustainable Cities and Communities—were

aligned to the Social and Community Context SDOH and its accompanying goals:

- Goal 1: By 2020, more Santa Cruz County residents will build meaningful social bridges across differences in age, race, ethnicity, class, and culture.
- Goal 2: By 2020, schools and communities will be safe, supportive, and engaging places for children, youth, and families.
- Goal 3: By 2020, more Santa Cruz County residents will feel empowered to experience and pursue long-term quality of life.

SOCIAL AND COMMUNITY CONTEXT



REDUCED INEQUALITIES

Reduce inequality within and among countries. Policies must be universal in principle while meeting the needs of disadvantaged and marginalized populations.



SUSTAINABLE CITIES AND COMMUNITIES

Make cities and human settlements inclusive, safe, resilient and sustainable. Communities must provide opportunities for all, with access to basic services, energy, housing, transportation, and more.

Although health is one of the important domains of overall quality of life, there are other domains as well, including jobs, housing, schools, the neighborhood, aspects of culture, values, and spirituality.²⁶ Focusing on quality of life as an outcome can bridge boundaries between disciplines and between social, mental, and medical services.

Over one-third (35.5%) of overall survey respondents believe that the cost of living/housing in Santa Cruz County takes away from their quality of life, followed by homelessness (22.3%). Since 2013, cost of living/housing has risen from the fifth-highest concern (13.0%) among survey respondents to the first (35.5%), a 173% increase. The life satisfaction ladder cap-

tures a snapshot of wellbeing by asking survey respondents to rank where they land on a scale of 0–10, with 10 being their best possible life and 0 their worst possible life. One-half (50.8%) of survey respondents rated themselves highly on this ladder (rungs 8–10), 41.6% rated themselves a 5–7, and 7.6% responded 0–4.

Homelessness is usually the result of the cumulative impact of several factors, rather than a single cause. The scarcity of affordable housing in the United States, particularly in more urban areas where homelessness is more prevalent, is a major structural barrier to acquiring or maintaining housing.²⁷

²⁶Centers for Disease Control and Prevention. Health-Related Quality of Life. Accessed September 2016 from <http://www.cdc.gov/hrqol/concept.htm>

²⁷National Alliance to End Homelessness. Snapshot of Homelessness. Accessed September 2016 from http://www.endhomelessness.org/pages/snapshot_of_homelessness

Nationally, 552,830 people were homeless on a given night in the United States in January 2018.²⁸ Of that number, 33% were people in families, and 67% were individuals.²⁹ The State of California had the highest rate of persons experiencing homelessness in unsheltered situations, with a rate of nearly 70% of the total homeless population.³⁰ Locally, Santa Cruz County has one of the largest concentrations of people experiencing homelessness in unsheltered situations (78%).³¹

That said, the number of homeless people in Santa Cruz County has fallen from a high of 3,789 in 2007 to 2,167 in 2019. However, homelessness is difficult to eradicate because many live under the radar, some prefer living this way, others have complex situations that may include physical and mental health issues, and other factors.

Solving these issues requires creative approaches. So, Santa Cruz County has instituted the Youth Homeless Demonstration Project with a grant from the federal government. This program targets the estimated 600 unaccompanied homeless youth, offering a drop-in center, host homes, rapid rehousing, a program for disabled youth or those with complex problems, and other programs—including those intended to prevent youth from becoming homeless.

Civic engagement refers to individual and collective actions designed to identify and address issues of public concern.³² Studies show that volunteers become emotionally connected to the

communities they serve, and they sustain community involvement after volunteering.³³

Overall survey respondents reported in 2019 that they had participated at lower levels in various civic engagement activities in the last 12 months than during the previous 2017 survey year, including voting, attending public meetings, and communication with a local politician. How do we re-engage those people? The positive result would be a more equitable connection with their local neighborhoods and communities.

Four SDGs—Peace, Justice, and Strong Institutions; Climate Action; Life Below the Water; and Life on Land—were aligned to the Neighborhood and Built Environment SDOH and its accompanying goals:

Public Safety

- Goal 1: By 2020, the juvenile crime rate will be reduced by 10% through the use of culturally responsive evidence-based strategies that promote positive interaction and reduce conflict with public safety officials.
- Goal 2: By 2020, there will be a 20% reduction in youth reporting gang involvement, resulting in a 10% reduction of gang-related criminal activity.
- Goal 3: By 2020, there will be a 10% decrease in arrests or citations of individuals with chronic SUD/COD through the increase of on-demand treatment for adults with such disorders.
- Goal 4: By 2020, the violent crime rate of 18- to 25-year-olds will be reduced by 10% through the use of targeted gang involvement intervention strategies, including restorative

²⁸The U.S. Department of Housing and Urban Development. (2019). *The 2018 Annual Homeless Assessment Report to Congress*.

²⁹The U.S. Department of Housing and Urban Development. (2019). *The 2018 Annual Homeless Assessment Report to Congress*.

³⁰The U.S. Department of Housing and Urban Development. (2019). *The 2018 Annual Homeless Assessment Report to Congress*.

³¹The U.S. Department of Housing and Urban Development. (2019). *The 2018 Annual Homeless Assessment Report to Congress*.

³²American Psychological Association. Civic Engagement. Accessed September 2016 from <http://www.apa.org/education/undergrad/civic-engagement.aspx>

³³Gergen, Christopher. (2012, April 17). The Benefits of Civic Engagement for Tomorrow's Leaders. Accessed September 2016 from <https://www.whitehouse.gov/blog/2012/04/17/benefits-civic-engagement-tomorrows-leaders>

practices, street outreach, and alternatives to adult gang involvement.

Natural Environment

- Goal 1: By 2020, residential per capita water use will be sustained at or under 2013 baseline levels through 2020.
- Goal 2: By 2020, 5% of homes in Santa Cruz County will have a solar electric or hot water

system.

- Goal 3: By 2020, stewardship actions for our waters will be increased by 10%.
- Goal 4: By 2020, 50 miles of urban bike and multi-use trails will be constructed within Santa Cruz County to decrease traffic, increase active transportation, and connect urban areas to open spaces.

NEIGHBORHOOD AND BUILT ENVIRONMENT



PEACE, JUSTICE & STRONG INSTITUTIONS

Promote peaceful and inclusive societies, provide access to justice for all, and build effective, accountable institutions at all levels.



CLIMATE ACTION

Take urgent action to combat climate change and its negative impacts because this is a global challenge that affects everyone.



LIFE BELOW THE WATER

Conserve and sustainably use the oceans, seas, and marine resources because careful management of this essential global resource is key to a sustainable future.



LIFE ON LAND

Sustainably manage forests, combat desertification, halt and reverse land degradation, and halt biodiversity loss.

Unsafe neighborhoods are associated with high rates of infant mortality and low birth weight, juvenile delinquency, high school dropout, child abuse and neglect, and poor motor and social development among preschool children.³⁴ Conversely, children who live in highly supportive neighborhoods have positive outcomes, such as stronger connections with family, peers, and community, and greater participation in out-of-school programs, volunteering, and religious services.³⁵

More than one-half (58.2%) of survey respondents said they felt Very Safe in their neighbor-

hoods, while 29.8% of survey respondents were Very Concerned about crime in Santa Cruz County. Renter survey respondents were significantly more likely than homeowner survey respondents to answer Very Concerned or Somewhat Concerned about violent crime and gangs in their neighborhoods in 2019. But 86.3% of respondents said that law enforcement personnel were Somewhat Trustworthy or Very Trustworthy.

Gangs operate in cities of all sizes throughout California and are responsible for much of the crime in the state.³⁶ Research suggests that a comprehensive approach to gangs involving pre-

³⁴Child Trends Data Bank. Neighborhood Safety. Accessed September 2016 from <http://www.childtrends.org/?indicators=neighborhood-safety>

³⁵Child Trends Data Bank. Neighborhood Safety. Accessed September 2016 from <http://www.childtrends.org/?indicators=neighborhood-safety>

³⁶California Department of Justice, Division of Law Enforcement, Bureau of Investigation and Intelligence. (2010). Organized Crime in California. Retrieved from: http://oag.ca.gov/sites/all/files/agweb/pdfs/publications/org_crime2010.pdf

vention, intervention, and suppression efforts works better than suppression efforts alone.³⁷

Youth who have been involved with the juvenile justice system are at increased risk of substance abuse, injury, and negative educational impacts. Many factors have been noted as contributing to crime among youth, including poverty, exposure to violence, maltreatment, substance abuse, and mental illness.³⁸ Youth who have spent time in detention are more likely to engage in criminal behavior as adults and experience increased rates of attempted suicide and other mental health disorders.³⁹

To address these particular issues, local groups established the Youth Violence Prevention Task Force as a way to build better relationships and improve trust among young people, adults, and law enforcement. Recently, several facilitated dialogs were held in each law enforcement jurisdiction so youth, adults, and police could engage in honest discourse about their challenges, opportunities, local experiences, and other issues that may prevent collaboration on community safety. As expected, some discussions were difficult, but they were successful in helping each group better understand the others.

The 2019 CAP report shows that the crime rate in Santa Cruz County has decreased from 36.9 per 1000 residents in 2012 to 31.2 per 1000 residents in 2018. Although this is encouraging, the rate is still slightly higher than California as a whole (28.5 per 1000 residents). However, the homicide rate for the County has dropped from 4.5 per 100,000 people in 2012 to 2.3 per 100,000 people in 2017. This is lower than the California rate of 5.2 per 100,000.

Regarding the Natural Environment, the CAP reports that water use per person has increased between 2015 and 2018. In addition, county residents have increased the amount of trash per person between 2011 and 2017. California likewise has increased in the same time period. It's apparent that residents need more education about conserving resources, especially in a state that has a reputation for environmentalism.

During the years between 2012 and 2018, county-wide transit ridership decreased from 5,465,542 annual riders to 5,048,512. Meanwhile, 69% of workers in 2018 drove alone to work, a dip of 1.1% from 2012. Again, this is an area for further investigation regarding the factors leading to these changes and what can be done to transform transportation habits into those that are more environmentally responsible.

Poor air quality is harmful to people and can cause a variety of environmental problems, such as effects on wildlife, ozone depletion, and global climate change.⁴⁰ Some groups of people are especially sensitive to poor air quality, including those with asthma, heart disease, and COPD (long-term lung disease).⁴¹ Outdoor air quality has improved since the 1990s, but many air quality problems persist. Ground-level ozone, the main part of smog, and particle pollution are two of the many threats to air quality and public health in the United States.⁴²

6.6 A Detailed Example: Improving the Lives of Children and Youth

Grown out of a response to CAP findings, the County's Youth Violence Prevention Task Force (YVPTF) was formed in late 2012 to assess and

³⁷Howell, J. C. (2007). Menacing or mimicking? Realities of youth gangs. *Juvenile and Family Court Journal*, 58(2), 39–50. Retrieved from: <http://www.nationalgangcenter.gov/Content/Documents/Menacing-or-Mimicking.pdf>

³⁸Juvenile Arrests Summary – Kidsdata.org. *Kidsdata.org*. Available at: <http://www.kidsdata.org/topic/30/juvenile-arrests/summary#jump=why-important>. Accessed November 23, 2015.

³⁹Prevent Juvenile Delinquency. *Policy for Results 2015*. Available at: <http://www.policyforresults.org/youth/prevent-juvenile-delinquency>. Accessed November 23, 2015.

⁴⁰Commonwealth of Massachusetts, Executive Office of Energy and Environmental Affairs, Department of Environmental Protection. Accessed September 2016 from <http://www.mass.gov/eea/docs/dep/air/qa/health-and-env-effects-air-pollutions.pdf>

⁴¹Centers for Disease Control and Prevention. Air Quality. <http://www.cdc.gov/air/>

⁴²Centers for Disease Control and Prevention. Air Quality. <http://www.cdc.gov/air/>

address the needs and assets of Santa Cruz County relative to youth violence (United Way of Santa Cruz County *n.d.*). The YVPTF utilized CAP data and leveraged the RBA format to develop its strategic plan, which included evidence-based strategies to help turn the curve on youth violence in the county. The strategic plan continues to ensure that both organizational partners and community members have a shared understanding of their roles in supporting the community's youth, both now and in the future. The long-term commitment of the YVPTF's members is also emphasized. Prior to establishing the YVPTF, Santa Cruz County had first gained notoriety for its use of RBA in successfully turning the curve on youth substance abuse. The initiative, Together for Youth (now Community Prevention Partners), implemented strategies that influenced data trends, bending them toward desired results (Friedman 2015).

Undeniably, change is ever a constant, and the CAP's efforts to innovate have hardly stood still as the years have advanced. In fall 2018, with continued leadership from United Way, the CAP unveiled a new product, the Children and Youth Well-being Spotlight (CYWB). This document has focused on the most salient indicators impacting the wellbeing of the community's young people. Remaining mindful of the importance of social connectedness, these measures are organized under four headings: economic wellbeing, education, health, and family and community. While the CAP took steps in past reporting years to more closely position its efforts beyond the community level, such as alignment with the Social Determinants of Health, in similar form, the CYWB made specific connections to the aspirations of the SDGs with its release.

Explicit integration of the SDGs into this and future efforts illustrate how Santa Cruz County continues to iteratively improve itself and its partnerships. Moreover, disparities were called out in the CYWB data. This shined a light on existing inequities within the county, with the intended goals of inciting interest, spurring engagement, and inspiring action. By focusing on those children and youth who were not at grade level or who did not earn their high school

diplomas, the report emphasized the necessity of creating goals that would change trajectories for more vulnerable populations.

The life course of the CAP project has supported all the conditions necessary to localize the SDGs, providing solid framework for the CYWB to build upon. Indeed, this framework allowed the leadership of the CYWB to quickly mobilize under shared purpose, developing both an ambitious report and a dynamic, web-based tool to help improve the lives of all young people in the county (Fig. 6.4).

Now Santa Cruz County is moving ahead with the next phase—a natural integration with the United Nations' SDGs, which help to achieve wellbeing for all people. Adopted by Member States of the United Nations in 2015, the 17 Sustainable Development Goals set forth an ambitious agenda outlining the path to wellbeing for all by 2030, importantly recognizing the interconnectedness of strategies necessary for accomplishing these goals (United Nations *n.d.*).

By connecting the work of the CYWB to the SDGs, the ways in which real and tangible results are realized locally can be connected back to global efforts of the UN's SDGs. Normalizing the SDGs through named inclusion in CAP products encourages familiarity with the goals themselves as well as with the greater motivation for their initial establishment—to build a better world for everyone by 2030.

6.7 Conclusion

This article demonstrates how the United Nations' Sustainable Development Goals can be leveraged to help communities around the world set workable and equitable goals to help improve quality of life for their residents. Santa Cruz County has been progressing for 25 years, thanks to its Community Assessment Project, which provides a clear overview of community quality of life, the successes in making positive changes, and the direction to improve less-than-ideal conditions. By incorporating the UN's SDGs into its existing Social Determinants of Health, the



Fig. 6.4 The 2018 Children and Youth Well-being Spotlight. [Graphic]. (Reprinted with permission)

County has now become integrated with a global movement toward health justice for everyone.

6.8 Generalizations

In general, it is most beneficial for communities to localize the Sustainable Development Goals by:

1. *Connecting to larger initiatives that focus on effective action, such as Social Determinants of Health (SDOH) and Organisation for Economic Co-operation and Development (OECD)*—When communities associate their goals with those of regional and global initiatives, it allows them to become part of a momentous collaboration targeting common issues that affect people everywhere. Each community interconnects to form a network stretching across the globe, solving humanity’s problems through cooperative involvement.
2. *Approaching the entire project from a paradigm of wellbeing, equity, and health justice*—The primary goal is for communities to develop conditions that support a positive quality of life for all residents. Nearly all else is secondary.
3. *Building on successful strategies*—When a community reflects on its successes, it is already moving in a positive direction. What strategies have been effective in the past to improve community health and wellbeing? What conditions helped to make those strategies successful? What lessons were learned from any missteps? How can those lessons be applied here? These kinds of questions help a community move quickly in a positive direction with minimal blunders.
4. *Using a community assessment based on resident data, combined with objective and/or secondary data*—The most reliable and beneficial data will come from the people themselves—their experiences, their sense of what is important for them, their perceptions of where essential processes have failed or succeeded, and so on. However, although it is valuable, individual perception is not always reality. Therefore, objective data also must be included to help determine whether personal perceptions reflect reality for the greater population.
5. *Maintaining a sense of urgency*—To delay is to lose valuable time that could be used for improving community wellbeing. Therefore, plan to act immediately or at least within a reasonable timeframe. It may be necessary to cull the activity list if it becomes a source of delay. Achieving a few goals in the near term is preferable to delaying action because of an inability to achieve a lengthy list of goals.

6.9 Recommendations

Communities wishing to leverage the UN's SDGs to help improve quality of life for their residents and for the global population are advised to follow a particular course of action. These recommendations may be followed "as is," or they may be adapted to specific needs within the community.

The first step is to establish the conditions necessary for community involvement. These conditions are detailed earlier in this paper: commitment to well-being for all; population measures of well-being; and ability to coordinate action. Details may be adapted to fit the needs of specific communities, but the process should remain essentially intact.

The next step is to align your work within the framework of the SDGs by selecting those that are most relevant to your situations or that are most manageable and attainable. For example, large municipalities may have more resources to implement a more complete list, while smaller towns may be limited by lesser funding and fewer committee participants. The goal is to develop a plan that fits a community's particular needs and resources. Highly visible and decisive results from these activities will help the community expand into other SDGs. Conversely, taking on too many goals at the onset will stall progress and discourage further participation. Not all SDGs need be implemented at once.

In Santa Cruz County, the United Way took on a leadership role for developing the CAP, with participation from many other local agencies and organizations—hospitals, educational institutions, social service agencies, private individuals, nonprofit organizations, and other entities that saw mutual benefit from this type of cooperation. As a group, they helped determine the types of data they would require to achieve the Social Determinants of Health and, later, the SDGs. Participating organizations pooled their resources, according to their abilities, to help fund the CAP. Because the project budget has been responsibly managed, the CAP has remained

sustainable throughout the years, becoming the longest-running project of its type.

Next, conducting statistically valid, professionally administered surveys will provide the necessary data for a snapshot of current quality-of-life conditions and—with each successive survey—a comparison with past conditions. These surveys should generate data that can be applied to a community's chosen SDGs, enabling a clear illustration of current status and a point from which to formulate improvement goals.

Note that it is important to engage professionals in creating the surveys to ensure that they are worded in a neutral fashion, so the questions do not compel the respondent to reply in a particular way. Professional survey organizations also will (or should) be involved with an institutional review board to ensure that respondents can feel secure in the knowledge that honest responses will not put them in jeopardy, legally or otherwise. It's recommended that professionals also conduct the surveys for the most valid results. However, if funds are limited, volunteers may perform this task—but only if they are *properly trained and supervised* in the fine points of survey taking.

Resulting data should be summed in a public report that is also available to the news media. This provides valuable information not only to citizens but also to agencies and organizations that are in a position to improve any negative outcomes and to further support positive outcomes.

And finally, communities should track progress toward meeting their chosen SDG goals. Again, those goals will be different for every community, as evidenced by the way the City of Santa Cruz has instituted its own Health in All Policies, which addresses issues specific to the local community.

This means it will be necessary to follow up with additional surveys at regular intervals. This may be annually or biennially, based on local resources. In any event, they should not be scheduled at lengthy intervals because new data are necessary to track progress and allow processes to be adjusted, if necessary.

By following the United Nations' SDGs, more communities, more nations, and ultimately the entire globe can enjoy true equity and health justice, along with the benefits of economic stability, quality education, improved health and health care, more livable communities, and a cleaner and more sustainable environment.

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