



First 5 San Joaquin

Final Report

April 30, 2019

INTRODUCTION AND SUMMARY: Describe your program, the services provided by your program, and describe your program participants (demographic information).

1) Asian Pacific Self-Development and Residential Association (APSARA)

APSARA has been working with Mercury Exposure Reduction Program since 2015. APSARA focuses on raising awareness and education on fish advisories. With more than 30 years serving San Joaquin County residents, APSARA has a vast network within the community that includes community-based organizations, government agencies, private companies, stores, and faith-based organizations. With this grant, APSARA outreached to Southeast Asian population in Stockton (Cambodian, Vietnamese, and Lao/Hmong), children ages 0 to 7 and women 17 to 45. APSARA reached 3,450 families in San Joaquin County within the 95204, 95205, 95207, 95509, 95210, 95212, and 95215 zip codes.

2) Child Abuse Prevention Council (CAPC)

CAPC provides comprehensive early childhood education, health, nutrition, and parent involvement services to low income children and their families. These services include: Parent Café, mothers between age 26 to 59 in all of San Joaquin County (Stockton, Thornton, Manteca, French Camp and Tracy); Home Visitation Initiative, mothers between ages 26 to 59 in Stockton (especially 95206) and Tracy; Early Education, serves teen parents through adults in all areas of San Joaquin County; and Family Services, teens through adults in San Joaquin County.

Early Education provides preschool and child care services to more than 700 families. Respite services are provided to more than 100 families annually. Family Services provides support, advocacy, parent coaching, and connection to resources to more than 1,500 families annually. Parent Café currently provides 20 parent support groups at local schools and shelters to parents/caregivers who are in need of additional resources, a support system, and increased parenting tools. This is done using a curriculum based on the Strengthening Families Framework: Six Protective Factors. The program reaches 750 participants annually with three full-time staff facilitating these groups.

The Home Visitation Initiative provides weekly home visits three times a month to families who have a child aged 0 to 3. There are four full-time staff who each carry a caseload of 20 families (80 total). The Parents As Teachers Curriculum is used during these visits to increase parents' knowledge and tools with their child's development in key areas: early literacy, motor, cognitive, and language. Monthly parent workshops are also

conducted for families participating in the program to meet one another and learn about different community resources.

3) El Concilio

El Concilio is a non-profit community-based agency that has built relationships throughout the San Joaquin Central Valley. The foundation of the organization was a \$10,000 grant from the Catholic Diocese to aid the migrant workers with immigration and social welfare issues. El Concilio continues that tradition and strengthens that foundation with programs geared toward serving low income populations, and individuals who have social, mental or physical barriers to obtaining services. El Concilio offers counseling, referrals, and education in the belief that persons empowered to help themselves will become significant assets to the community at large. Services are offered to infants, youth, adults, families and seniors—any person seeking assistance.

4) Family Resource & Referral Center (FRRC)

FRRC provides direct services to low-income and high-need families throughout San Joaquin County, serving every community in the county. Outreach is conducted to families with children from 0 to 13 years old as well as child care providers, both licensed and family, friends and neighbor network. FRRC also serves youths up to 18 years old at the Teen Impact Center. A primary focus is quality care for children and technical assistance to those working with children and families. FRRC is a critical link to quality childcare services for all parents, childcare providers, and children in San Joaquin County and the surrounding areas. FRRC provides child care referrals to all parents and administers child care subsidies, nutritional resources and offers workshops on various topics such as child safety, nutrition, literacy and school readiness, health and safety, including First Aid, CPR, food preparation, and many more. FRRC also has two home visitation programs, a California Work Opportunity and Responsibility to Kids case management program, an oral health program, and a 211 call center offering referrals to health and human services programs. FRRC serves over 20,000 unduplicated clients per year.

5) Family Resource Network (FRN)

FRN provides services to families who are raising children and youth with special needs and disabilities, including learning, physical, developmental and special health care needs. The age range FRN serves are those families with children from birth to approximately 22 years old. Services are provided in San Joaquin, Stanislaus, Amador, Calaveras and Tuolumne Counties. The largest number of families reside in San Joaquin County.

Families are assisted through navigation of systems of care including medical, education and social services. FRN also works with other public and private agencies to bring the “parent” voice to issues that involve children with special needs

and disabilities. FRN currently serves 8,722 individual clients. The county makeup of this number is as follows: San Joaquin County-5,377, Stanislaus County-3,016, Amador County-108, Calaveras County-110 and Tuolumne County-108. The majority of FRN's caseload is for the Early Start Program, which assists families whose children are between birth and 3 years old, and need early intervention due to developmental or other special needs.

6) Lao Family

Lao Family Community Empowerment of Stockton is a non-profit organization with a mission focused on assisting and empowering families and individuals through advocacy, social support and economic development to become self-efficient and productive citizens.

About 90 families per year are served under the First 5 Home Visitation program. Through this program resources and support are provided to families with children under age 5, and most of the families are English language learners. Besides providing quality home visits to these families, there are parent meetings once or more per month to promote healthy eating and school readiness. Parent meetings are held at different locations (school, community centers, parks, etc.).

Lao Family also serves about 20 participants (18 years and older) per year under the Hmong Helping Hands intervention to reduce mental health stigma and disparities among other population groups. This six-month program helps participants with their health and mental wellbeing through 24 sessions of a variety of activities.

Another program that Lao Family offers is the Mental Health Program: Southeast Asian Recovery Services that is funded by San Joaquin County Behavioral Health Services. This program focuses on adults needing direct case management services to mental health. Home visits and support groups are provided to consumers.

7) United Cerebral Palsy (UCP)

UCP has 12 different programs serving people with developmental disabilities, or at risk of disability, and their families. Individuals are served across the life span, and currently are between the ages of birth and 80 years. Outreach is to programs within San Joaquin County, some being based in Stockton, Manteca and Tracy, while other programs travel between towns within San Joaquin County. UCP provides the following services:

- Supported employment, helping individuals successfully achieve employment. This program serves 50-60 clients/year and has seven staff.
- Activity centers for adults and seniors, assisting the adult participants in gaining basic skills in the areas of self-help, personal needs, and functional skills which

are critical to individual independence. There are three activity centers that serve approximately 190 clients/year. These programs have 64 staff members.

- Programs designed to meet the needs of each individual participant based on his or her life goals and passions. Clients participate in a variety of skill building activities within the program and throughout the community, including workability and social skills development. These two programs have 23 staff serving about 95 clients/year.
- Respite services for families, providing support and if needed, a break from their role as caregiver. Staff of 20 serve 93 clients.
- Supported living services, designed to empower individuals and to encourage them to maximize and maintain the skills and supports necessary to live as independently as possible within the least restrictive environment. Twenty staff serve 45 clients.
- Early intervention developmental services, designed to provide a family centered, multidisciplinary approach to help each child develop the skills they need to maximize their learning and live a life without limits. About twenty staff serve 450 clients/year.

IMPLEMENTATION BY PROGRAM: Mechanism of outreach (how MERP materials and messages are being incorporated into your program). How many people received MERP materials, which materials, and any feedback or evaluation outcomes. Describe any challenges with incorporating MERP materials and messages into your program.

1) APSARA

The APSARA outreach team (five Community Health Connectors, two Mental Health Peer Partners, and three SJ TEETH Care Coordinators) conducted door to door outreach to share the DMERP eating fish advisories and refer them to APSARA MERP workshops. Additionally, ten youth from four different high schools in Stockton will reach out to their peers in schools and in the community. By this time, about 5,500 advisories (55 percent Central South Delta Advisory, 20 percent Sacramento River and Northern Delta, and 25 percent San Joaquin River) have been distributed in Stockton. The outcome was great. In five community presentations, about 75 percent of participants are willing to continue eating fish and want to learn more about mercury. Many of them (47 percent) are still not clear about the age group on the advisories, confused with locations (Central, South, or North), and still need help with eating portion sizes. To solve this, the outreach team was trained and encouraged to spend more time on explaining the location in advisory by using highway numbers and street names instead, using pictures for eating portions and showing differences in coloring to explain about levels of mercury in each fish species. They also showed participants how the advisory separates the eating recommendation portions for each age group (children 0 to 17 and women 17 to 45). DMERP Fish Eating Advisories are distributed in four languages (Cambodian, Vietnamese, Hmong and Lao). Six posters are displayed at the Wat Dhammararam Temple, Wat Dhammaraingsey Temple,

Angkor Pharmacy, Calvary Church, Cambodian United Methodist Church and Lutheran Church.

2) CAPC

Parent Café facilitators gave group presentations on DMERP using the trifolds (brochures). Home Visitation staff gave clients post cards, book marks, and trifolds (brochures) during home visits and parent workshops. Information was provided to all enrolled families as well as any family who came into the central office to request information about CAPC programs. The information is also on the agency web site.

CAPC staff attend outreach events several times throughout the month. The information is included in their outreach boxes. Estimated reach: 120 through Parent Cafés; 84 in Home Visitation; 800 at outreach events; and 2,000 through the Early Education and Family Services Department. It is not possible to determine how many received the information through the website or information located in the central office.

As mentioned above, trifolds(brochures) were given in Parent Café and community outreach boxes. Book marks, brochures, and post cards were given in Home Visitation, Early Education, and Family Services. Posters were posted in the central building. Languages were English and Spanish.

3) El Concilio

Through the many programs provided, El Concilio is able to reach many people and families in the community. Outreach is conducted at health and community events, schools, and resource fairs and staff also work directly with families in the community.

El Concilio created a survey to ask the community questions on the knowledge of mercury in fish. Copies of *Eat Fish Safely* placemats were shown and given. Through the Home Visitation program, educators were able to implement the DMERP information and participate in the survey. Through the new program FamilyWORKS, while the staff are doing outreach to enroll families, they are able to do outreach as well on DMERP. Outreach is also conducted through the Covered California program and Comprando Rico y Sano

Program, which reach both individuals and groups. El Concilio also offers DUI classes, where clients were asked to take the survey as well. Through these outreach events a total of 1,016 people in the community were reached.

There were not any real major challenges other than people who just were not interested in doing the survey (as they don't eat fish).

4) FRRC

DMERP materials were distributed by the Community Resource Specialists, Parent Educators, Caseworkers, front desk staff, and outreach staff during outreach events and home visits. Materials such as flyers, brochures, and infographics were also emailed to clients, given out at the front desk, available in the waiting rooms, provided during appointments, and inserted in FRRC kiosks throughout the community. Flyers were e- blasted to email recipients, and shared on the agency and 211 Facebook pages. Over 10,000 clients were reached. Both English and Spanish materials were provided.

5) FRN

DMERP materials and messaging were incorporated into FRN programs in the following manner: direct contact with families, social media and newsletter/listserv. FRN staff make approximately 250-300 telephone calls monthly to current and new clients. During these phone calls, staff inquire about family needs, activities, and other information that will assist in serving the family. Questions have been added to inquire about the consumption of fish by the family, and whether the fish was caught locally. For those families who indicated they do consume fish from local waterways, DMERP information was added to the packet of information that is direct mailed to the family. The proper amount of safe consumption for certain age groups is also discussed. Because FRN's primary population age is 0 to 3 years old, the provided recommendations have been emphasized.

At any events FRN has participated since the DMERP project was rolled out in November, FRN has shared the information that was provided by the Delta Conservancy, including the placemats, postcards, flyers/infographics, bookmarks and stickers. Information was presented in English and Spanish. Events included an annual Holiday Open House, Mothers' Retreat, Autism Forum, and other meetings, trainings and workshops provided to clients. FRN also has the information displayed in their office that can be taken by those who are in the office for other reasons or appointments. There was one post to social media with the infographic photos. Along with the families, FRN works closely with professionals from other agencies who also serve families. Information was shared with community partners, including Valley Mountain Regional Center and Stockton Unified (Walton Special Center), who were able to share the information with their families. Approximately 700 to 1,000 families received DMERP information, plus those families/individuals who received the

information from community partners. FRN will publish a newsletter by April 30th that will include DMERP information. Approximately 6,500 copies will be distributed within FRN's five county service area.

6) Lao Family

With the home visitation, Lao Family is able to implement DMERP materials and messaging with its lesson plans. One lesson plan in the curriculum is about protein. With this lesson the different kinds of protein to consume and portion size of protein is discussed. Home visitation clients received brochures. If they read a language other than English, brochures in their native language brochure were provided to them, if available.

There is usually no challenge with incorporating DMERP materials and messages into the home visitation program because it focuses on healthy eating. Information was shared and materials distributed to clients attending parent meetings at different school site and locations. There were some locations that allowed placement of some materials. Materials distributed were brochures, infographic, stickers, bookmarks, and placemats. Languages of brochures distributed are English, Spanish, Hmong, and Khmer. A total of 99 families received DMERP materials from home visitation and parent meetings.

Information and materials were also shared and distributed to participants in the California Reducing Disparities Project program. Some took extra information home to share with families and friends. Materials distributed were brochures in Hmong. A total of 10 families received DMERP information materials.

DMERP materials were passed out during program outreach events. Outreach includes events, resource fairs, and door to door. Outreaches were mostly door to door and are conducted three to five times a week. Materials distributed were brochures, stickers, infographic and bookmarks. Languages of brochures distributed were English, Spanish, Khmer, and Hmong. A total of 205 families received DMERP materials.

Placemat signs are posted in the waiting area of the Lao Family office. Clients that walk in are able to see the posting and read the information. Some clients ask about the information and some take brochures. Placemat signs are also handed out to families that were interested in posting it on their refrigerators. Placemats signs distributed were in English and Hmong. The Infographic was also posted on Lao Family's Facebook page to share the information.

7) UCP

Each UCP program posted information in its respective programs/buildings. Most used the placemats and posted them where staff, clients and visitors could see them. Some also placed brochures where they were handy for people to take.

Administrative staff /program managers received an in-service training on the materials so each could present the materials in appropriate ways to the clients in their programs. Staff in each program was trained by their manager, and then they provided training to clients. Some of the activities included:

- Training slides were shared with staff.
- Staff shared the information in classes and as part of the lesson plans within the programs, stressing the importance of the topic.
- The topic was covered as part of the program's Community Health Information lesson, providing the information once a week as their topic for the month.
- Fishing and shopping trips were planned and used the training materials to help with shopping and preparing fish in the in-house cooking class.
- Placemats were provided as part of the cooking program as they talked about the subject.
- Provided various information/handouts on home visits during the home visitation programs
- Some made placemats uncolored so they could color them in.
- Pre and Post surveys were completed by staff trained on the materials. Pre surveys indicated 55 percent of the people did not know the information that would be shared by DMERP. Post surveys indicated over 95 percent knew the information.

Six Facebook posts were made, five in English and one in Vietnamese. These were sent to 4,474 people, with Facebook indicating they reached 1,215 people. There were 238 shares, with 93 shares in Vietnamese. The information was sent out to 979 individuals three times through Constant Contact (total of 2,937 emails) with a success rate of 1,986.

Excluding social media, approximately 1,080 clients and/or their family received information in at least one form, on at least one occasion. Several programs went over materials and/or presented materials at multiple times throughout the month. An unknown number saw (and continue to see) the material posted at each program.

UCP used bookmarks, stickers, placemats, brochures, PowerPoint presentation, one page handouts and information taken from the Delta Mercury Exposure Reduction Program website. English and Spanish materials were used. Vietnamese information was posted on the UCP Facebook page.

SUMMARY AND RECOMMENDATIONS: Summarize implementation results (Is the community benefiting from this education, are people understanding the fish consumption advisory information and how to make safer choices when eating fish from the Delta). Provide recommendations for program materials.

1) APSARA

Based on evaluation, more than 70 percent of community presentation participants said they will continue to eat fish from the Delta but they will pay attention to the level of mercury based on the advisory. Additionally, the youth groups are interested in learning about mercury and other poisonings in the environment. They are very good at sharing and have been helping a lot in outreach and share the advisory within their peers. Via APSARA's Southeast Asian Youth Group, more than 1,100 fish eating advisories have been distributed to young women (14 to 45 years old) in this community, one of the most vulnerable populations. Since October 2018, APSARA conducted 12 community presentations in Stockton with 275 participants. Through outreach, more than 300 caregivers (parents, grandparents, and family members) have been invited to the APSARA DMERP community presentations. Due to the complexity of advisories, APSARA would like to recommend the DMERP team (representatives from State and local agency) to consider developing the Eating Fish Advisory that focuses on Southeast Asian women age 14 to 45 years old.

2) CAPC

Program participants found the information very useful since they consume a lot of fish. Lots of families did not know that some fish are more harmful to eat than others. A big eye opener was being mindful of where they fish from now on. Program participants also said they would pass this information on to their families and friends. There were no challenges to disseminating the information.

3) El Concilio

A recommendation that was given is that the people would like more information on the effects of mercury exposure, such as a more detailed brochure. El Concilio would like to provide additional training for outreach staff as they were asked questions they were not 100 percent sure on. Material should be made friendlier to read. Some families are English language learners and did not understand the whole information presented on the placemat or brochure.

The community did benefit from this information, especially the ones that eat fish or that fish in the Delta. They now know how to make safer choices.

4) FRRRC

FRRRC believes that clients benefited from this educational campaign because of the information they received from the materials. When information was shared with the clients, many were not aware of the mercury levels in the Delta. The materials are

nicely created and colorful so that the community can have visual effects when the information is explained to them. Educating the community and the most vulnerable on fish consumption advisory is important because so many of these families are dependent on eating what they catch from the Delta waters. Providing them with informed choices is important and allows them to understand that too much mercury exposure is harmful for them. One recommendation for program materials would be to post more signage of the fish advisory throughout the community and especially near the Delta. Another suggestion would be to have the materials available at doctors' offices and clinics. This will allow for more materials to circulate in the community. One challenge staff encounter is getting the clients to make this a priority and the importance of this health warning. Many people ignore the advisories and nonetheless consume what they catch. Continued outreach efforts and increased education will get more people to understand the consumption advisory.

5) FRN

Because the DMERP information was outside FRN's typical scope of work, it was sometimes awkward for staff to incorporate the information into questions during conversations with families. Staff had to work on a script that staff could share that made it easier to incorporate during the conversations. Those families that could see the relevance of the information (they fish in local waterways) were very interested when the information was shared with them, and they seemed to understand that there were certain populations that should not consume or should have limited consumption of fish from local waterways. The placemats were popular with clients. They liked the bright colors, and the information was easy to read. One client who had taken some placemats at an in-office visit commented when she was in the office for her next visit that visitors to her home had asked about the information on the placemats when they saw it.

Overall, FRN feels that the community did benefit from the education regarding safe fish consumption from fish caught in local waterways. It is always helpful to a community to increase the knowledge of those things that will keep the community healthy and safe. Even those who do not participate in fishing at local waterways were engaged in the information, and wanted to share the information with those they knew who did fish and consume fish from these waterways, and with those they serve in the community. By providing the information, it started conversations, which in itself, is helpful for the community as a whole. Choices were changed through the presentation of the materials, and increased choices are empowering for targeted populations. FRN appreciates the opportunity to participate in the DMERP Project.

6) Lao Family

One recommendation for future brochures is to have the map of the river/Delta. This can help the families to have a better idea of where the specific areas are. Also, it was always a good idea to give out brochures with the infographic since the brochures have pictures of the different fishes. This was extremely helpful

to participants who learn better with visuals. There were no challenges with incorporating DMERP messages into the program since we provide health education to families. Some families were sensitive to the messages because fish is a large part of their diet, especially families who fish frequently.

Families are very thankful that the informational brochures are in their native language, especially for those that do not speak or read English. Many families had no knowledge of mercury contamination in fishes along the Delta and were surprised by the information we provided. Though they were surprised, families took the information seriously. Many fishermen have seen the postings out at fishing sites, but admit to not taking it seriously until the information was shared through conversations. Sometimes staff were asked about certain types of fish, but families were directed to the Safe To Eat Portal website. Also, some families do not believe that consuming fish with high levels of mercury could affect their health because it is a normal part of their diet. Overall, the community benefited greatly from this education and understood the message of safe fish consumption. Many families pointed out some of the fish they consume regularly on the brochures and noted that they need to limit their consumption. Families are making safer choices when eating fish from the Delta and San Joaquin River with the DMERP information they received.

7) UCP

UCP staff and clients felt that the training taught them a lot. For some clients the information had to be repeated but that was easy enough to fit into UCP programs. Most were unaware it was unsafe to eat the fish from the Delta. They understood the fish consumption information.

Recommendations for materials: include some coloring pages; placemats could be double sided, one side English and one side Spanish – or one side with Sacramento and North Delta on one side and Central and South Delta on the other (or San Joaquin River).

There were no real challenges. Materials were available in many different formats which allowed options to use appropriate ones for each different program. The community benefited from this education and people were able to make better choices.