

The City of Cambridge

Community Health Improvement Plan



A Healthy City **for All**

April 2021

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INTRODUCTION

Dear Cambridge Community,

We are pleased to present the 2021 City of Cambridge Community Health Improvement Plan (CHIP), produced by the Cambridge Public Health Department.

The CHIP lays the foundation for addressing some of the most challenging public health issues facing Cambridge. Solving complex social and health problems, such as homelessness or obesity, does not happen overnight. It requires strategic planning and the broad will of the community.

Local governmental and community leaders came together to create the CHIP. More than 40 stakeholders reviewed the top concerns identified in the 2020 City of Cambridge Community Health Assessment and proposed the following health priority areas for the city:

- Community and Social Resilience
- Healthy Eating and Active Living
- Mental Health

Health equity and ending racism make up the foundation of each priority area.

In the months that followed this selection process, more than 60 City of Cambridge staff, subject matter experts, and community stakeholders participated in several virtual planning sessions to develop actionable goals, objectives, and strategies for making tangible progress in these areas over the next five years.

This has been a remarkable journey, and we are grateful to everyone who participated in the CHIP process. Together we will make Cambridge a healthier place to live, learn, work, and play.

Sincerely,



Derrick L. Neal, MPA
Chief Public Health Officer
Cambridge Public Health Department
City of Cambridge

BACKGROUND

Where and how we live, learn, work, and play affects our health. Understanding how these factors influence health is critical for developing the best strategies to address them. To accomplish these goals, the Cambridge Public Health Department led a comprehensive community health planning effort to improve the health of Cambridge residents. This effort includes two major phases:

1. A community health assessment (CHA) to identify the health-related needs and strengths of Cambridge
2. A community health improvement plan (CHIP) to determine major health priorities, overarching goals, and specific objectives and strategies that can be implemented in a coordinated way across Cambridge

In addition to shaping the public health-related services, programs, and policies throughout the city, the CHA and CHIP are also key requirements for the health department in maintaining its status as a nationally accredited public health department through the Public Health Accreditation Board (PHAB). This distinction demonstrates the Cambridge Public Health Department's commitment to excellence and quality.

The 2021 CHIP was developed between November 2019 and April 2021, using key findings from the 2020 CHA. The CHA included qualitative data from focus groups, key informant interviews, and community forums that were conducted locally as well as quantitative data from local, state, and national indicators to inform discussions and determine health priority areas. The CHA is available at <https://www.cambridgepublichealth.org/publications>.

Staff from the Cambridge Public Health Department and partners from across the city reviewed the findings from the CHA and used this information to determine the CHIP's priority areas. To develop a shared vision, plan for improving community health, and help sustain implementation efforts, CHIP workgroups were established to address each priority area over the course of the plan's five year lifecycle. Membership of the workgroups includes representatives from the health department and other city agencies; non-profit organizations and coalitions; the education, healthcare, and community services sectors; and community representatives who live in Cambridge.

These stakeholders used common criteria and a multi-voting process to identify the following priority health issues to be addressed in the CHIP:

- **Priority Area 1: Community and Social Resilience**

Goal: Foster a resilient and equitable community for all that can prepare, respond, recover, and thrive.

- **Priority Area 2: Healthy Eating and Active Living**

Goal: Ensure Cambridge is a city where all people are able to access and enjoy safe, healthy, and affordable foods and physically active lives that celebrate our diverse cultures and needs.

- **Priority Area 3: Mental Health**

Goal: Ensure that all Cambridge residents have equitable access to knowledge, education, and services to protect, support, and advance mental wellness.

Health equity and ending racism were identified as cross-cutting themes. These issues have been identified as key focal points for integration across all the priority areas in the plan and are incorporated into each priority area.

To promote accountability in this area, each workgroup has at least one Health Equity Champion whose role is to advocate for health and racial equity throughout the development and implementation of their designated priority area, with a particular focus on the following:

- Oppression
- Discrimination
- Social determinants of health
- Advocacy and policy activities

- Adverse Childhood Experiences and Adverse Community Environments (ACEs)
- Historical racism/trauma

This plan will be implemented from April 1, 2021, to June 30, 2025.

WHAT IS A COMMUNITY HEALTH IMPROVEMENT PLAN?

A Community Health Improvement Plan, or CHIP, is an action-oriented strategic plan that outlines the priority health issues for a defined community and how these issues will be addressed, including specific measurable objectives and strategies, to ultimately improve the health of the community.

CHIPs are created through community-wide, collaborative planning processes that engage partners and organizations to develop, support, and implement the plan. A CHIP is intended to serve as a vision for the health of the community and a framework for organizations to use in leveraging resources, engaging partners, and identifying their own priorities and strategies for community health improvement.

Building upon the key findings and themes identified in the Community Health Assessment (CHA), the CHIP:

- Identifies priority issues for action to improve community health
- Outlines an implementation and improvement plan with performance measures for evaluation
- Guides future community decision-making related to community health improvement

A CHIP is designed to be a broad, strategic framework for community health, and should be modified and adjusted as conditions, resources, and external environmental factors change. It is developed and written in a way that engages multiple perspectives so that all community groups and sectors can unite to improve the health and quality of life for all people who live, work, learn, and play in Cambridge.

In addition to guiding future services, programs, and policies, the CHIP fulfills the required prerequisites for the Cambridge Public Health Department to be eligible for reaccreditation through the Public Health Accreditation Board, which indicates that the agency is meeting national standards for public health system performance.

STRATEGIC ALIGNMENT

The CHIP was designed to complement and build upon other guiding documents, plans, initiatives, and coalitions already in place to improve the health of the city. Rather than conflicting with or duplicating the recommendations and actions of existing frameworks and coalitions, the participants of the CHIP planning process identified potential partners and resources wherever possible.

Envision Cambridge

Envision Cambridge is the City of Cambridge's blueprint through 2030 for the future of the city. It includes six priority areas, most of which overlap with the work laid out in this CHIP.

Envision Cambridge	Community Health Improvement Plan
Climate and Environment	Advocate for green spaces; modernize emergency management infrastructure; strengthen the city's response to climate change
Community Wellbeing	Improve equity for all regardless of race, gender, age, LGBTQ+ status, disability status, income level, or other characteristics; eradicate homelessness; support mental and behavioral health; provide options for affordable food
Economy	Invest in social and economic inclusion; encourage active street life
Housing	Expand affordable housing; promote resources for housing options; address homelessness
Mobility	Expand access to transportation choices; advocate for safer, more convenient transportation options; support street safety
Urban Form	Promote quality public open spaces

Health Department Priorities

In addition to the community-centric CHIP, the Cambridge Public Health Department is guided by an internal Strategic Plan and a Workforce Development Plan. Although these plans primarily serve the needs of health department employees, they ultimately support the goals of the CHIP by creating a public health workforce that is adequately staffed and trained to respond to the health needs of the community. One priority area of the current Strategic Plan is data and evaluation, which will improve the way the department monitors, collects, analyzes, and reacts to data. Additionally, the Workforce Development Plan includes strategies for recruiting, retaining, and training staff.

METHODOLOGY

COMMUNITY HEALTH ASSESSMENT

The foundation of the CHIP is the Community Health Assessment (CHA), a comprehensive report of the health status, needs, and perceptions of the city. The most recent CHA, finalized in 2020, included:

- A community survey completed by more than 1,100 Cambridge residents that explored their perceptions of health, access to services, key health concerns, and areas for improvement
- A review of existing data sources, such as demographics, vital statistics, public health surveillance, and self-reported health behaviors
- A series of focus groups with populations that are historically underrepresented in survey responses, including homeless youth, American-born Black residents, the LGBTQ+ community, individuals with disabilities, and immigrants

The full results of the CHA can be found at <https://www.cambridgepublichealth.org/publications>.

PRIORITY AREA SELECTION

To select the CHIP's priority areas, in November of 2019 the health department convened a diverse group of more than 60 Cambridge stakeholders, representing various City departments and community organizations, to review the results of the CHA and participate in a facilitated discussion with consultants from Health Resources in Action to come to a consensus on what the most pressing health needs of the community are.

The following themes emerged most frequently from the CHA and were discussed as potential priority areas:

- Access to health care (*cultural competence, dental care, insurance constraints*)
- Cancer
- Chronic disease (*age-related conditions, diabetes, heart disease, high blood pressure*)
- Infectious disease (*sexually transmitted infections*)
- Environmental health (*exposure to harmful materials, healthy homes, impacts of climate change*)
- Mental health (*depression, anxiety, stress, social determinants*)
- Substance use (*marijuana, opioid use, vaping*)
- Violence and safety (*pedestrian safety, bicycle safety, safety in public spaces*)

The group of stakeholders used the following selection criteria to narrow this list down to the final priority areas:

- **Relevance**
Burden (magnitude and severity, economic cost, urgency) of the problem; community concern; focus on equity and accessibility
- **Appropriateness**
Ethical and moral issues; human rights issues; legal considerations; political and social acceptability; public attitudes and values
- **Impact**
Effectiveness; coverage; builds on/enhances current work; moves the needle; demonstrates measurable outcomes; proven strategies
- **Feasibility**
Community capacity; technical capacity; economic capacity; political capacity/will; socio-cultural considerations; ethical considerations

In addition, health disparities and the social determinants of health were prioritized when making the final selections. A health disparity is a preventable difference in health status, risk factors, or health outcomes among subgroups of the population. Health disparities often stem from social, economic, or environmental disadvantages, which are collectively referred to as the social determinants of health. Social determinants of health are the conditions in the environments in which people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks.¹ The social determinants of health disproportionately impact vulnerable or disadvantaged populations.



Following this process, the CHIP's final priority areas are:

- Community and Social Resilience
- Healthy Eating and Active Living
- Mental Health

PLAN DEVELOPMENT

Once the final priority areas were selected, three workgroups were formed to address each health topic. Each workgroup has two **co-chairs**: one staff person at the health department and one staff person at a partner organization, and the workgroups are composed of on-the-ground individuals at various City department and community organizations. At least one member of each workgroup serves as a designated **equity champion**, and **community representatives** are recruited whenever possible.

Due to the COVID-19 pandemic, the workgroups convened virtually in November and December of 2020 to develop draft goals, objectives, strategies, and outcome indicators. Following these planning sessions, subject matter experts from the health department, external partnerships, and consultants from Health Resources in Action reviewed the draft and edited it for clarity, consistency, and evidence base. This feedback has been incorporated into this final report.

¹<https://health.gov/healthypeople/objectives-and-data/social-determinants-health>

Preplanning Session Nov 2 1.5 hours	Session 1 Nov 12 1.5 hours	Session 2 Nov 16 2.5 hours	Session 3 Dec 3 2 hours	Homework Week of Dec 7	Session 4 Dec 17 2.5 hours
CHIP Planning Overview <ul style="list-style-type: none"> • Zoom/Online Tools Overview • Assessment Finding • CHIP Priorities • CHIP Structure • Planning Process Overview • Time Commitment • Next Steps 	Priority 1 Goals	Priority 1 Objectives	Priority 1 Draft Strategies	Strategies Homework	Priority 1 Finalize Strategies
	Priority 2 Goals	Priority 2 Objectives	Priority 2 Draft Strategies		Priority 2 Finalize Strategies
	Priority 3 Goals	Priority 3 Objectives	Priority 3 Draft Strategies		Priority 3 Finalize Strategies
Participant Criteria: <ul style="list-style-type: none"> • Able to participate via Zoom (audio AND visual) • Available to participate in ALL sessions 			Time Commitment Per participant: 10 hours of sessions + homework <i>(Assumes participation in only one (1) Priority Area)</i>		

IMPLEMENTATION, MONITORING, AND EVALUATION

The three priority area workgroups convene each spring to prioritize a subset of strategies for the upcoming year and develop an annual action plan, which contains the specific steps, responsible leads, and resources needed for success.

Workgroups meet regularly throughout the year to review the progress of the action plan and troubleshoot any challenges that arise throughout implementation.

Once per quarter, the workgroup co-chairs provide a report to health department leadership on their successes from the past quarter, priorities in the upcoming quarter, and any challenges that require attention and support.

The annual action planning summits provide an additional opportunity for the workgroups to reassess the big-picture goals and objectives in the CHIP to adjust for new data or environmental or political changes.

To support the work of the CHIP, the health department applied for and was awarded a grant from the Massachusetts Community Health and Healthy Aging Funds. This funding supports the health department's partnership with the Metropolitan Area Planning Council to improve community engagement and evaluation efforts and provide technical support to the workgroups.

COMMUNITY HEALTH IMPROVEMENT PLAN

PRIORITY AREA 1: COMMUNITY AND SOCIAL RESILIENCE

Goal: Foster a resilient and equitable community for all that can prepare, respond, recover, and thrive.

Social resilience is about social entities and their abilities to tolerate, absorb, cope with, and adjust to environmental and social threats of various kinds.² Community resilience is the sustained ability of communities to withstand, adapt to, and recover from adversity. Health—meaning physical, behavioral, social, and environmental health and wellbeing—is a big part of overall resilience.³

The health status of a community is determined by a variety of economic, social, and health-related characteristics. Understanding these characteristics is an integral part of improving a community's health and assuring a high quality of life for residents. It is also important to distinguish the strengths and assets in a community to ensure that there are sufficient services and resources to address health concerns and leverage a healthier community for all residents.

Participants acknowledged that Cambridge currently offers a multitude of community resources for housing, economic opportunities, family assistance, and more. However, when describing their overall vision for the city, participants also expressed a desire for more resources to support the changing needs of residents.

When asked to rate how much of a concern environmental health conditions were for themselves and their families, survey respondents indicated that they had the highest level of concern for the health impacts of climate change (27.9%). When describing their levels of emergency preparedness, one in three (34.9%) respondents had a three-day supply of essential items set aside in case of an emergency. In terms of community connectedness during an emergency, roughly half of respondents (51.3%) knew that a neighbor or community member would check on them during an emergency.

Objective 1.1: Establish and support opportunities for individual and community connectedness and engagement in Cambridge

- **Strategy 1.1.1:** Establish baselines for connectiveness and engagement for individuals, the community, and community organizations.
- **Strategy 1.1.2:** Continue and build upon existing initiatives that promote connectiveness and engagement.
- **Strategy 1.1.3:** Work with existing partner organizations to expand initiatives that promote connectiveness and engagement between organizations and individuals in the North Cambridge community.
- **Strategy 1.1.4:** Partner with community-based leaders and organizations to engage community members in connectiveness activities in a way that builds trust, credibility, and legitimacy.
- **Strategy 1.1.5:** Develop best practices and identify alternative means for engaging community members in public processes to get diverse input from the community.
- **Strategy 1.1.6:** Develop a community currency program that would allow us to encourage volunteers to participate in and build social capital.

Objective 1.2: Build the capacity and resilience of community organizations to provide support to vulnerable and key populations before, during, and after emergency events

- **Strategy 1.2.1:** Establish Neighborhood Resilience Hubs in the more vulnerable neighborhoods of Cambridge to address emergency preparedness and build household resilience.
- **Strategy 1.2.2:** Assess the state of emergency response plans across housing organizations to identify best practices and gaps.
- **Strategy 1.2.3:** Reestablish and promote awareness of emergency response plans for public housing and other housing organizations.

¹<http://urbanresiliencehub.org/wp-content/uploads/2018/11/Social-Resilience-Guide-SMALL-Spreads-1.pdf>

²<https://www.phe.gov/Preparedness/planning/abc/Pages/community-resilience.aspx>

- **Strategy 1.2.4:** Establish and promote awareness of emergency response plans for private properties whose landlords receive affordable housing assistance.

Objective 1.3: Reduce the number of vulnerable households that are subject to heat stress in their homes

- **Strategy 1.3.1:** Establish specific indicators and a baseline number of vulnerable households.
- **Strategy 1.3.2:** Educate community leadership on the culture shift needed regarding the way we look at heat stress and climate change.
- **Strategy 1.3.3:** Conduct public education and awareness activities to bring about a culture shift regarding the way we look at heat stress and climate change and to share ways to reduce heat stress in homes.
- **Strategy 1.3.4:** Advocate for funding to cover cooling costs.
- **Strategy 1.3.5:** Obtain funding to distribute air conditioning units to vulnerable households.
- **Strategy 1.3.6:** Gather data on housing quality across Cambridge to determine the extent of the heat stress problem in Cambridge.
- **Strategy 1.3.7:** Advocate for improvements to new and existing housing and shelters to promote passive thermal resilience.
- **Strategy 1.3.8:** Explore multiple ways to send out heat alerts to community members.

Objective 1.4: Establish an integrated, centralized emergency preparedness system for Cambridge

- **Strategy 1.4.1:** Develop a case for reestablishing an Emergency Response Office or Department and advocate for its formation.
- **Strategy 1.4.2:** Explore opportunities to establish a structured, coordinated response within the city for emergency preparedness.

Objective 1.5: Advocate for and expand the level of permanent supportive housing services and units available in Cambridge

- **Strategy 1.5.1:** Establish a baseline of the level of supportive services available.
- **Strategy 1.5.2:** Expand and continue funding to maintain an adequate number of community health workers, case managers, and nurses attached to people in affordable housing.
- **Strategy 1.5.3:** Develop case management standards when possible based on funding sources and integrate those standards into contracts with agencies providing supportive services.
- **Strategy 1.5.4:** Develop a program for transition support as individuals move from shelters into housing modeled after the Critical Time Intervention model.
- **Strategy 1.5.5:** Seek funding from diverse sources.
- **Strategy 1.5.6:** Work with partners at MassHealth, Cambridge Health Alliance, and other accountable care organizations to understand and secure funding sources available through Medicaid expansion waivers to support and maintain tenancies.

PRIORITY AREA 2: HEALTHY EATING AND ACTIVE LIVING

Goal: Ensure Cambridge is a city where all people are able to access and enjoy safe, healthy, and affordable foods and physically active lives that celebrate our diverse cultures and needs.

Many of the leading causes of disease or death, such as heart disease, diabetes, and cancer, are linked to lifestyle factors (e.g., diet, physical activity, smoking). Furthermore, obesity/metabolic disease is a major and changeable contributor to chronic health conditions. The CHA pointed to challenges to healthy eating and active living that can contribute to poor health for many residents.

In the focus group conducted with American-born Black residents, participants noted that some of the difficulties of maintaining a healthy diet included concerns about the environment and how “the foods [they] get are not local; they are stored and transported from a distance.” Another participant noted that there was a need “to educate [themselves] and make a change,” particularly around food products that “contribute to disease like cancer.” When discussing healthy eating and active living, focus group participants envisioned a Cambridge with an increased number of places for residents to maintain community gardens and increased access to foods that reflect their dietary restrictions. In other focus groups in the last year, immigrant residents discussed the need for culturally relevant foods in food pantries, and low income seniors requested improved access to medically appropriate foods.

Food access is also a concern among households in Cambridge, with about one in 20 survey respondents reporting some form of food insecurity in the past year. In 2018, roughly one in 10 (10.4%) Cambridge high school students and one in 20 (5.3%) Cambridge middle school students reported experiencing hunger due to lack of money to buy food. From 2011 to 2018, less than 43% of Cambridge high school students and less than 35% of Cambridge middle school students reported engaging in physical activity for at least 60 minutes on five or more days of the week.

Objective 2.1: Increase the ability of Cambridge to effectively serve the Cambridge population that is food insecure

- **Strategy 2.1.1:** Evaluate and assess the current food pantry system to identify improvements that would lead to increased capacity, access, or organization, particularly for those who identify as racial or ethnic minorities.
- **Strategy 2.1.2:** Work with farmers markets to support and expand access via SNAP match, Healthy Incentives Program, coupons for seniors, and Special Supplemental Nutrition Program for Women, Infants, and Children.
- **Strategy 2.1.3:** Increase the number of food retail stores in Cambridge that accept SNAP.
- **Strategy 2.1.4:** Coordinate with partners and conduct outreach and education to increase awareness of SNAP, WIC, SNAP Match, SNAP Gap, and food resources in Cambridge, particularly directed towards those who identify as racial or ethnic minorities.

Objective 2.2: Reduce the occurrence of severe and fatal crashes on Cambridge-owned streets

- **Strategy 2.2.1:** Define and identify data indicators and sources to establish consistent and reliable metrics to track severe crashes in Cambridge.
- **Strategy 2.2.2:** Continue Vision Zero efforts to inform the re-planning and re-building of Cambridge streets.
- **Strategy 2.2.3:** Examine impacts of existing and potential strategies to reduce traffic-related fatalities and serious injuries with an equity lens.
- **Strategy 2.2.4:** Ensure outreach and communication efforts are reaching all neighborhoods and that messaging is relevant to all residents to ensure racial equity, be relevant for people driving, and for people dependent on active transportation.

Objective 2.3: Increase the use of sustainable and active transportation in Cambridge

- **Strategy 2.3.1:** Promote the utilization of the Bluebikes (shared mobility) system through the expansion of the physical system and through expansion of income-eligible memberships.

- **Strategy 2.3.2:** Conduct outreach and communication to residents in low-income populations and communities of color about Bluebikes memberships.
- **Strategy 2.3.3:** Complete the development of the Cambridge Bike and Pedestrian Plans.
- **Strategy 2.3.4:** Implement the Cambridge Transit Strategic Plan.
- **Strategy 2.3.5:** Work with youth and older adults through programming.
- **Strategy 2.3.6:** Work with the MBTA to preserve as much service as possible in Cambridge.
- **Strategy 2.3.7:** Promote racial justice and equity in residents' access to and use of sustainable and active transportation.

Objective 2.4: Determine the physical activity needs of current and future Cambridge residents and implement key recommendations

- **Strategy 2.4.1:** Conduct a physical activity opportunity assessment within Cambridge to identify how residents currently engage in physical activity; their barriers and facilitators to physical activity; and their needs, interests, desires, and cultural considerations for public parks and open spaces in Cambridge.
- **Strategy 2.4.2:** Support current programs and promote pilot programs through communications, educational support, and related programming such as Cambridge Public Health Department mini-grants.
- **Strategy 2.4.3:** Make and implement recommendations for parks, playgrounds, sports fields, and open spaces to support opportunities for physical activity in all neighborhoods for people of all ages and abilities.

Objective 2.5: Increase access to healthy and culturally desirable foods and beverages in Cambridge

- **Strategy 2.5.1:** Complete the Community Food Assessment and support and monitor implementation of recommendations.
- **Strategy 2.5.2:** Increase access to and promotion of Cambridge tap water as a healthy, affordable, and safe beverage.
- **Strategy 2.5.3:** Strengthen the procurement and use of healthy, local, and culturally inclusive foods in all Cambridge Public Schools menus.
- **Strategy 2.5.4:** Determine next steps for adoption of healthy food guidelines in Early Education Childcare and Out-of-School-Time programs.
- **Strategy 2.5.5:** Increase access to healthy food for seniors, particularly low-income populations.
- **Strategy 2.5.6:** Build capacity for healthy eating in the community through mini-grants.
- **Strategy 2.5.7:** Create support for healthy eating through educational communications, presentations, and outreach campaigns.
- **Strategy 2.5.8:** Promote racial justice and equity through promoting accessibility to healthy food for all and including cultural considerations in training, policies, events, and menus.

Objective 2.6: Expand the number of urban agriculture policy, educational, and support efforts undertaken by the City of Cambridge

- **Strategy 2.6.1:** Develop and adopt two policies (farming ordinance ordained and soil safety regulation promulgated) supporting urban agriculture in the City of Cambridge.
- **Strategy 2.6.2:** Establish methods for tracking current policy, educational, and support efforts.

- **Strategy 2.6.3:** When the farming ordinance and soil safety regulation are adopted, plan further policies for adoption as experience indicates.
- **Strategy 2.6.4:** Engage in communications, education, outreach, and program support for residents, community organizations, and partnerships including youth, schools, seniors, and those that are already active in urban agriculture in order to expand partnerships and engagement.

PRIORITY AREA 3: MENTAL HEALTH

Goal: Ensure that all Cambridge residents have equitable access to knowledge, education, and services to protect, support, and advance mental wellness.

Mental health was a significant concern among Cambridge residents with extensive data supporting the need for services. Rates of hospitalizations and emergency department visits due to mental health conditions have remained consistently higher in Cambridge compared to Massachusetts. Self-reported data suggest that mental health conditions, such as depression, anxiety, and stress, are experienced by adults and youth alike. In particular, Cambridge high school students experienced an increase in anxiety symptoms, depressive symptoms, and self-injury behaviors from 2012 to 2018. Social determinants of health, particularly housing and economic vulnerabilities, were viewed as key factors in poor mental health outcomes among residents.

Objective 3.1: Increase and diversify the mental health workforce to reflect the needs of the population of the City of Cambridge

- **Strategy 3.1.1:** Identify agencies to collaborate with in the recruitment of the mental health workforce.
- **Strategy 3.1.2:** Promote the diversification of the mental health workforce and recruitment practices to schools that have mental health training programs.
- **Strategy 3.1.3:** Collaborate with Cambridge Rindge and Latin School on their career development programs to incorporate careers in mental health.
- **Strategy 3.1.4:** Partner with Cambridge Health Alliance to support efforts to diversify their mental health workforce to reflect the needs of the Cambridge population culturally, racially, and linguistically.

Objective 3.2: Increase visibility about mental health across the lifespan

- **Strategy 3.2.1:** Promote services that offer online, virtual support for mental health and wellness.
- **Strategy 3.2.2:** Gather information from currently active warmlines to begin development for a Cambridge-based initiative.
- **Strategy 3.2.3:** Promote the development of a Cambridge-based warmline.

Objective 3.3: Increase provider and caregiver knowledge and comfort around addressing mental health issues affecting the older population

- **Strategy 3.3.1:** Offer training opportunities to providers about older adult mental health needs.
- **Strategy 3.3.2:** Educate caregivers and home visiting organizations on identifying needs and making referrals.
- **Strategy 3.3.3:** Develop and distribute fact sheets on adult mental health needs signs and symptoms, including domestic violence, substance use, isolation, and other issues.
- **Strategy 3.3.4:** Convene a bi-annual round table discussion of older adult service providers to discuss emerging and ongoing mental health issues, resources, and supports.

Objective 3.4: Increase programming specific to youth and older adults around mental wellness

- **Strategy 3.4.1:** Collaborate with the Council on Aging and Somerville-Cambridge Elder Services on their needs assessment of older adults to identify gaps in services and needs to develop programming.
- **Strategy 3.4.2:** Collaborate with Cambridge Public Schools to assess gaps in needs and services to develop programming for youth.
- **Strategy 3.4.3:** Partner with Cambridge Public Schools to support educational programming around mental wellness promotion.
- **Strategy 3.4.4:** Adapt and implement the Massachusetts Opioid Abuse Prevention Collaborative social marketing campaign about stress and coping skills for Cambridge youth.
- **Strategy 3.4.5:** Collaborate with the Cambridge Public Library to support programming for youth and older adults around mental wellness.

Objective 3.5: Implement partnerships to address disparities in mental health outcomes in Cambridge

- **Strategy 3.5.1:** Collaborate with the LGBTQ+ Commission.
- **Strategy 3.5.2:** Collaborate with Cambridge Health Alliance to address mental health disparities among people of color.
- **Strategy 3.5.3:** Collaborate with Community Health Network Area 17 on initiatives to address mental health disparities for our priority populations.

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CITY AND COMMUNITY PARTNERS

Tina Alu, *Cambridge Economic Opportunity Committee*
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Karim L. Razzaz, *Community Representative*
Ilham Elazri, *Community Representative*
Clara Fraden, *Cambridge Housing Authority*
Brian Gover, *Cambridge Fire Department*
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Maggie Lanca, *Cambridge Health Alliance*
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Jen Letourneau, *Cambridge Conservation Commission*
Qin Li, *Community Representative*
Kam Maali, *Cambridge Housing Authority*
Marie Mathieu, *Co-Chair, Cambridge Public Library*

Liz Mengers, *Cambridge Department of Human Service Programs*
Nadia Meritus, *Community Representative*
Amy Meyers, *Mass Farmers Markets*
Khari Milner, *Equity Champion, Cambridge Agenda for Children*
Alison Morneault, *Cambridge Housing Authority*
Susan Pacheco, *Cambridge Council on Aging*
Melissa Peters, *Cambridge Community Development Department*
James Pierre, *Community Representative*
Susan Richards, *Equity Champion, Cambridge Agenda for Children*
Kate Riley, *Cambridge Department of Public Works*
Ty Ruwe, *Cambridge Youth Council*
Rachid Sbay, *Pro EMS*
Rachel Tanenhaus, *Equity Champion, Cambridge Commission for Persons with Disabilities*
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