

1. There are many visions for a Healthy Santa Barbara.

When asked what a “healthy community” looks like, the answers were warm, rich and aspirational—“a place where everyone can thrive,” “a county where everyone has access to good health,” “a community where everyone can joyfully live,” “a place where everyone has opportunity.” Yet at the same time, most were at a loss for how to achieve their vision.

2. Impressive individual effort, but lacking coordinated impact.

It was often said that Santa Barbara has an excellent infrastructure (including a robust social sector, well-resourced governments, giving individuals and a strong health care system) and should be well positioned to create a healthier community. In fact, several said, “if we can’t do it here, it can’t be done anywhere.” What became apparent is that while there is an army of caring individuals and numerous organizations that are doing inspiring and effective work, the infrastructure itself is not functioning at a high level. This is probably the result of a very crowded landscape, issues surrounding patient privacy, cumbersome rules, time focused on organizational sustainability vs. community impact. Organizations typically work independent of each other, sometimes competing for resources, but more often just unable to connect their work to that of others. There was an acknowledged need and explicit desire to find ways to work better together. To focus on how “their piece” fits better into the puzzle that is someone’s life and to create better “handoffs” from one organization to the next.

People already engaged on these issues want to get out in front of the problem, rather than dealing with the challenging aftermaths. Police raise their hands asking how can I help someone BEFORE I have to arrest them. Clergy open their doors “anytime” to have someone come and talk about “anything” that is impacting the health of their congregations. Like those working at Cottage Health, people are demoralized by the current band-aid system that they are frustrated to be a part of. The bottom line is that there seems to be significant enthusiasm and willingness to engage earlier on these issues and recognition that more effective collaboration is needed to bring about lasting changes.

3. To see the whole picture of a person’s life, we need to connect all the dots.

Whether talking to leaders of non-profits, government, education, clergy or people in the community, there was consistency in believing that many of the resources that people need exist within the community. However, too many are not able to access them. In other words, beyond developing new services, a short-term opportunity exists to connect people to available programs and resources. Examples include; a young girl who presents with major dental needs at an after-school program, and their staff is unsure of where to send her; families who are going to three different places to address their food needs instead of going straight to the food bank for their monthly supply; or the Family Resource Center needing to call five different places every time they need to find an available bed for a client. Critically this isn’t just a matter of education or distributing a list of available resources, but instead helping people navigate complex systems, following up on needed care and carefully vetting resources. The latter is important as bad experiences can compromise the reliability of the referral source.

4. Affordable and healthy living starts with housing.

In listening to the myriad of issues that need to be addressed to achieve a healthier Santa Barbara, the question of affordability came up repeatedly. It related to food costs, wages and most often, housing and its far-reaching impact. Housing, however, is not a monolithic issue, but one which impacts virtually every population living in Santa Barbara. This includes the sizable homeless population, lack of beds available to the mentally ill, multi-families living in single occupancy homes, limited facilities for growing elderly populations and the lack of affordable housing for people in general, including nurses, teachers, police, EMT, and firefighters who fill other crucial service needs for the population. Beyond the mere availability are related issues such as the lack of coordinated services in certain housing facilities and the added mental and physical strain of working multiple jobs or traveling far distances to work due to housing issues. One person even noted that the lack of housing results in high turnover in the social sector that results in gaps in care, follow-up and trust for those seeking help.

5. Gaps in mental health services are everywhere.

Another issue that came up consistently across groups was the lack of available mental health services. Again this was multi-faceted and impacted a wide variety of populations in diverse ways, including children, students, the elderly, homeless, immigrants and caregivers. The lack of clinicians often results in waits of up to six months, and the lack of beds means that people are often shipped down to Pasadena and other places (often being stranded there without transportation back to Santa Barbara). The lack of mental health care often puts in jeopardy other crucial benefits such as housing, which leads to another major issue that surfaced. Of note, Cottage's perceived role in creating this shortage came up several times.

6. What is unseen and unsaid speaks volumes.

How you see the problem determines how you create solutions. Yet what happens when a community doesn't openly see the same problems? At the same time, those not working on the frontlines seem oblivious to the underlying issues in Santa Barbara. One person described it as a "Post Card" fantasy not reflected by the real life experiences of most who live here. While some felt this was just the nature of segregated neighborhoods and communities, others felt that this was a deliberate goal of businesses and the affluent, who don't want tourism or their idyllic life disrupted by the realities of others. It remains unclear how intentional the creation of an invisible Santa Barbara has been, but seeing someone unlike you does not happen without effort. One well-meaning participant even suggested that some people just have the "gift of seeing other people's problems" that most people in Santa Barbara don't possess.

There were also several troubling comments involving race, ethnicity and gender. It was surprising how it consistently took each group a long while to mention specifically the issues facing Latinos and/or immigrants. In many cases, it needed prompting and when it was brought up, it was clear that it was not a topic people were comfortable discussing. Beyond this discomfort, others talked about explicit racism and gave very clear examples on how they were treated unjustly and felt unwelcome in their own community. This obviously heightens levels of distrust and willingness to seek help. Cottage Health was also called out for a lack of diversity in their hospitals and leadership. Lack of available resources for LGBTQ, including transgender care, was also raised.

7. Supporting family dynamic can be a win/win.

Many of the issues raised involved the interconnectedness of parents and their children and their attempts to make the other healthy and happy. Parents of young children lament their ability to create a healthy environment for their children (e.g., expensive food, inability to spend more time with them). Teenagers talk about trying to get their parents to take care of themselves better (e.g., mental health needs, eating healthy), and concern about the upcoming tsunami of caregiver needs with aging parents. There is such love and support between a parent and child, yet each is struggling to find ways to take care of the other. When a mother says that "she hopes to get a new job with better hours and wages" so both she and her daughter can get healthy together, it says it all. Tapping into this connection would seem to be a significant opportunity to address a multitude of health needs impacting families.

8. Finding or creating safe and trusted spaces is critical.

There appears to be significant segregation and limited social capital throughout Santa Barbara. Multiple reports cited the limited places where community members feel comfortable and safe enough to get care or information that could improve their circumstances and health. The places that did come up included certain non-profit organizations and definitely schools (although scheduling sometimes makes it difficult to access information or connect). There seems to be an opportunity for Cottage Health to either support or create more places and sources of trust in the community where people can turn for valuable health resources.

9. There is an opportunity for Cottage Health to fill the breach.

There's a desire to solve problems collectively as a community, but there is a lack of a convener, connector and leader in this effort. There are "enormous human resources ready to do something," but there is also a lack of collective vision, leadership, and coordination of services to implement solutions. No one organization will solve these complex social issues, and many cited the lack of a coordinated funding approach as a barrier to achieving real change. There seems to be an opening for Cottage Health to help initiate, support or even spearhead the process for getting there. This was either implicitly or explicitly communicated among non-profit leaders, business leaders and some in government.