

SCORP Advisory Council  
Redding Focus Group  
October 4, 2016

Health Sector Partnership and Study

- Several years ago there was an emphasis on the Central Valley corridor, and it ended up not really coming to fruition, and that was disappointing. Is this going to be incorporating those ideas? Redding is still a part of the Central Valley, yes, it is the Northern end, but there is still a need within these inland areas.
- There needs to be a push to develop resources in smaller and rural communities, especially where there are not a lot of resources at the city and county level.
- Some small communities do not have the same issues going on as other places in California. Some resources do not work across the board. Northern rural communities can be unique.
- Some of the State's actions are negatively affecting parks and recreation services. The level of release of prisoners, people with mental health problems, as well as the high cost of housing has caused an impact. There is a huge homeless issue; it is the number one issue within Redding. The impact that transient people have in regards to safety is a huge reason why people are not using parks and trails. It is hard to advocate for more parks and money when the current resources cannot be maintained.
- Enforcement cannot happen all of the time; and everyone just moves around. Entitlement is also an issue. It is unfortunate, but again, it is a very large public safety concern.
- There are a lot of open spaces here, including forest land, and it provides space for the transient population to go.
- There is a large concern about the mental health issue, but there is not enough funding for that. And it makes it hard to help people.
- Agencies are now partnering with local non-profits that have expertise in social services that can provide help that others cannot.
- The more services that are provided at the park for the homeless, the more they tend to congregate there. Some events that have been held for years are no longer holding their events there.
- Parks are not only for those that own a home. They are also a resource for the transient community. The larger issue is the bad element. There are always people who can contribute to the health of the community.
- The parks that have the least problems are the ones that are less accessible and people drive to.
- Passive parks seem to have the higher impacts.
- The homeless issues impact tourism dollars as well.
- Sometimes being helpful ends with becoming enablers. They do not help as much as putting real resources together to make a real impact. The area is really down in enforcement as well. Until there are consequences nothing will change.
- Substance abuse and mental health issues are not the same as being sociopathic. But there is a cycle, and there isn't a solution. This issue stops us from being able to move forward with other projects.
- Even the local hospital has problems with this population.

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- Local innovation accounts do not normally include parks and recreation. The health department wants to fix the parks. There is such a competition for funding to help people; but there can be opportunities that are funded by these dollars. If there are consequences to actions, then the consequence is that you have to maintain the parks. And now there is ownership over that park. We need to integrate these programs with parks.
- People are taking it upon themselves to open private parks for the community because it isn't safe. Need to be at the table for the recidivism opportunities.
- This is a really acute issue that most of California is dealing with.
- There needs to be a cultural shift to get people to the outdoors.
- We (OGALS) are placing a lot of emphasis on activity outside, and we seem to be missing the benefit of just being outdoors.
- Parks and recreation needs to be looked at as an economic benefit. People move to communities due to parks. County Supervisors should look at this.
- There is not an easy way to quantify the benefits of being outside, but there is a way to study it.
- In European countries, such as Norway, being outside is just a part of their life. It isn't that way here.
- It is hard to have to constantly say that this is "why we have value". Maybe we do not bring money in, but the quality of life impact is very important.
- Revenue generation is a push from officials.
- Healthy Shasta has hospitals, Simpson University, YMCA, county health, non-profits etc... which became a movement to have these leaders together to talk about issues. This created a good synergy of resources. Healthy Shasta brand is a very popular brand within the community. It helped to show that this healthy theme can provide good will at the political level and may help to not put recreation up for cuts. People were also more invested in their communities. It created relationships which are important and has had a positive impact on how to promote health.
- How do you bring the people to the parks? Why doesn't that family want to come to the parks, outside of safety? There doesn't seem to be a connection to the outside, why is that?
- Districts are all about funding now, so it has changed the focus. It is now about trying to survive. Four full time staff are going to be cut, and that impacts the services that can be provided. Funding is the number one issue.
- The business of doing recreation is getting way more complicated and expensive than it used to be.
- Position as a partner in the youth arena as a part of prevention in a good setting and also through providing recreation programs.
- Active scholarship program. The community loves recreation programs and sports, but it is hard to keep fees reasonable.
- Have to increase program fees, in order to survive.
- How do you find money to provide programming to adults?
- Things are getting more siloed versus integrated.
- A joint use where the cities and the counties and the schools get together to maintain and provide programs.

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- Rather than complementing a resource, we are losing a resource, because now there are barriers that you didn't have before.
- Would it be possible to look at other health facilities and see if parks are considered a part of those facilities as a place to get health benefits?
- We market to niches, which makes parks relevant in a different way. This is a new phenomenon that is occurring for rural recreation.
- The baby boomers are a different generation, and they have money, and we do not want to lose that.
- Our younger generation doesn't value outside as much, they haven't had these experiences, and we should be encouraging more unstructured outdoor recreation for this group. You do not necessarily have to be on a team, you can just go out when you want to and be outside. There are now meet up groups that are self-starters that just go out and do things in parks.
- There are people who want to do outside activities, but they have never done it before and do not know how to go about it. Colleges used to be able to fulfill that need, but there isn't really that opportunity any more.
- There used to be a lot of classes that happened all summer long but with budget cuts they just are not available anymore.

#### Public Survey

- Family resource centers – first five, good place to survey to reach people outside of parks
- Survey methodology and analyzing results, how to measure. Need a scientific approach for a real representation of community opinions. Who will provide the survey to avoid skewed results
- Participation questions are asked most: what type of services/facilities do you use most, use least; what are your priorities; opinions about parks
- Land lines are not as effective because of unknown number (caller id)
- Mail in surveys are more effective for responses, and use geo-coding
- How can OGALS reach the diverse population we are trying to compile information from
- UCLA public health survey may be a resource for data gathering and may include overlap of info we are looking for. Also, seen as legitimate resource
- Other partnerships for cost effectiveness for gathering data and reaching populations
- California can take the lead in the nation for understanding needs and reaching resources with partnerships with academia, non-profits, state, local and regional level and information can overlay with local level to tell the story of the community
- Ensure parks and recreation is the priority, or seen as part of the holistic solution to community issues
- Utilizing health providers for partnerships as resources and parks and recreation as a prescription
- Getting the insurance industry to recognize parks and recreation as therapy or solution to health issues
- 15% is silver shoes – Medicare provides recreation/exercise coverage

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- Strong dynamic leaders in the industries that can advocate for parks and recreation
- Health care, parks and recreation and community health are all inter-related from business perspective as a strong advocacy arm
- Parks have fallen back to the nice to have and not need to have swing of the pendulum
- Survey question responses are “I don’t do that” and we may want to address barriers, what prevents people from participating
- Ask how close a park is to the respondent – distance from a park can be indicative of participation
- Ask lifestyle questions, is being outside
- Helicopter parenting is a huge issue in preventing outside recreation
- Crime is actually down, but perception is that the world is more dangerous because of 24 hour media cycles
- Unstructured outdoor play awareness is needed, the importance of playing
- What do you do to decompress, what are people doing to address what’s lacking
- Is accessibility an issue for persons participating in outdoor recreation, park deserts
- How address indoor versus outdoor activities and the increase in indoor game play
- Public versus private recreation (e.g., more people drink at home rather than bars): Ask how people recreate, are more people recreating at home
- What types of recreation are people now doing that are not traditionally seen as recreation, like home brewing
- How is asking people what they do to recreate helpful, should we ask what could parks and recreation provide to get people to the park or facilities
- We need to identify negative and positive recreation and see where as a state or how to step in
- How to recreate? Define what is recreation, it shouldn’t have a purpose, free play
- Disconnect between what we are trying to accomplish
- Tie parks and recreation to health to prevent parks and recreation from being lost as a priority
- Priority is to get people outside, healthier, and parks as an essential service for overall community success
- Reach out to social aspect of recreation and the positive impact and benefits not just through a defined program
- Do people want to change from their current habits, do they want more outside recreation opportunities – do they want their screen time?
- After initial push back of less screen time, it is determined that people want that positive outdoor experience but it’s a barrier to overcome due to the lack of the actual initial experience
- Do people want to increase their current level of outdoor recreation
  - Is it time and accessibility to facilities or is it people want to just go home
- Sedentary caused health problems, and the cost where we can
- How can we equate parks and recreation benefits as a private gym and seasonal access – and recognize the health benefits of existing programs
- Incorporate parks into health sector and have it recognized as a health benefit

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- Is it a political issue? Some counties/cities will not include certain facilities due to private sector influence
- Can the state offer subsidies to communities that offer or participate in recreation programs
- Fee based programs causing issues based on perceptions of taxes paid to support parks and recreation (infrastructure), survey questions that can address role and willingness to pay for parks and recreation (facilities, land, programs, services)
- 87% response rate based on incentive, partnering with Raley's
- Political season may be wrong time to survey people because of over-polling
- To go big, consider partnering with private sector and campaign strong
- Section off survey to allow people the option to keep going further and have community specific questions and local incentives for completing the survey
- How to select the survey locations, random address selections – need to use various media platforms for reaching people
- Public health sector to partner with and funding streams to support parks
- SNAP-Ed as a partner for education and outreach, but need a bigger impact
- Health in All policy as an avenue to start recognizing parks as a health provider and outdoors as a prescription to overall health (mental, social, physical)

#### Local Needs Assessment and Last Thoughts

- Communities may need the information for themselves, but may not really need to know what anyone else needs.
- There is a thought of we cannot even take care of what we have, so we shouldn't build anything new. When you talk about deferred maintenance then people do not support new space. Would most likely underreport due to not wanting people to know that side of it.
- Have communities report the needs of what is going on in their parks. Use GIS, to map where they are going and incorporate the public survey as a part of that.
- We could all say that there is plenty of deferred maintenance out there. It would be helpful if there were grant programs to improve and rehabilitate parks instead of having to build new.
- Having to provide matching funds in small communities is very hard. When match is required, then a lot of times those grants are just out the window.
- Movement towards big grants, such as ATP, instead of little programs. This creates a lot of work to fill out that paperwork, but it takes a lot of the outdoor piece out of the grant opportunities.
- Simpson University can be a resource for education working towards understanding play, recreation, outdoors, etc...