Laura: Welcome to Communicating for Health Equity: A Conversation with San Mateo County Health and Youth Leadership Institute. My name is Laura Burr, and I will be running this Dialogue4Health web forum with help from my colleague Kathy Piazza. We thank our funder, the California Endowment, and our partner for today’s event, Berkeley Media Studies Group (BMSG).

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And now it is my great pleasure to introduce Katherine Schaff, the moderator for this event. In her position as health equity coordinator at BMSG, Katherine helps build the organizational and communications capacity of local health departments, government agencies, and community-based organizations working towards racial and health equity. Prior to joining BMSG, she spent 11 years at the Alameda County Public Health Department working towards racial, social, and health equity through policy change, community partnerships, and building institutional and staff capacity within the Health Department and the County. Welcome to Dialogue4Health, Katherine.

Katherine: Hi, everyone. We are really excited to be here today. I have had an opportunity to learn about some of the great work happening in San Mateo, and it’s also featured in a case study for the California Endowment’s Health Equity Awards. San Mateo was one of the three awardees in 2017. So we’ll be really excited to learn more from our presenters today about how they are partnering from a health department with an organization that also really works to organize youth and work on systems change. We know that to address the root causes of health equity, we have got to really address the environments that surround us, and San Mateo has done some really innovative work. For us at Berkeley Media Studies Group, we have been around for about 25 years. We work really to lift up advocates and public health practitioners and help them get their issues out there and communicate effectively, and we do that through training and technical assistance. We also do research on what's in the views, who is speaking, whose voices are missing and how we can improve that,
and then we also do education with journalists, so we have a lot of resources online. We'll be doing a little live tweeting during this on Twitter, and we would love to connect to you more.

So, now I want to just turn it over to our panelists. Each of them will share briefly, and then we'll go into a lot of just informal Q&A to hear more about their great work, and our first panelist is Shireen Malekafzali, and Shireen is the senior manager for policy, planning and equity at the San Mateo County Health, and she manages the Health Policy and Planning Program, Get Healthy San Mateo County, and the Children's Collaboration for Children's Success. She brings over 20 years of experience, advancing health equity through nonprofit, government, and philanthropic sectors, and prior to being at San Mateo, she was at national PolicyLink. She has a passion for a just democracy, eating Persian food, and playing with her two small kids. So, welcome, Shireen, we are so excited to hear from you.

>> Shireen: Hello, everyone. Thank you for having me. Thank you, Kathy. I forgot that I had written about my kids and my love of Persian food, so it made me chuckle in my bio.

I am Shireen Malekafzali, as Kathy mentioned, and I am working at San Mateo County Health, which is a county just south of San Francisco, just north of Santa Clara, so we are really on the edge and some of Silicon Valley bleeds into where we are, just to give you a sense, as a national call, where we land.

We also have a county with about 22 different jurisdictions, so we work a lot closely with our cities, and we are also very healthy overall, even though we have quite a number of health inequities.

So, this, what you're looking at right now on your screen, is actually a vision of healthy equitable community that we did as a collective through a number of workshops with our community residents, where they identified the kinds of things they want to see in healthy, equitable communities, and that's actually the vision that you're seeing right now.

Before I get into the kind of -- the specifics of that vision, I wanted to share where we fit into the health -- the County Health all together, because many of you may be from health-serving organizations, and as you all know or many of us relate our health to be focused on treatment and ongoing support, San Mateo County Health includes a hospital, nine different clinics, so definitely much of our -- most of our resources, a lot of our energy is to make sure that people get the treatment that they need when they need it.

We also focus on preventive services at health care services screening. We have a little bit of education work that we do, for example, through our state SNAP work, SNAP education, where we really do focus on individual behavior change. Now, where our team, Health Policy and Planning, fits in, is at the place and policy level, and it's the most upstream program that we have here in County Health, and it focuses on ensuring environments enable opportunities for health to be available to everyone. So we are a small but mighty team carrying a big upstream agenda. We -- when I came on about 2014, we were about to close our last strategic plan, working -- a collaborative strategic plan that focused mostly on healthy eating and active living, which was really wonderful for an organization to have, but as we started to think more about what it meant and what the research was showing, that healthy communities -- what it takes to build healthy communities, we realized that we needed to start with a vision, a broader vision that had included the community in that development, so we held over five workshops. We engaged people where they were at, at churches. We worked with our community organizing partner to outreach to their communities with our youth and develop the Ten-Element Vision for Healthy Equitable Communities, and then also went back and asked
what are the elements that are the most important over the next five years in healthy equitable communities, and we have four elements identified: Stable and affordable housing, complete neighborhoods, high quality education, and a strong local economy.

We have also updated our vision to be focused on -- much more sharply focused on equity and a vision of equitable opportunities, and reaching -- people reaching their full potential, regardless of gender, race, income, geography, and our mission also shifted to be clearly focused on policy change to create equitable opportunities for people to live long and healthy lives, and the notion is that we would then therefore be able to prevent disease from happening.

Our collaborative, called Get Healthy San Mateo County, is -- collaborates with community-based organizations, schools, cities, hospitals, and leaders in the community to advance the policy change that prevents disease, and the framework that we have that holds this mission, vision, and collaborative up is around advancing health equity, first, doing that in collaboration and partnership with those that know their communities best, and also working on place based prevention, recognizing that not all places are created equal. In San Mateo County, it's a large county, very diverse. If you're in Daly City, which borders San Francisco, we have a very different population than you do in East Palo Alto, which is on the southeast side of the county, versus the farm worker population on the southwest side of our county, so we need to know our places in order to be able to prevent disease from happening. And the way that we work is we focus intentional health equity strategies. We know that in public health, the notion is that we want to move overall the normal curve, as we call it in the public health world, which is holding the most people in the very center, moving every -- the whole curve over to the right, so you get more people being healthier, and what we notice, though, is that when you do what public health is supposed to do and move the -- this curve over, what you often miss is the fact that the same people are on the smaller -- on the lower end or the unhealthy side of the curve, so, unless you focus on the arrow that moves people along the curve, the individual people along the curve, then the same people, they may look the same, they may be people of color, they may be low income, lower education in specific geographies, do not actually -- while they have a health gain, the health inequities and the disparities in their health outcome still remain, so we need intentional health equity strategies in order to be able to move everyone fairly along that curve, if we don't want health inequities to persist.

The way that we work with our partners, we focus on policy change in order to get scale, planning in the same way, because we focus on place, is a lot of the visions of how places and cities or neighborhoods develop and shift have to do with engaging in urban planning processes. We have -- we intentionally provide a pot of funding for our community partners who are -- we feel are leading a lot of the social determinants and upstream work, and we want to respect that work as nonprofits and not just ask that they volunteer their time and effort. We do a lot of research to make sure that we are adding information to the field about how health relates. We do capacity building and leadership development in our work. Communication is an important aspect of our work, because we are trying to intentionally grow who sees themselves as being engaged in healthful activities and building health, and partnerships, as I said, are a critical aspect of our work. And so what does our -- what do our partnerships really look like? And, you know, one of the ways that we partner together is to co-develop projects, where we sit with our community partners, it may also be a city, and really think through what is the best way for us to advance our joint or aligned interests, and then we develop a project around it.
Secondly, we actually provide funding directly to our community-based organizations by putting out request for proposals that relate to the community-identified priorities I mentioned earlier, with a focus on health, equity, and serving impacted populations, and ask for people to share what they are doing or what they think they could be doing in order to advance those goals, and we learned a lot from that process and developed strong partnerships.

We also lead or co-lead collective efforts together, and then we might participate as technical advisors, which we often do, whether it's to a city around what are the health implications or what are the -- what might the data say.

And thinking about the communications aspect that Kathy was -- you know, is really helping us think through, one of the main reasons, as I think about why communications has been so important to us, is that over the last five years, we have needed to change the definition of health. Health isn't just about treatment and services. It's not even just about the food that you eat at the dinner table and whether you're able to get to the gym or not. We really wanted to bring a holistic definition of health that related to the vision of healthy equitable communities that were identified by our residents and leaders, and that meant engaging and broadening health partnerships and who saw themselves as health leaders, and what that meant is that we had to communicate our information beyond the typical health voices and health field and find ways to message our work and bring value to our other partners that are working on housing or economic development or those in our education arena, for example, or transportation.

And we also felt it was important to expand our communication to reach decision-makers, as well as expand who decision-makers are. So, we really reach out -- we track and advertise open boards and commission seats across the county. We find ways to share that information as broadly as possible with people who don't typically think of themselves as decision-makers and try to work with them to apply for those roles. We, to the degree that we can, we share where decisions are being made and how people can access those opportunities to share their voice, their vision, their aspiration and needs in those decision-making opportunities.

We also support leadership development programs. We support advocacy leadership development, amongst other things, that really are intentionally trying to build through a curriculum expand leadership into these decision-making roles. And finally, not finally, really, the focus of this is youth. We really have a focus on youth because they are the future. We want to make sure that they have a pipeline of leadership opportunities that they can get themselves set up for, especially those youth that don't typically see themselves or often don't see images of themselves represented on councils, in leadership roles, making sure that they see those images and see themselves as leaders in this work, and partnering with folks like Youth Leadership Institute, who does that so well, has been really important to us.

In addition, youth are such powerful messengers to lead change. They are the voice and the vision of future, and, therefore, they are an authentic messenger for what change should look like and who should be leading that change. They often are also not interest-based, so while they are holding their own interests, they are not coming from a position that an organization holds, so they are seen as very credible messengers in this arena.

Logistically, we also put out monthly newsletters. We intentionally have social media presence. We did a video series too around how the four community-identified priorities related to health to be able to expand the audience of folks who don't necessarily read publications anymore, even though we worked really hard to try to get our publication to be short and pithy and easy to access and colorful, we also know that in this day and age, people
access videos much easier. We do round robin presentations. We have a website that we update regularly that doesn't sit on our county website that's much more easily accessible. We do publications, and we contribute to regional efforts as well.

One of the biggest achievements that we have had is to democratize some of the data that relates to the four community priorities. We now have a data portal with varying -- over 40 indicators, and we try very hard to disaggregate all of those indicators by education, race, geography, and we also create city profiles of health that are related to the housing, economic development, education, and complete neighborhoods vision, so -- and call them healthy community profiles for each of the cities and jurisdictions that we have so that they get a snapshot of the -- how well they are doing in relationship to what we in public health call social determinants of health, and I like to call them social determinants of health equity, essentially, the economic and community factors that determine people's health outcomes.

Finally, before I turn it over to Kathy and Lalo, I just wanted to share specifically how Youth Leadership Institute and Health Policy and Planning have been working together. One has been just directly on supporting and funding the work that they say they want to do, they think is important, through our open requests for proposals opportunity, where they have led youth-led research, connected youth to decision-making opportunities. We have also co-developed projects together and implemented those projects. It started with a sugar sweet beverage focus in Daly City, which ultimately led to a default beverage policy. Youth Leadership Institute was really the boots on the ground working closely with businesses, the Council, and we were technical support in providing the health information and creating some of the collateral that could help move that effort forward.

We also partner on a Youth Commission. It's a formal commission to our Board of Supervisors in the County that brings the youth voice into our civic infrastructure, and it also helps create a pipeline for diverse youth leadership, which we hope will lead to City Council members and future Board of Supervisors members, and it has been a very exciting opportunity.

We have also been more recently in the last year bringing together our community organizing partners into an organizing roundtable, and that has been mostly focused on, first, really the intent was to understand health inequities that the populations that the organizers faced -- were working with might be facing, and it quickly started to turn into a conversation about what's the narrative for communities of color, how do they -- what's the sense of belonging, and the potential for identification of collective work, and Youth Leadership Institute has been a vital partner in that work.

So, just with the limited time, I wanted to end there so we have time -- plenty of time for Q&A, and certainly turn it over to Kathy to introduce a great community partner who we have loved working with and have learned a lot from, Lalo.

>> Kathy: Thank you so much, Shireen. You all are doing so much. I am sure there's going to be lots of questions. You're doing such amazing, and it's uplifting, at least for me to, to hear about how things are working and how you can be a catalyst for moving towards health equity. Now I'm excited to bring our next presenter into the webinar. Lalo Gonzalez is a program manager at the Youth Leadership Institute in San Mateo County. YLI brings young people together to bring positive change in their communities, leading them to this by developing their skills and talents, providing them with effective tools and resources to make their voices heard. They operate seven offices state-wide in California, and Lalo currently supports youth across
the county working on youth led research, including public transportation, environmental prevention on youth substance use and abuse, and increasing youth civic engagement. He grew up in east Coachella Valley, and he enjoys dancing, the wizarding world of Harry Potter, and eating seafood. Welcome, and we are excited to hear from you.

>> Lalo: Thank you for that. Hi, everyone. Again, my name is Lalo, and thanks again, Shireen and Kathy. As mentioned before, I'm a program manager at the Youth Leadership Institute, or YLI, and we are a state-wide organization, as mentioned, partnering with youth to create more equitable and healthy communities. We have offices across California, as you can see on the map, and today I'll be focusing more on the efforts that are happening in San Mateo County.

So, in San Mateo County we have a diverse set of programs that range from alcohol, tobacco, and other drug prevention work to advocating for more equitable and sustainable public transportation systems. All of these efforts drive towards increasing youth leaders through youth civic engagement processes.

Today, I'll be focusing on the work that our team has been leading in partnership with Get Healthy San Mateo County around the San Mateo County Youth Commission and our transportation work, TEAMC. But before that, let me talk a little bit more about YLI with these values in mind, inclusion, innovation, social justice and community. For inclusion, we know that young people are profoundly impacted by policies affecting their communities, so we always work to bring youth to the table to have a voice in the decision-making process. Youth can often see a way forward that adults cannot due to their fresh perspectives and ideas. Our strategy encourages youth to identify and implement their own solutions to issues in the community space.

Third, in social justice, throughout history, young people have ignited and led social justice movements to create a better world for everyone. YLI helps to focus their attention on the root causes of social injustice and sharpen the skills they need to tackle them.

And lastly is community, because no one can do all of this work alone. Through relationship and coalition building, YLI feeds the connective tissue within our communities to power our movements with resilience, resourcefulness, and with our partners.

So, a little bit about our model. We have a three-step model to identify these issues and solutions in our work. Our first is youth leadership development and capacity building. Young people need to feel empowered to be able to lean into their experiences and expertise. This looks like developing public safety films, providing historical context to issues they are working on, building a sense of empowerment and their own identities.

Once we have that base, we move to fill in the blank to create data driven change, and we take youth through a process called a youth action research, and they have the opportunity to develop the methodology, research questions, implementation process, and then go through analyzing the data to create the findings and recommendations. And the research does not stop there. We then identify next steps to create a movement or a change with this data, which leads me to the third and final part of our process, which is community campaign. We do not just want the data to be stored but want to make sure that decision-makers, administrators and the community is aware of what we are producing for action to happen, and this action can look like many things. It can be a policy. It can be a school or a community campaign or whatever action that the young people feel is needed for their community.

Great. So, now that I have talked a little bit about YLI, I'm going to jump into highlight two of our programs that we partner with young people and community in San Mateo County, the
first being TEAMC, the Transportation Equity Allied Movement Coalition. This group started off with two youth groups that were funded by Get Healthy. One of the youth groups was in semiurban south San Francisco, and just to give some context about the transportation reality in south San Francisco, they have access and BART and Cal Trains, which is the system in the south Bay Area, and they also have access to -- and the ferry.

The second youth group that took place was in Half Moon Bay, which is a more semirural community in coastal is San Mateo County, and their only public transportation system is the bus. Uber and Lyft doesn't go out there because it's kind of too far away, so even Uber and Lyft is very limiting to get around. So if you don't have a car, you really need to depend on the bus to get around, and we decided to look at public transportation because we know that it connects people to places, especially young people, and it's a major determinant of access opportunity, for example, taking summer school classes at a local community college, if you live in a certain neighborhood, and also economic mobility. So, for example, if you're trying to get a job outside of your community, you need to have access and a way to actually get there if you don't have access to a car, which then overall leads to health outcomes.

They can either be positive or negative, depending on how your access is in the community. So, keeping all of this in mind, we brought together about 20 youth from both cities to go through the youth to action research project and then learn more about the barriers and recommendations to increase youth transit ridership, and we saw that both communities found that the issues -- the issue they brought up was that the bus was unreliable and not efficient to get people around to where they need to be. Both of the youth groups recorded their experiences taking transportation in a travel diary, which told stories of how they navigate different forms of transportation to get to where they need to go and then led to surveys to be implemented in their high schools to get a larger sense of what their peers are experiencing.

Through projects, we were able to bring together about 20 other organizations that were working to advance transportation solutions that promote social equity, public health and safety, and environmental protection in San Mateo County.

The research that the youth led also helped develop a youth mobility plan that our bus agency adopted to increase ridership in San Mateo County, and the recommendations the youth conducted were highlighted in that plan.

And lastly, the coalition again started off with just two young people, two groups of young people, mobilizing and getting more solutions and information around barriers to public transportation. It helped us kick off and push for a ballot need that serves the needs of transportation riders, which impacts people of color, because we know their demographic is impacted more, and increasing ridership.

Moving on to an overview about what TEAMC was and transitioning into San Mateo County Youth Commission that Shireen talked about. So, for 25 years, the Youth Commission has been partnering young people and decision-makers across the County to help bridge the gaps in perspectives and knowledge between youth and adults. This has been accomplished through creating I don't think adult-youth partnerships at various agencies, offices, initiatives, as well as with community-based organizations. The Commission may make policy recommendations to the Board of Supervisors, pass resolutions of their own, or hold community engagement events and do research into issues affecting youth, including mental health, substance use prevention, human rights, and immigration.

A recent example of a partnership was with the San Mateo County Behavioral Health and Recovery Services, to create a youth-created and youth-focused cannabis prevention
campaign. Commissioners worked with YLI and DHRS staff to hold meetings, implement and analyze surveys, and draft branding materials for equity-based marketing and communications strategy. The outcome of the cannabis campaign yielded an Instagram page and an electric billboard, and this campaign is being evaluated as a template for the state of California and other counties for similar cannabis prevention education initiatives.

Other resources have included bringing -- to the Board of Supervisors, in partnership with behavioral health, connecting schools and clubs with the San Mateo County Office of Sustainability, as well as engaging young people and their family through public parks.

Youth received training and presentations to develop a variety of skills, including public speaking, teamwork, effective presentations and policy analysis and advocacy, and this is something that was implemented across programs in YLI.

So, transitioning into communications, communications is important to us, because it helps us do many things, but these were the three things that really came to mind. First, it ensures that young people have opportunities to speak for themselves, and this looks like youth writing blogs, sharing out their experience and engaging with the action projects that they have going on, which you can check out on our website, and it's also having them communicate firsthand through their voice.

Second is shifting the narrative of young people. We want to demonstrate that it is possible and important to change and shift the narrative of young people, because they are leaders that have valuable experience that can be part of the conversation. They oftentimes navigate the world with a lot of stereotypes that are placed and are coming from adults, of they don't care about policy, they don't care about their future, they are lazy or they are always on their phones, so it's really shifting that narrative to demonstrate that there are other reasons, like barriers -- maybe transportation, maybe needing to stay home to help their families -- that is preventing them from being civically engaged.

And the third is furthering our campaigns. All of this helps us further our campaigns through awareness, cultural actions, and this looks like producing videos to recruit young people to our programs, specifically, the County Youth Commission, and also creating programs and educate and highlight the importance of pushing for reliable public transportation systems.

And lastly, with communications, comes this concept of storytelling, and it's important to highlight this, because this is what our youth leaders do best. Every day, youth are telling their stories, whether that's in school, with their friends or family, to talk about their day, so we need to be sure that we are finding ways to uplift those skills and push it to communicate to decision-makers about the realities and where they need to be changed. Storytelling is what happened with the youth that we partnered with for the transportation work. The storytelling and diaries were a spark to create a larger movement and an opportunity to push for a policy that is going to bring $80 million annually for public transportation. And with that testimony, being able to hear the stories and experiences along with the data and the numbers is more powerful as it humanizes the experience of the communities we are hearing from and that we are trying to uplift.

So, with that, thank you so much, and I will pass it back to Kathy.

>> Kathy: Thank you so much. I am sure everyone on the webinar, it's just so exciting to hear about the work, and it's inspiring, and I just want to keep hearing more and more about what you do. One thing I wanted to lift up from a communications perspective about both of your comments is that we always recommend that people focus on values and solutions. We
spend a lot of time in public health talking about the problem, but you all have a lot of solutions, from addressing transit to having a Youth Leadership Commission, and so that is one way to have effective messages, is to do a lot of the hard work to come up with effective solutions so that we are not just talking about the problem, we are actually talking about a vision of where we want to go for health equity, that other people are excited about and want to join into, and we have some resources on message development around that.

So now we'll be taking questions from the chat, but to start it off, while you all are writing your questions, I am really interested, because we have worked with people around the country who mentioned it's really challenging to get to the roots of health inequity in our communication, talking about very complex issues like power imbalances, structural racism, oppression, the historical context for health inequities, and breaking down some of these stereotypes, and yet, here you are, and you are doing it effectively, and so I'm just wondering, both from a strategy perspective and a message perspective, why is it so important having youth at the table, and how has this been beneficial to getting to some of these challenging discussions around the root causes of health inequity? And this would be for both of you.

>> Lalo: Awesome. Thanks for that question. I can get us started. I guess the things that come to mind with that question, first is that youth sharing narratives from their own perspective helps them step into their power as leaders, and it gives them the confidence to speak up.

Also, most importantly, a vast majority of adults do not know how equitable policy works or how to fill out a speaker card, so just identifying that place of, like, this is a City Council meeting or this is a Commission meeting where you can give public comment to shift and possibly change the -- a policy that happens to marginalize certain communities. It is important to start having those conversations and kind of deconstructing that process with young people, because if they are being civically engaged today and are aware of the way the local policy processes work, then they will be able to continue that in the future.

And the second thing is, you know, once they are feeling confident about the way the system works, but also the importance of their experiences and their -- yeah, their experiences, then they have a unique input when it comes to offering social justice and community change perspectives. So youth experience stressors that their communities are facing, and they have those unique perspectives as well, because they are now in so many different spaces, and whether like it's public transportation or talking about housing, the young people are experiencing those stressors that their parents are experiencing, so being able to kind of have a conversation about here's a policy that happened 50 years ago that is currently happening or we are seeing the effects of today helps them really understand the context that they are playing in and also identify where they can actually plug in to shift that narrative to be more equity focused.

>> Shireen: Yeah, that's really great. I think the thing that I would add, maybe, is the way we as a government and a health entity would think about it, I mean, one is just the moral perspective, and many of which I think Lalo explained really well, which is that they are the recipients, often. Youth are the recipients of the decisions that adults make, and it's not fair. Adults are not seeking their perspective like they should be, because they are making -- adults are making decisions for the youth's future without being fully informed about what the youth need, what their experiences are, what they want to see for their future, which may be very different than the age group of our current decision-makers. So I think there is a moral value in ensuring that youth have a voice as messengers in this work. Also, to Lalo's really good point,
that they are not represented already. They are often a constituency that decision-makers don't seek. They don't seek power, necessarily. They will often ignore them if they are not of a voting age, for example, from our elected officials. So there needs to be an intentional strategy to ensure their representation when there is a vacuum of it.

And then another thought that I had is that they are leaders, and not just leaders of youth and of the youth experience, but they are often leaders of their community overall. They are leaders in their family. They are leaders in their neighborhoods. They see and understand -- they have an expertise in their community that needs to have a focus. We recently did an -- we recently did some research on identifying -- we connected with youth separately, and we connected with caregivers separately, and we figured -- we identified where there were very different understandings of the same situation, because adults, even though they are in close contact with their children or the people they are giving care for, they are not always in tune with what their experiences are, so it's very important to not just have adults representing youth and their experience, but to have actual youth represented.

And then I think there's sort of a transactional tactical piece to this, that I -- you know, I sort of shudder, but I will mention, is that just as a political strategy, youth are also -- people value youth. People care about youth, so when youth are speaking, they listen. They also -- the information that they bring doesn't feel like it's attached to a specific position of an organization but really attached to their personal experience, so there's an authenticity and a pureness to youth as messengers, and I do think there is a recognition of youth as the future, and so we should be listening to them now. They can often say things that are harder than adults to say about their experience. They can be more pointed, less filtered around issues of discrimination, around the challenges they may face, and they also experience very unique discrimination that others may not experience and adults don't necessarily recognize. In some work that we recently did around children and youth, we found that they experienced such high rates of what they -- of police profiling, for example, and ways in which caregivers and adults do not experience, so those sort of unique perspectives. Their valued leadership and expertise in their communities and their own experiences, as well as the fact that their voice does resonate, and they can say some of the things that we have a harder time saying.

Kathy, are you still there? I wonder if you want to --

>> Kathy: Oh, sorry. I'm back. Thank you both for that. I think you had excellent points, and, you know, the work to take to build this takes a long time, but it's definitely, as we can see in San Mateo, it's very worthwhile.

We are getting a lot of questions in. I'm going to try to get to as many as possible. This one came in on the registration, and I think it's an important one. "Are there any key messages that resonate with both government partners and community partners, or do you have to tailor to each audience on every point?" And I just want to note, again, and I composed these resources in the chat box, that Berkeley Media Studies Group has a message development worksheet, and we really recommend people start with values and also focus on solutions, and a lot of times values like dignity, justice, interconnectedness, common sense, are a big enough umbrella that you can hold multiple messages, so that value may drive your campaign. You may tailor a little bit if you're speaking in a community meeting versus a Board of Supervisors, but a lot of us don't have the funding to do targeted messaging, so coming up with values and speaking from that place first can be helpful for diverse audiences. So I'll put that in the chat box and then turn it over to both of you to see if you have thoughts about your own work and whether you have had to tailor your messages to diverse partners.
Lalo: Yeah. Broadly and briefly, yes, I think you will always need to tailor the message, and it also depends on what part of the strategy you are in. Right? If this is an informational meeting that you're trying to get like the word out, is this like your final push that you want to push for this kind of policy or introduce a policy, and it just depends on where you are in the timeline but also in your strategy. And I think always, as I mentioned, a community is a value for us, so always thinking about community and what is going to connect. I'm going to backtrack a little bit. Younger people always want to know how is this connected to me, or how is this issue that we are working on, how is it connected to larger issues that are going on around me? So kind of doing the same approach with community, like, what is a community need for that time is? What do you do to try to connect the dots to create solidarity between young people and adults, but also what the community is needing at the moment. So, yeah, I guess to answer the question, yes, I think you will always need to be tailored.

Shireen: This is Shireen, and I do agree with that. I think when I think about a broad message that resonates, you know, across communities, I would say that just the notion that youth are the future as a message tends to resonate everywhere we go and whatever audience we may be talking to, whether it's a City Council, whether it's a community development director, it's a community-based organization, people recognize that the youth right now are the future of our county, and we need to respect that.

The other thing I think that resonates, for the most part, across the -- across the board is a notion, and this is just a piece of the conversation around interconnectedness, but there is a value for how youth connect with community -- are interconnected in our communities, and, therefore, a really good bridge to bring different decision-makers, different youth and adult voices together.

Kathy: We have quite a few questions that are around the same area, and just to note that all of the resources are going to be posted. People are asking about are youth on the commission low income, or is the work with low income youth done elsewhere? How are you connecting with the most at-risk teen demographic, such as Alaska native/American Indian, LGBTQ, low socioeconomic status, homeless youth? So I'm just wondering if you, Lalo, could speak a little bit about how you reach youth and which youth you're working with.

Lalo: Yeah, totally. We try to keep the Youth Commission as diverse as possible, so that has to look like doing intentional outreach to community organizations that work with impacted youth, like we have a PHI center here in San Mateo that, you know, we follow up with them digitally. We also offer help in continuing the applications for -- submitting the applications for the Youth Commission, because we understand that oftentimes their voices are not included in the decision-making processes, so we want to be intentional about making sure that they are on the Commission, and yes, we do have a pretty diverse commission around all identities, from gender, sexually assault, race, ethnicity, immigration status. That way, that the conversations are dynamic, and that we are authentically representing San Mateo, as well as geography. Right? But I think we can strive to be as diverse as possible, but there are also just the realities that get in the way from young people to participate. For example, transportation can be a huge barrier. We talked about the coast side that has a limited public transportation system, so also rely on our end to try to find ways to either provide stipends or subsidies. That way, young people can get to the meetings, or finding other innovative ideas of doing like online meetings or webinars. That way, they can be part of those conversations.

Kathy: Thank you. And we are getting close to time. Laura needs just 1.5 minutes at the end, and so the last question I want to ask is, one, we had a question about how people can
learn more about each of your programs, and the slides do have some information about where to find you on social media and websites, but if you want to share anything else. And then if you just have any last parting words about what advice would you give to other health departments or other youth-related organizations to replicate this partnership in their jurisdiction.

>> Shireen: I'm happy to start. This is Shireen Malekafzali. join our monthly newsletter, which you can find at gethealthysmc.org, and you can join us on social media, whether it's Facebook or Twitter. Just look up Get Healthy SMC handle. So, thank you for that. We have a lot of our information posted there.

And as far as advice, man, I know we don't have a lot of time. I think the thing I would say is partner, find the groups like YLI with the health department, the groups that are doing this work that aligns with our values, doing work both to get outcomes and also their process with those outcomes align with our values for social justice and equity, and partner with them. If we were the ones implementing the Youth Commission on our own, it wouldn't be half as successful. We need our organizations like YLI. And the other thing that I would say is when you do partner, make sure that you partner as authentically and respectfully as possible, both with funding that you can give but also the amount of leadership that you can let go of.

>> Lalo: Yeah. I'm definitely going to echo what Shireen said, building strong relationships that echo youth voices and experiences, but also providing the internal training of how departments can also be authentic and creating youth-adult partnerships. We can definitely -- community-based organizations can definitely do the work, but it is also great to partner in the process with health departments. I'm actually corresponding -- CBOs always need funding, so making sure that there is funding for these kinds of projects.

And lastly, as a plug, and on our website you can learn more about what we do, but we also have our training and consulting services arm that provides training for other departments or other organizations to have authentic youth-adult partnerships, but also implementing youth at action research projects. If you want to get more information, please check out our website. Thank you so much.

>> Shireen: Thank you.

>> Kathy: Thank you both.

>> Laura: And, yes, thank you all. Many thanks to Katherine, Shireen, and Lalo for your presentation today, and also thanks to our funder, the California Endowment and to our partner for today's event, Berkeley Media Studies Group, and especially thank you to you, our audience. Our recording of today's presentation and the slides will be available to you by next week at dialogue4health.org. You will receive an email from us with a link to a brief survey. Please take the survey, and at the end of that, you will find instructions if you want to request a certificate of completion for this event.

Again, thank you so much for being with us, and that concludes today's web forum. Have a great day.