



# **YWCA Greater Los Angeles Community Service Plan - East Los Angeles/Union Pacific**

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## **East Los Angeles/Union Pacific Community Service Plan**

### **Section I: Overview**

Childhood obesity has more than doubled in children and tripled in adolescents in the past 30 years. As of 2010 more than one third of children and adolescents were overweight or obese. (Ogden CL, Carroll MD, Kit BK, 1999-2010 Journal of the American Medical Association) Overweight is defined as having excess body weight for a particular height from fat, muscle, bone, water or a combination of these three factors whereas obesity is defined as having excess body fat (National Institutes of Health, National Heart, Lung and Blood Institute. Bethesda, MD, National Institutes of Health 2010)

Childhood obesity rates in East Los Angeles are 32.9%. Exacerbating this issue is the fact that one in four children in these areas lives below the poverty line. The YWCA GLA believes that safety and accessibility are the two major barriers that are preventing the community from being more physically active. Crime rates are high in this community and parents are reluctant to allow their children to walk to school or play in their neighborhoods because of reckless drivers.

YWCA GLA advocates for justice and dignity for all people and is committed to transforming lives, building self-reliance and ultimately strengthening the communities we serve. We believe that providing the community with a safe place to congregate, exercise and play will encourage families and children to get out and be active. These options, coupled with health and wellness education, will allow residents to improve other aspects of their health, including meal preparation and eating habits.

As a testament of the YWCA GLA's commitment we invited the community to join us in the process of developing a **Community Service Plan** the purpose of which is to outline the goals and activities the YWCA will take over the next five years to provide more opportunities to eat healthy and participate in physical activity. This public document has been created through community input gathered from interviews with community stakeholders, community surveys, a series of focus groups in each target community and community workshops. As we embarked on the process of providing immediate solutions to address the high rates of childhood obesity in these communities the YWCA took steps to ensure that these same communities were brought into the dialogue. It is our hope that by participating in the process of identifying the problems and providing recommended solutions they will ultimately be empowered by seeing their recommendations come to fruition through program implementation at the YWCA. Thus, the result of this meaningful dialogue will result in real and attainable programmatic solutions with the potential to positively impact the problem of addressing childhood obesity in this community.

### **Section II: Community Outreach Findings**

#### Stakeholder Interviews:

We conducted interviews with community stakeholders that were referred by our partners and allies in the community. These local leaders and community advocates were made up of the following individuals; Juan Escobedo, Program Manager at Bienvenidos Community Health

Clinic, Fabian Lijtmaer, Director of Wellness & Green Projects at LA CAUSA Youth Build, Angelo Logan, Executive Director of East Yard Communities for Environmental Justice, Alice Medina

Library Manager of the East Los Angeles Library and Theresa Palacios, Executive Director of Eastmont Community Center. While each of these individuals had their own perspectives with regards to the perceived obstacles and solutions for healthy eating and physical activity there were a few key themes that emerged repeatedly. In order to address a commonly stated fear of elements of crime, solutions promoting physical activity need to include group activities that will aid participants through safety in numbers. Suggested activities include sports related team games in public parks, walking school buses, the formation of bike and walking clubs, and community gardens and farmers markets. Many would like to see the whole family receiving Health & Wellness instruction and participating in activities at the same time through both intergenerational programming and age specific workshops that cover the same topics so that the message is reinforced and has the potential for maximum impact. Many wanted to see socio-economic factors being addressed in nutrition education so that solutions include economically viable solutions for low-income families. Activities for children/youth should be fun, interactive and engaging, and include opportunities for leadership development by having the children/youth teach what they have learned to their peers and adults.

#### Focus Groups:

Two focus groups were held in January of 2014 in East Los Angeles. The discussion provided an opportunity for each designated population to share their sentiments with regards to health and wellness in the community of East Los Angeles. The first half of the discussion centered around identifying perceived obstacles to the lack of participation in healthy eating and physical activity by residents. The second half involved identifying solutions which could be implemented by way of programming options at the YWCA Union Pacific Empowerment Center in East Los Angeles.

The first focus group was held on January 28<sup>th</sup> with Senior Program participants from the Union Pacific Empowerment Center. Seniors cited a lack of safety stemming from the following; lack of efficient lighting on streets and in the local park, the prevalence of gang activity and stray dogs. They believe community meetings with the local Sheriffs and the formation of neighborhood watch groups would help address these problems. They would like to see physical activity programming that incorporates cultural traditions including dance classes for both seniors and youth. They believe that a lack of education and discipline is the main reason for unhealthy eating habits and feel that nutrition education classes and cooking demonstrations. They would like to see more community engagement activities in which the entire family unit learns about healthy eating and participates in physical activities together as they feel this would have a greater impact in the community.

The second focus group was held on January 29<sup>th</sup> with youth from the After-School Youth Program at the Union Pacific Empowerment Center. Some of the concerns of youth echoed those voiced by the seniors.

They too cited safety issues such as the prevalence of gang activity and illegal drug use an obstacle to engaging in physical activity around their neighborhoods and in the local parks. They complained that team sports, cheer and dance programs available at the school and

through local parks are not affordable for their families the majority of which consist of two or more siblings. The majority preferred being part of a sports team, dance troupe or cheer group as opposed to taking classes or participating in sports clinics as individuals. They felt that making these activities available for free through the YWCA or the local park would be a solution. They would like to see physical activity and nutrition education instruction offered in a format that is fun, interactive and engaging. They believe that incorporating the arts would provide a solution. One example included the creation of a cooking show that could be recorded and shared with others on YouTube or participation in a live performance incorporating dance and music.

### Community Surveys:

Following the focus groups community surveys were distributed to youth, parents and seniors throughout the greater East Los Angeles community. The comprehensive results of these surveys were organized into a chart which has been included in Section VI: Exhibits of this report and titled the Community Survey Result Table. The majority of meals consumed by residents are prepared in the home however there are a few factors in the preparation of those meals that contribute to their not being health. Traditionally based cultural foods do not always utilize healthy ingredients and processed foods are incorporated into these meals. Additionally meals throughout the week are supplemented with fast food. Many were interested in learning how to create meal plans and how to limit fat and sugar. The majority preferred physical activity options over nutrition education and said they would exercise one to three times a week if free, safe and secure childcare were available and if they had access to free exercise programs. The majority preferred physical activity programming that is geared to the entire family unit.

### Community Workshops:

The first community workshop was held on Saturday March 1st at Eastman Avenue Elementary School. This provided an opportunity for the community to share their ideas as to what specific kind of physical activity and nutrition education programming they would like to see offered at the YWCA Union Pacific Empowerment Center. During the workshop residents were provided an overview of YWCA GLA, the HEAL initiative related programming and community outreach efforts thus far. There was a breakout session in which community members had an opportunity to add their ideas to the recommended programs gathered thus far as well as determine which demographic age range would most benefit from the various program ideas. They were also asked to provide their recommendations as to when the recommended ideas could be implemented and were asked to choose between Phase I, Phase II or Phase II. Their ideas were incorporated into the Community Recommendation Matrix and the Community Service Plan Implementation Timeline.

The second community workshop was held on Thursday September 11<sup>th</sup> at the YWCA Union Pacific Empowerment Center. Those in attendance were mainly parents and were very excited to hear about the Community Service Plan. Some were unaware of the high rates of childhood obesity in Walnut Park and were excited to hear about YWCA's plans to offer programming that would provide solutions to address the problem. All were excited to hear the diverse array of

ideas for Nutrition Education and Physical Activity instruction to be made available to all populations. There was a request to ensure that programming is also made available for populations with limited mobility such as children with special needs and seniors. Those who had not participated in the earlier stages of the planning process felt that their ideas were well represented. Many were glad to see the inclusion of cultural programming as well.

### **Section III: Community Service Plan Matrix**

#### Implementation Timeline:

The timeline was placed in a chart which outlines the main categories in which the many programmatic recommended activities fall under. The information indicated on the timeline includes the activity name, the time frame for implementation and goal attainment, desired outcomes, possible indicators of success and the party responsible for implementation. With the exception of the first year which begins in September of 2014, the time frame for this calendar beginning in 2015, will utilize a fiscal year calendar beginning in July and ending in June. The time frames have been divided into distinctions of Phase I (First Year ~ 2014/2015), Phase II (Second Year & Third Year ~ 2015-2017) and Phase III (Fourth Year ~ & Fifth Year ~ 2017-2019).

There are a number of activities which YWCA is committed to begin implementing even before additional programmatic funds are acquired utilizing existing staff and available resources. While an activity may be slated for implementation in Phase I there may be limitations to the level at which it can be fully due to limited staff and available resources. A notation stating *\*additional resources or funding required* has been placed in the timeline category in the Implementation Timeline alongside those activities which will require the acquisition of additional resources before implementation can begin. The timeline may be adjusted to reflect an earlier time frame for implementation should there be an acquisition of funds through a grant or donor which would make it possible to provide services sooner or for a larger number of people.

- Please see the attached Community Service Plan Implementation Timeline.

### **Section IV: Implementation Strategy**

The YWCA is committed to working towards implementing all of the activities which first and foremost correspond to our mission, vision and fall within one of our four signature programs Child Development/Youth Services, Senior Services, Sexual Assault Crisis Services and Workforce Development. In addition to meeting the needs of the populations we serve the majority of the activities indicated in the Community Service Plan Implementation Timeline fall under goals set by the associations Health and Wellness initiative.

There are a significant number of activities which will require additional resources or the acquisition of additional staff or funds. The first implementation strategy we will follow is one that allows us to begin implementing those activities which can be carried out, even at a minimal level, with existing staff and available resources. We will simultaneously aggressively

seek funding which will enable us to provide a greater selection of the desired programming to a greater percentage of the target demographic and throughout the duration of the five year span that comprises the Community Service Plan.

The second implementation strategy we will follow will be determined in part by the level of interest indicated in the Community Survey Findings Table which provided a ranking for the most popular to least popular programmatic ideas. However, many of these classes such as Zumba or Folklorico Dance classes will require the expertise of a professional or certified instructor. It is only through funding that these specific types of classes or workshops can be offered. The complete list of community programmatic recommendations can be seen in the Community Recommendation Matrix. This document also provides an indication as to which programs can be implemented with existing resources and which will require additional resources or funding.

### **Section V: Implementation Review Committee**

A committee made up of YWCA Union Pacific Community Empowerment Center staff and members of the Union Pacific Empowerment Council will meet on a quarterly basis to monitor the status of Community Service Plan implementation noting any obstacles or barriers and providing recommendations. They will also monitor the effectiveness of programs and make adjustments as needed. In doing so they will keep in mind that for any given activity in which multiple populations are targeted it may very well be that only one population can be served at a time due to limitations in available staff and resources. The committee will use the following indicators to evaluate the effectiveness of each program activity:

- 1) Is the activity in keeping with the recommended time frame for implementation?
- 2) Is the activity being presented in a way that will result in desired outcomes?
- 3) Are there any notable indicators that the program is proving effective?
- 4) Is the target population(s) being served?
- 5) Is there a significant level of participation amongst the targeted population(s)?
- 6) Are there sufficient resources available to present this activity at the present time?
- 7) What if any recommendations can be made that will result in more effective program delivery?

### **Section VI: Exhibits (Attached Documents):**

- 1) Healthy Eating Active Living (HEAL) Initiative Summary
- 2) Childhood Obesity - A growing problem in America (Literature Review by YWCA)
- 3) Community Survey/Questionnaire

- 4) Community Survey Results Table
- 5) Community Recommendation Matrix
- 6) Community Service Plan Implementation Timeline
- 7) Community Service Plan Budget



## **Summary of the Healthy Eating Active Living Initiative at YWCA:**

In May of 2014 the YWCA Greater Los Angeles launched a Healthy Eating Active Living initiative made possible by a grant issued by the Los Angeles County Department of Public Health with a goal of developing and implementing one or more strategies that will create an environment where it is convenient, safe and easy for community members to eat healthfully and participate in physical activity every day.

The main purpose of the grant is to address the high rates of childhood obesity in the community of East Los Angeles which at the inception of this grant was at 32.9%. The second target community for this initiative was Walnut Park a small community with a childhood obesity rate at 38.7%. Both of these communities fall within unincorporated Los Angeles County and are located in the geographic Service Planning Area 7 (East) or SPA7. The goals of the initiative are twofold. Over the past two years we have worked in collaboration with community partners to design and deliver programs which increase free and accessible opportunities to engage in physical fitness as well as access to nutrition education.

HEAL Community Partners have played a key role in the development of programs and the Community Service Plan as well as the overall implementation of the initiative. In addition to attending monthly partner meetings collaborative partners have worked to support one another and the community at large through the sharing of information and resources. In addition to our funder a partner in both communities included the Los Angeles County Department of Parks and Recreation. Our educational partner in Walnut Park was Academia Moderna Charter School/Prepa Tech. Additional contributors to the development of the Community Service Plan include; the Walnut Park Empowerment Council, a body of community members that represent the community as well as Center Director Maria Elena Chavez and the staff at the YWCA Supervisor Gloria Molina Community Empowerment Center. Our partners in East Los Angeles include Eastman Avenue Elementary School, HOPE Healthy Start and LAUSD's Beyond the Bell program. Additional contributors to the development of the Community Service Plan include; the Union Pacific Empowerment Council, a body of parents and community members that represent the community as well as YWCA Center Director Maria Elena Chavez and the staff at the YWCA Union Pacific Empowerment Center.

### **Collaborative Partners:**

- YWCA Supervisor Gloria Molina Community Empowerment Center:

The center, located in Walnut Park, opened its doors for programming in June of 2014. Programming offered at this center includes a Child Development program, Youth and Senior Services as well as Workforce Development and Sexual Assault Prevention & Education programs. A Health & Wellness initiative will be integrated throughout existing programs spanning all demographic populations served. Center Director, Maria Elena Chavez and Program staff participated in various stages of the development of the Community Service Plan and will be integral in its implementation. Additionally the Walnut Park Empowerment Council, a leadership body consisting of community members, will serve as lesions to the YWCA working to ensure that the plan is



implemented accordingly. Center staff and the Empowerment Council will work together with community partners to identify opportunities for continued collaboration.

- YWCA Union Pacific Empowerment Center:

The YWCA has provided Child Development Services in the community of Union Pacific, located in East Los Angeles since 2002, with the Center celebrating its grand opening in May of 2010. Programming offered at the center includes a Child Development program, Youth and Senior Services as well as Adult Education programs. A Health & Wellness initiative will be integrated throughout existing programs spanning all demographic populations served. Center Director, Norma Gonzalez and Program staff participated in various stages of the development of the Community Service Plan and will be integral in its implementation. Additionally the Union Pacific Empowerment Council, a leadership body consisting of parents and community members, will serve as partners to the YWCA working to ensure that the plan is implemented accordingly. Center staff and the Empowerment Council will work together with community partners to identify opportunities for continued collaboration.

- Los Angeles County Parks and Recreation:

We have worked collaboratively with parks staff from the East County Community Services Agency to provide equipment and provide joint programming activities at Parque de Los Suenos in East Los Angeles and Walnut Nature Park in Walnut Park. These free fitness events consisted of a series of two hour and a half long Physical Fitness Clinics for children and families held at each local park. Themes included the following; Soccer Clinic, Fitness Challenge featuring an Obstacle Course and Zumba, a Basketball Clinic and a Skate Park Clinic. We will continue to work collaboratively with the East County Community Services Agency to assist in the dissemination of information regarding affordable and accessible quality recreational opportunities that promote a healthy lifestyle and strengthen the community through diverse physical, educational and cultural programming.

- Academia Moderna Charter School/Prepa Tech:

We have worked collectively to provide funding for staff, curriculum and equipment which resulted in free accessible joint use programming for both children and their parents in Walnut Park. After-school programming which included nutrition education focused primarily on physical fitness, including classes such as Drill Technique, Basketball and Volleyball conditioning and Family Zumba, were provided five days a week for three hours a day for elementary school students. During the summer months HEAL program staff provided a wide variety of fitness classes such as Hip-Hop Dance, Ballet, Movement & Flexibility, Zumba and Self-Defense. These classes were made available to children throughout the community Monday through Friday from 1:00 p.m. to 5:00 p.m.. An additional component to the Summer Youth Program at the Supervisor Gloria Molina Community Empowerment Center included a free Summer Lunch Program

which provided nutritional meals which were delivered five days a week by the Old Timers Foundation.

- Los Angeles Unified School District's Eastman Avenue Elementary School, the HOPE Healthy Start program, and the district's Beyond the Bell program:

We have worked collectively to provide funding for staff, curriculum and equipment which resulted in free accessible joint use programming for both children and their families in East Los Angeles. After-school programming which focused primarily on physical fitness and included nutrition education was provided twice a week for three hours in collaboration with Beyond the Bell Youth Services program participants. Every Saturday, during the school year, the school playground was opened up to the community at large to participate in a Community School Park. The idea of the Community School Park is an innovative use of available community space and resources which can provide an alternative solution to communities which lack parks or available staff and programming due to budget restrictions. During the summer months the Community School Park was open Monday through Friday from 9:00 a.m. to 1:00 p.m.. The daily schedule provided a variety of programming options from fitness stations, to free play to organized sports activities and games. In addition youth participants were provided a warm nutritional lunch by the LAUSD Food service program. A Backpack Program coordinated by HOPE Healthy Start provided an on-site food bank with food delivered every Friday for distribution to families in need. Additionally parents participated in a series of Nutrition Education Workshops also coordinated by HOPE Healthy Start in partnership with a local health partner Los Angeles Community Hospital.

## **Childhood obesity - A growing problem in America**

A Literature Review prepared by YWCA GLA for the Healthy Eating Active Living Initiative  
(January 2014)

Childhood obesity has more than doubled in children and tripled in adolescents in the past 30 years. As of 2010 more than one third of children and adolescents were overweight or obese. (Ogden CL, Carroll MD, Kit BK, 1999-2010 Journal of the American Medical Association) Overweight is defined as having excess body weight for a particular height from fat, muscle, bone, water or a combination of these three factors whereas obesity is defined as having excess body fat (National Institutes of Health, National Heart, Lung and Blood Institute. Bethesda, MD, National Institutes of Health 2010)

It's a known fact that overweight and obesity result from "caloric imbalance" that is - too few calories expended compared to the amount of calories consumed. These risk factors for obesity are also affected by various genetic, behavioral, and environmental factors. (Daniels SR, Arnett DK, Overweight in Children and Adolescents. Circulation 2005; 1999-2010)

Studies have shown that 39% of Latino children 2-19 are overweight or obese, compared to nearly 32% of U.S. Children. ([salud-america.org/latino-child-obesity](http://salud-america.org/latino-child-obesity))

Childhood obesity rates in East Los Angeles and Walnut Park are 32.9% and 38.7% respectively, or approximately one in three children. Exacerbating this issue is the fact that one in four children in these areas lives below the poverty line. The YWCA GLA believes that safety and accessibility are the two major barriers that are preventing the community from being more physically active. Crime rates are high in these communities and parents are reluctant to allow their children to walk to school or play in their neighborhoods because of reckless drivers. (YWCA Greater Los Angeles HEAL Proposal 2012).

In response to the highest levels of childhood obesity in Los Angeles County and to meet community needs for a safe place to exercise and play, the YWCA GLA believes that providing the community with a safe place to congregate, exercise and play will encourage families and children to get out and be active. These options, coupled with

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health and wellness education, will allow residents to improve other aspects of their health, including meal preparation and eating habits.

What will be discussed in this review are the overall health effects caused by childhood obesity, the short and long term effects associated with it as well as the possible causes. This document will conclude with recommendations on what needs to be done to stem the tide and how taking action now plays an important part in breaking down the barriers of unhealthy eating and lack of physical activity needed to combat obesity in our children.

### **The Health Effects of Childhood Obesity**

Childhood obesity has both immediate and long-term effects on health and their well-being.

#### **Some of the immediate effects are:**

Children who are overweight are more likely to have risk factors for cardiovascular diseases, such as high cholesterol or high blood pressure. (Freedman DS, Zuguo M, Cardiovascular Risk Factors and Excess Adiposity Among Overweight Children and Adolescents. *Journal of Pediatrics* 2007). Adolescents are more likely to have pre-diabetes, a condition in which blood glucose levels indicate a high risk for development of diabetes. (Diabetes Care 2009). Children as well as adolescents who are obese are at a greater risk for bone and joint problems, sleep apnea, and social and psychological problems such as stigmatization and poor self-esteem. (Dietz WH. Overweight in Childhood and Adolescents. *New England Journal of Medicine* 2004)

#### **Some of the long-term effects are:**

Children and adolescents who are obese are more likely to be obese as adults which leads to higher risk for future health problems like: heart disease, Type 2 Diabetes, Stroke, several types of cancer and osteoarthritis. (The Surgeon General's Vision for a Healthy and Fit Nation). One study showed that children who became obese as early as age two were more likely to be obese as adults. (Freedman DS, Kettel L. The relations of childhood BMI to adult adiposity. *The Bogalusa heart study, Pediatrics* 2005). Overweight and obesity are associated with increased risk for many types of

cancer, including cancer of the breast, colon, endometrium, esophagus, kidney, pancreas, gall bladder, thyroid, ovary, cervix and prostate, as well as multiple Myeloma and Hodgkin's Lymphoma. (American Cancer Society Guidelines on Nutrition and Physical Activity for Cancer Prevention. Cancer Journal for Clinicians 2006)

Higher rates of Latino childhood obesity, which places Latino children at higher risk of developing chronic diseases, are particularly alarming given that Latino children comprise 22% of all U.S. youth and represent the largest, youngest, and fastest growing minority group in the nation. ([salud-america.org/latino-child-obesity](http://salud-america.org/latino-child-obesity))

### **Possible Causes of Childhood Obesity**

There are a variety of factors that can lead to childhood obesity, some of which are out of the control of the children themselves. American society has become characterized by environments that promote increased consumption of less healthy foods and physical inactivity, thus making it difficult for children to make healthy choices in their everyday lives such as home, child care centers and schools. Below are five possible causes that attribute to childhood obesity.

1. Advertising of less healthy foods - Nearly half of U. S. middle school and high schools allow advertising of less healthy foods, which can impact student's ability to make healthy choices in their everyday lives. (Centers for disease control and Prevention. Children's food environment state factor report 2011). In addition foods that are high in sugars, salts and fat that contain low to no nutritional value are advertised and marketed through media targeting children and adolescents, while advertising for healthier foods is almost nonexistent in comparison.
2. Sugary drinks and less healthy foods on school campuses - Students have access to sugary drinks and less healthy foods at school throughout the day from vending machines and school canteens and fundraising events, school parties, and sporting goods. (Center for Disease Control and Prevention)
3. Licensing regulations among child care centers - More than 12 million children regularly spend time in child care arrangements outside of the home. (Pathways and Partnerships for Childcare Excellence.) Unfortunately, not all states use licensing regulations to ensure that child care facilities encourage more healthful eating and physical activity. (Preventing Chronic Disease: Public Research, Practice and Policy 2009)

4. Lack of daily, quality physical activity in all schools - Most children and adolescents fall short of the 2008 physical activity guidelines for Americans recommendation of at least 60 minutes of aerobic physical activity each day, as only 18% of students in grades 9-12 met this recommendation in 2007.( U.S. Department of Health and Human Services, 2008)
5. Unsafe areas to play or be active - Many lower income communities are structured in a way that make it difficult or unsafe for children to go out and play. For some families, the act of getting to a public park by way of public transportation can be challenging. Also, because of these restrictions and safety factors, walking or biking to school plays a huge part in physical activity. Half of the children in the United States do not have a park, community center, and sidewalks in their neighborhood. Only 27 states have policies directing community-scale design. (Center for Disease Control and Prevention, State indicator Report on Physical activity, 2010)
6. Television and Media - Children 8-18 years of age spend an average of 7.5 hours a day using entertainment media, including TV, computers, video games, cell phones, and movies. Of those 7.5 hours, about 4.5 hours is dedicated to viewing TV. (A Kaiser Family Foundation Study, 2010). TV viewing is a contributing factor to childhood obesity because it may take away from the time children spend in physical activities. This could lead to increased energy intake through snacking and eating meals in front of the TV, which can also influence children to make unhealthy food choices through exposure to food advertisement, (Am J Public Health, 2010, Pediatric Clinic North America 2001)

### **Taking Action on Childhood Obesity:**

Parents as well as child givers can set great examples for the whole family by creating a healthy environment at home by incorporating 5 simple steps for healthier living and active play.

1. Keep fresh fruit in a bowl within your child's reach to grab as a quick snack.
2. Plan a menu for the week. Get the children involved in planning and cooking.
3. Take a walk with your family after dinner.
4. Turn off the TV during meals and share some family time.
5. Talk to Principal about organizing a school health team. (Let's move.org)



Healthy living and healthy eating are a collaborative effort that will take the efforts of parents, teachers and caregivers to take action. By incorporating good eating habits, physical play and nutritional education, we can point our youth in the right direction for a healthier lifestyle and eating habits, in which in turn, will create healthier adults.

### **In Conclusion:**

Preventing Childhood Obesity starts with a need for change. Here are some recommendations to affect positive changes in your city or community.

1. Incorporate health into local planning decisions.
  2. Increase access to parks and green spaces.
  3. Improve public access and safety in recreation areas.
  4. Develop collaborations with schools.
  5. Establish Safe Routes to School programs.
  6. Promote menu labeling and the availability of nutrition information to consumers.
  7. Increase the availability of healthy foods, including fruits and vegetables.
  8. Promote healthy eating in public facilities.
  9. Publicly recognize civic involvement and leadership.
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**YWCA Greater Los Angeles  
Healthy Eating Active Living Initiative  
Community Survey  
East Los Angeles**

Date: \_\_\_\_\_

**TELL US ABOUT YOURSELF**

Zip Code: \_\_\_\_\_ Gender:  F  M  Other

Age Group:  5 – 14  15 – 19  20 – 30  31 – 50  51 – 65  over 65

**HEALTHY EATING / NUTRITION**

1. How many nights a week do you eat cooked meals at home?

0-3 nights  3-5 nights  5-7 nights  No Nights

2. How often do you eat fast foods or processed (packaged) meals each week?

Every day  1-3 times  3-5 times  Never

3. Do you have access to healthy snacks and or beverages in your home, i.e., fruit, vegetables, nuts and juice - rather than junk food, i.e., chips, cookies, candy, ice cream and soda. (Choose One)

Yes  No  Sometimes  Never

4. The main reason I don't eat healthy is: (Check all that apply)

Lack of access to fresh fruits and vegetables  Not interested in healthy eating  
 Busy schedule/ lack of time  Not sure how to prepare healthy meals  
 Too expensive  I mainly eat cultural/traditional foods

5. What type of nutrition education would you like to see in your community? (Check all that apply)

Hands on Cooking Demonstrations  Creating Meal Plans  
 Eating Healthy on a Limited Budget  Grocery List Food Selection  
 Limiting Fat and Sugar  Reading Nutrition Labels

**PHYSICAL ACTIVITY**

6. How often do you engage in physical activity (play sports, do exercise)?

0-3 times a week  3-5 times a week  5-7 times a week  Never

7. The main reason I don't engage in physical activity is: (Check all that apply)

- |   |  |
|---|--|
| <input type="checkbox"/> Busy schedule/lack of time               | <input type="checkbox"/> Too expensive   |
| <input type="checkbox"/> Limited access to facilities and classes | <input type="checkbox"/> No interest     |
| <input type="checkbox"/> Don't want to exercise alone             | <input type="checkbox"/> Don't feel safe |

8. Chose the type of club below that would be of interest to you. (Check all that apply)

- |  |                                       |                                       |
|--|---------------------------------------|---------------------------------------|
| <input type="checkbox"/> Physical Fitness    | <input type="checkbox"/> Bicycle Club | <input type="checkbox"/> Walking Club |
| <input type="checkbox"/> Nutrition Education | <input type="checkbox"/> Cooking Club | <input type="checkbox"/> Other _____  |

9. When would be the best time for you and your family to participate in workshops/clubs? (Check all that apply)

- |   |                                     |                                   |
|---|-------------------------------------|-----------------------------------|
| <input type="checkbox"/> Early Mornings | <input type="checkbox"/> After-noon | <input type="checkbox"/> Weekdays |
| <input type="checkbox"/> Mid-Mornings   | <input type="checkbox"/> Evening    | <input type="checkbox"/> Weekends |

10. If free, safe and secure childcare were available, how often would you/your family participate in an exercise class such as: Zumba, Yoga, Aerobics, Modern Dance, Classical Dance, Cultural Dance?

- |                                   |   |   |                                |
|-----------------------------------|---|---|--------------------------------|
| <input type="checkbox"/> Everyday | <input type="checkbox"/> 1-3 times a week | <input type="checkbox"/> 3-5 times a week | <input type="checkbox"/> Never |
|-----------------------------------|---|---|--------------------------------|

11. If you had access to parks, open spaces or recreational facilities that offered free exercise programs, how often would you take advantage of the programs?

- |                                   |   |   |                                |
|-----------------------------------|---|---|--------------------------------|
| <input type="checkbox"/> Everyday | <input type="checkbox"/> 1-3 times a week | <input type="checkbox"/> 3-5 times a week | <input type="checkbox"/> Never |
|-----------------------------------|---|---|--------------------------------|

12. What type of physical activity workshops/classes would you like to see in your area? Rate from 1 to 6 with 1 being the most important.

- \_\_\_ Exercise Classes: Zumba, Yoga, Aerobics, Pilates etc.
- \_\_\_ Cultural Dances (Aztec Dancing, *Ballet Folklorico*, *Bailes Regionales*)
- \_\_\_ Aquatic Exercises (Water Aerobics)
- \_\_\_ Performing Arts (Dance, Movement, Theater)
- \_\_\_ Clubs for Walking, Jogging, Running
- \_\_\_ Sports Conditioning (Workouts, Drills & Clinics)

13. I prefer physical activity programs that are geared toward (Check all that apply)

- |                                   |                                  |   |
|-----------------------------------|----------------------------------|---|
| <input type="checkbox"/> Children | <input type="checkbox"/> Seniors | <input type="checkbox"/> Entire Family Unit |
| <input type="checkbox"/> Teens    | <input type="checkbox"/> Parents |   |

<b>LEVEL OF INTEREST</b>
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14. I am interested in learning more about how eating healthy and engaging in physical activity can affect my overall health and well being right now and in the future (Choose One)

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Very Interested | <input type="checkbox"/> Somewhat Interested | <input type="checkbox"/> Not Interested |
|--|--|---|

**YWCA Greater Los Angeles  
Healthy Eating Active Living Initiative  
Community Survey Results Table  
East Los Angeles**

Total Surveys Tallied: 102      Answer Key:      Top Choice      2nd Choice      3rd Choice

Question:	Multiple Choice Answers:	Answer Tally: Youth (Ages 5-19)	Answer Tally: Adults (Ages 20-65)	Answer Tally: Seniors (Ages 65+)	Community Total:
1. How many nights a week do you eat cooked meals at home?	0-3 nights	0	3	2	5
--	3-5 nights	7	22	5	34
--	5-7 nights	4	50	10	64
--	No nights	0	2	0	2
		--	--	--	--
2. How often do you eat fast foods or processed (packaged) meals each week?	Every day	1	2	1	3
--	1-3 times	10	53	12	75
--	3-5 times	0	17	1	18
--	Never	0	4	4	8
		--	--	--	--
3. Do you have access to healthy snacks and or beverages in your home, i.e., fruit, vegetables, nuts and juice - rather than junk food, i.e., chips, cookies, candy, ice cream and soda?	Yes	8	53	10	71
--	No	1	7	2	10
--	Sometimes	2	8	7	17
--	Never	0	9	0	9
--	--	--	--	--	--
4. The main reason I don't eat healthy is:	Lack of access fresh fruits and vegetables	0	11	3	13

Question:	Answers:	Youth	Adults	Seniors	Total:
--	Busy schedule/ lack of time	1	36	4	41
--	Too expensive	0	17	7	24
--	Not interested in healthy eating	2	5	0	7
--	Not sure how to prepare healthy meals	5	15	0	20
--	I mainly eat cultural foods	3	27	11	41
--	--	--	--	--	--
5. What type of nutritional education would you like to see in your community?	Hands on Cooking Demonstrations	6	29	8	43
--	Eating Healthy on a Limited budget	3	23	8	34
--	Limiting Fat and Sugar	3	36	13	52
--	Creating Meal Plans	3	28	4	35

Question:	Answers:	Youth	Adults	Seniors	Total:
--	Grocery List Food Selection	1	16	3	20
--	Reading Nutrition Labels	1	20	13	34
--	--	--	--	--	--
6. How often do you engage in physical activity?	0-3 times a week	3	23	5	31
--	3-5 times week	3	28	4	35
--	5-7 times a week	5	22	6	33
--	Never	0	4	3	7
--	--	--	--	--	--
7. The main reason I don't engage in physical activity is:	Busy schedule/ lack of time	3	17	5	25
--	Limited access to facilities and classes	1	12	4	17
--	Don't want to exercise alone	5	15	4	24
--	Too expensive	1	7	6	14
--	No interest	2	5	1	8
--	Don't feel safe	1	2	2	5



Question:	Answers:	Youth	Adults	Seniors	Total:
8. Choose the type of club that would be of interest to you:	Physical Fitness	7	59	13	79
--	Nutrition Education	2	32	14	48
--	Bicycle Club	2	22	7	31
--	Cooking Club	6	26	8	40
--	Walking club	2	20	5	27
--	Other	4 (Running, Dancing, Basketball)	4 (Family Activity, Zumba)	0	8
--	--	--	--	--	--
9. When would be the best time for you and your family to participate on workshops/ clubs?	Early Mornings	3	15	7	25
--	Mid-Mornings	3	4	3	10
--	After-noon	5	26	9	40
--	Evenings	2	20	1	23
--	Weekdays	4	14	2	20
--	Weekends	4	36	6	46
--	--	--	--	--	--
10. If free, safe and secure childcare were available, how often would you/ your family participate in an exercise class such as: Zumba, Yoga, Aerobics, Modern Dance, Classical Dance, Cultural Dance?	Everyday	1	16	3	20
--	1-3 times a week	6	25	13	44
--	3-5 times a week	3	25	6	34

Question:	Answers:	Youth	Adults	Seniors	Total:
--	Never	2	12	1	15
--	--	--	--	--	--
11. If you had access to parks, open spaces or recreational facilities that offered free exercise programs, how often would you take advantage of the programs?	Everyday	4	13	2	19
--	1-3 times	6	27	11	44
--	3-5 times	2	27	6	35
--	Never	0	11	0	11
--	--	--	--	--	--
12. What type of physical activity workshops/ classes would you like to see in your area?	Exercise Classes (Yoga, Zumba, etc)	5	51	13	69
--	Cultural Dances (Aztec Dancing, Ballet Folklorico, Bailes Regionales)	3	21	4	28
--	Aquatic Exercise Classes (Water Aerobics)	6	32	9	48
--	Performing Arts (Dance, Movement, Theater)	5	19	5	29
--	--	--	--	--	--
--	--	--	--	--	--

Question:	Answer:	Youth	Adults	Seniors	Total:
--	Clubs for Walking, Jogging, Running	4	29	9	42
--	Sports Conditioning (Workouts, Drills, Clinics)	10	34	6	60
--	--	--	--	--	--
13. I prefer physical activity programs that are geared toward:	Children	5	37	10	52
--	Teens	6	16	5	27
--	Seniors	0	7	3	10
--	Adults	1	19	7	27
--	Entire Family Unit	3	51	11	65
--	--	--	--	--	--
14. I am interested in learning more about how eating healthy and engaging in physical activity can affect my overall health and well-being right now and in the future:	Very Interested	5	53	11	69
--	Somewhat Interested	7	11	6	24
--	Not Interested	0	11	1	12

**Community Recommendations**  
**COMMUNITY SERVICE PLAN - EAST LOS ANGELES/UNION PACIFIC**  
**HEALTHY EATING ACTIVE LIVING Initiative**

Recommendations for Health & Wellness Programming	Recommended Population Served	Will Utilize Existing Staff & Available Resources for Program Implementation	Will Require MOU's, Resources or Funding to Sustain Program	Will Require MOU's, Resources or Funding to Implement Program
Healthy Eating Potlucks	<ul style="list-style-type: none"> <li>• Intergenerational</li> <li>• Entire Family Unit</li> </ul>	✓		
Nutrition Classes – Topics: <ul style="list-style-type: none"> <li>• Eating Healthy on a Limited Budget</li> <li>• Making Healthy Decisions</li> <li>• Menu Preparation</li> <li>• Nutrition Label Reading</li> <li>• Selecting Healthier Snacks</li> </ul>	<ul style="list-style-type: none"> <li>• Parents</li> <li>• Seniors</li> </ul>	✓		
Nutrition Classes – Topics: <ul style="list-style-type: none"> <li>• Making Healthy Decisions</li> <li>• Selecting Healthier Snacks</li> <li>• Nutrition Label Reading</li> </ul>	<ul style="list-style-type: none"> <li>• Children</li> <li>• Youth</li> </ul>	✓		
Nutrition Classes – For Teens by Teens	<ul style="list-style-type: none"> <li>• Youth</li> </ul>			✓
Nutrition Classes that utilize multi-media tools	<ul style="list-style-type: none"> <li>• Youth</li> </ul>	✓		
Demonstration Classes: <ul style="list-style-type: none"> <li>• Cooking Classes</li> <li>• Snack Preparation</li> </ul>	<ul style="list-style-type: none"> <li>• Youth</li> <li>• Parents</li> <li>• Seniors</li> </ul>		✓	
Demonstration Classes: Mommy & Me Cooking Class	<ul style="list-style-type: none"> <li>• Parents</li> <li>• Children</li> </ul>		✓	
Performing Arts: <ul style="list-style-type: none"> <li>• Theater/Drama</li> <li>• Dance/Movement</li> </ul>	<ul style="list-style-type: none"> <li>• Intergenerational</li> <li>• Entire Family Unit</li> </ul>			✓

Recommendations for Health & Wellness Programming	Recommended Population Served	Will Utilize Existing Staff & Available Resources for Program Implementation	Will Require MOU's, Resources or Funding to Sustain Program	Will Require MOU's, Resources or Funding to Implement Program
Visual Arts: • Arts & Crafts/Folk Art • Yoga	• Intergenerational • Entire Family Unit • Intergenerational • Entire Family Unit		✓	
• Zumba • Aerobics • Salsa • Merengue	• Parents • Seniors			✓
• Aquatic Exercise	• Intergenerational • Entire Family Unit			✓
Cultural Dance Classes: • Ballet <i>Folklorico</i> • Aztec Dancing • Regional Dances	• Youth • Parents • Seniors			✓
• Modern Dance • Classic Dance	• Youth • Parents • Seniors			✓
• Ballet • Tap Dance • Drill Team • Jazz Dance • Gymnastics	• Children • Youth • Children • Youth • Children • Youth			✓
• Rhythmic Gymnastics	• Children • Youth			✓
• Soccer	• Children • Youth			✓
• Basketball • Volleyball	• Children • Youth • Adults			✓
Sports Conditioning: • Workouts • Drills • Clinics	• Children • Youth			✓



Recommendations for Health & Wellness Programming	Recommended Population Served	Will Utilize Existing Staff & Available Resources for Program Implementation	Will Require MOU's, Resources or Funding to Sustain Program	Will Require MOU's, Resources or Funding to Implement Program
<ul style="list-style-type: none"> <li>Weight Training</li> </ul>	<ul style="list-style-type: none"> <li>Parent</li> <li>Youth</li> </ul>			✓
<ul style="list-style-type: none"> <li>Parenting Classes</li> </ul>	<ul style="list-style-type: none"> <li>Parents</li> </ul>			✓
<ul style="list-style-type: none"> <li>Meditation</li> </ul>	<ul style="list-style-type: none"> <li>Youth</li> <li>Parents</li> <li>Seniors</li> </ul>			✓
<ul style="list-style-type: none"> <li>Leadership Development</li> </ul>	<ul style="list-style-type: none"> <li>Youth</li> <li>Parents</li> <li>Seniors</li> </ul>			✓
<ul style="list-style-type: none"> <li>Volunteer Programs</li> </ul>	<ul style="list-style-type: none"> <li>Adults</li> <li>Seniors</li> </ul>	✓		
<ul style="list-style-type: none"> <li>Health &amp; Resource Fair</li> </ul>	<ul style="list-style-type: none"> <li>Intergenerational</li> <li>Entire Family Unit</li> </ul>			✓
<ul style="list-style-type: none"> <li>Support Groups/Clubs:</li> <li>Teens</li> <li>Parents</li> <li>Seniors</li> </ul>	<ul style="list-style-type: none"> <li>Youth</li> <li>Parents</li> <li>Seniors</li> </ul>			✓
<ul style="list-style-type: none"> <li>Community Garden Sharing</li> </ul>	<ul style="list-style-type: none"> <li>Intergenerational</li> <li>Entire Family Unit</li> </ul>			✓
<ul style="list-style-type: none"> <li>Community Beautification</li> </ul>	<ul style="list-style-type: none"> <li>Intergenerational</li> <li>Entire Family Unit</li> </ul>			✓
<ul style="list-style-type: none"> <li>Clubs:</li> <li>Gardening</li> <li>Walking</li> <li>Bicycle</li> <li>Cooking</li> </ul>	<ul style="list-style-type: none"> <li>Intergenerational</li> <li>Entire Family Unit</li> </ul>			✓
<ul style="list-style-type: none"> <li>Collaborate with Community Agencies &amp; Orgs.</li> </ul>	<ul style="list-style-type: none"> <li>Intergenerational</li> <li>Entire Family Unit</li> </ul>	✓		
<ul style="list-style-type: none"> <li>Field Trips:</li> <li>Farmers Market</li> <li>Nature Settings</li> </ul>	<ul style="list-style-type: none"> <li>Intergenerational</li> <li>Entire Family Unit</li> </ul>			✓



**East Los Angeles Community Service Plan - Implementation Timeline (Final Draft)**

Each of the five years of the CSP have been divided into three terms Phase I, Phase II and Phase III (see description below). Unless otherwise indicated each activity is meant to last for the duration of the five year Community Service Plan. Some activities will require additional resources or funding before implementation can begin. This has been indicated with notation in italics in the Time Line column.

- **Phase I:** First Year ~ 2014/2015
- **Phase II:** Second Year ~ 2015/2016 & Third Year ~ 2016/2017
- **Phase III:** Fourth Year ~ 2017/2018 & Fifth Year ~ 2018/2019

<b>Time Line:</b>	<b>Objective:</b>	<b>Target Population:</b>	<b>Implementation Action:</b>	<b>Desired Outcome:</b>	<b>Measurement Tool:</b>	<b>Party Responsible for Implementation:</b>
<b>Phase I</b>	Provide Nutrition Education (covering a number of topics)	-Children -Youth -Adults/Parents -Seniors -Center Staff All Populations	100 % of Center Staff integrate nutrition education instruction into work plans and curriculum	75% of Program Participants exhibit healthier behaviors and attitudes toward healthy eating	-Before and after surveys measure improvements in behaviors and attitudes	-Program Specialists -Child Development Teachers
<b>Phase I</b>	Coordinate Healthy Eating Potlucks	-Youth -Adults/Parents -Seniors	100% of all Nutrition Education Workshops include a Healthy Eating potluck at the culmination of each class	100% of Nutrition Education students participate in community engagement through a healthy eating potluck -	Potluck participant sign in sheet matches the names of students on class roster.	Program Specialists
<b>Phase I</b>	Create a Culture of Health & Wellness at YWCA UPEC across all programs	-Center Staff & Program Participants (all target populations)	100% of Center Staff integrate Health & Wellness (instruction, activities and events) into work plans and curriculum	100% of all programs offered integrate Healthy & Wellness instruction into programs, activities and events	-Center Program Calendars reflect Health & Wellness programming (instruction, activities, and events)	-Center Director -Site Director
<b>Phase I</b>	Implement Volunteer Programs (to provide assistance and support for Health & Wellness Programs)	-Adults/Parents -Seniors	Volunteer program is implemented at center	Volunteers are given an opportunity to utilize their skills and acquire new skills	Volunteer Applications, Agreements and Time Sheets	-Center Director

<b>Time Line:</b>	<b>Objective:</b>	<b>Target Population:</b>	<b>Implementation Action::</b>	<b>Desired Outcome:</b>	<b>Measurement Tool:</b>	<b>Party Responsible for Implementation:</b>
<b>Phase II</b>	Provide a variety of Light and Moderate Intensity Activities tailored to suit the population being served. -Stretching/Flexibility -Strength/Balance -Strength/Endurance	Children Youth Adults/Parents Seniors	100% of Center Staff integrate Light and Moderate Intensity Activities instruction into work plans and curriculum	75% of participants exhibit improvements in behaviors and attitudes toward physical activity	Before and after surveys measure improvements in behaviors and attitudes	-Program Specialists -Child Development Teachers
<b>Phase II</b> <i>*additional resources or funding required</i>	Provide Parent Education (Classes/Workshops)	-Adults/Parents -Seniors (Guardians)	Parent Education (Classes/Workshops) are offered on a quarterly basis	75% of Participants are able to apply acquired knowledge and skills six months after program completion	Periodic Assessments and interviews with program participants	-Center Director
<b>Phase II</b> <i>*additional resources or funding required</i>	Develop Community Engagement - Beautification - Field Trips	All Populations	100% of participants are given opportunity to participate in community engagement activities promoting physical fitness	70% of program participants and their families participate in community engagement activities promoting physical fitness	Registration form, sign in sheets and photos Document participation	-Center Director
<b>Phase II</b> <i>*additional resources or funding required</i>	Provide Visual Arts Instruction: <i>(to promote manual dexterity for populations with limited mobility)</i>	All Populations <i>(especially those with physical handicaps and limited mobility)</i>	100% of program participants are given opportunity to participate in visual arts programming on a quarterly basis	75% of program participants participate in visual arts programming when offered	Program schedules, calendars and sign in sheets reflect integration of visual arts programming	-Center Director -Site Director -Program Specialists
<b>Phase II</b> <i>*additional resources or funding required</i>	Provide a Health & Resource Fair	Children Youth Adults/Parents Seniors	100% of participants are given opportunity to participate in Health & Resource Fair	75% of program participants and their families participate in community art fair	Registration form, sign in sheets and photos Document participation	-Center Director
<b>Phase II</b> <i>*additional resources or funding required</i>	Children and families who attend local feeder schools to UPEC will engage in Safe Routes to School (SRTS)	Children Youth Adults/Parents	85% of children, youth, and their parents will engage in yearly SRTS activities	Marked decrease in pedestrian related accidents and incidents involving children and families around school	Interviews with school staff & periodic assessment of pedestrian related incident reports	-Center Director -Community Partners -Educational Partners

<b>Time Line:</b>	<b>Objective:</b>	<b>Target Population:</b>	<b>Implementation Action:</b>	<b>Desired Outcome:</b>	<b>Measurement Tool:</b>	<b>Party Responsible for Implementation:</b>
<b>Phase III</b> <i>*additional resources or funding required</i>	Providing a variety of Vigorous Intensity Physical Activities tailored to suit the population being served -Endurance/Aerobics	Children Youth Adults/Parents Seniors	100% of Center Staff Vigorous Intensity Activities instruction into work plans and curriculum	75% of participants exhibit improvements in behaviors, attitudes and towards physical activity	Before and after surveys measure improvements in behaviors and attitudes	-Program Specialists -Child Development Teachers
<b>Phase III</b> <i>*additional resources or funding required</i>	Launch a comprehensive initiative about Safe Routes to School (SRTS) at the center through education, incentives and encouragement activities.	Children Youth Adults/Parents	100% of youth program participants are given opportunity to engage in quarterly SRTS activities	75% of participants exhibit improvements in pedestrian safety knowledge and behaviors	-Staff are provided training and tools for instruction -Staff integrate SRTS instruction into curriculum	-Center Director -Site Director -Program Specialist
<b>Phase III</b> <i>*additional resources or funding required</i>	Provide Performing Arts & Dance Classes: -Theater/Drama -Movement -Cultural Dances -Regional Dances -Classic Dances -Modern Dances	Youth Adults/ Parents Seniors	100% of program participants are given opportunity to participate in performing arts programming on a quarterly basis	75% of program participants participate in performing arts programming when offered	Program schedules, calendars and sign in sheets reflect integration of performing arts programming	-Center Director -Program Specialists
<b>Phase III</b> <i>*additional resources or funding required</i>	Provide Sports/Clubs/Clinics -Walking -Gardening -Biking -Basketball -Soccer -Volleyball -Skate Parks	All Populations	Sports/clubs/clinics are offered on a quarterly basis through community collaborations partnerships	75% of Program participants exhibit improvement in skills and team building skills	Periodic Assessments and interviews with program participants	-Center Director
<b>Phase III</b> <i>*additional resources or funding required</i>	Provide Leadership Development	Youth Adults/ Parents Senior	Leadership Development opportunities are integrated into programs offered on a quarterly basis	75% of Leadership Development Participants are able to apply acquired knowledge and skills six months after program completion	Periodic Assessments and interviews with program participants	- Center Director - Site Director -Program Specialists



**HEAL Community Service Plan Budget – East Los Angeles/Union Pacific**

	% of Time	Phase I (Year I)	Phase II (Year 2 & 3)	Phase III (Year 4 & 5)	Overall Budget
<b>Personnel Costs</b>					
<b>Management</b>					
Program Specialist (Youth)	50%	15,600	15,600	15,600	
Program Specialist (Senior/Prevention)	50%	15,600	15,600	15,600	
Program Specialist (Health & Wellness/Parent Education)	100%	---	31,200	31,200	
Program Assistant (Evening)	50%	15,600	15,600	15,600	
Data Analyst	100%	24,960	24,960	24,960	
<b>Total Personnel Costs</b>		<b>71,760</b>	<b>102,960</b>	<b>102,960</b>	<b>277,680</b>
<b>Fringe Benefits</b>					
Unemployment Insurance, FICA, Worker's Compensation, Health Insurance, Dental Insurance, Life Insurance, Retirement/Pension	%	20,810	29,858	29,858	
<b>Total Cost Of Fringe Benefits</b>	<b>29.00%</b>	<b>20,810</b>	<b>29,858</b>	<b>29,858</b>	<b>80,526</b>
<b>Consultants</b>					
Certified Fitness Instructors (2 total)			54,600	54,600	
Visual Arts Instruction			15,000	15,000	
Parent Educators (2 total)			1,500	1,500	
Nutritionist		5,000	5,000	5,000	
Evaluator		2,500	2,500	2,500	
Translation Services		3,000	3,000	3,000	
Workshop Presenter Stipends		2,500	5,000	5,000	

### HEAL Community Service Plan Budget (Template)

	% of Time	Phase I (Year I)	Phase II (Year 2 & 3)	Phase III (Year 4 & 5)	Overall Budget
Childcare (Parent Education & Community Engagement)		33,000	65,550	65,550	
<b>Consultants Cost</b>		<b>46,000</b>	<b>152,150</b>	<b>152,150</b>	<b>350,300</b>
<b>Supplies</b>					
Office Supplies		2,500	2,500	2,500	
Participant Incentives		2,500	5,000	5,000	
Program Materials & Supplies		2,500	2,500	2,500	
Curriculum		5,000	5,000	5,000	
Nutritious Snacks (Program Participants)		2,400	4,800	4,800	
Nutritious Food & Beverages (Parent Education & Community Engagement)		1,500	2,500	2,500	
<b>Total Cost of Supplies</b>		<b>16,400</b>	<b>22,300</b>	<b>22,300</b>	<b>61,000</b>
<b>Promotional Materials</b>					
Printing		1,750	3,500	3,500	
Promotional Items		1,500	3,000	3,000	
Newspaper Advertisements		1,250	2,500	2,500	
Sponsorships/Event Booth Fees		750	1,500	1,500	
<b>Total Cost of Promotional Materials</b>		<b>5,250</b>	<b>10,500</b>	<b>10,500</b>	<b>26,250</b>

**HEAL Community Service Plan Budget (Template)**

	% of Time	Phase I (Year I)	Phase II (Year 2 & 3)	Phase III (Year 4 & 5)	Overall Budget
<b>Facilities &amp; Transportation Costs</b>					
Facilities Rental/Lease		9,187.50	18,375	18,375	
Bus/Van Rental/Driver			7,750	11,500	
Educational Outing Entrance Fees			2,500	5,000	
Mileage Reimbursements		1,250	2,500	2,500	
<b>Total Cost Of Facilities &amp; Transportation</b>		<b>10,437.5</b>	<b>31,125</b>	<b>37,375</b>	<b>78,937.5</b>
<b>Other</b>					
Finger Printing (staff & volunteers)		500	1,000	1,500	
Staff Training		2,500	5,000	5,000	
<b>Total Cost of Other</b>		<b>3,000</b>	<b>6,000</b>	<b>6,500</b>	<b>15,500</b>
<b>Total Direct Charges</b>		<b>173,657.50</b>	<b>354,893</b>	<b>361,643</b>	<b>890,193.50</b>
<b>Indirect Charges</b>	<b>10.00%</b>	<b>1,736.75</b>	<b>35,489.30</b>	<b>36,164.30</b>	<b>73,390.35</b>
<b>TOTALS</b>		<b>175,394.25</b>	<b>390,382.30</b>	<b>397,807.30</b>	<b>963,583.85</b>