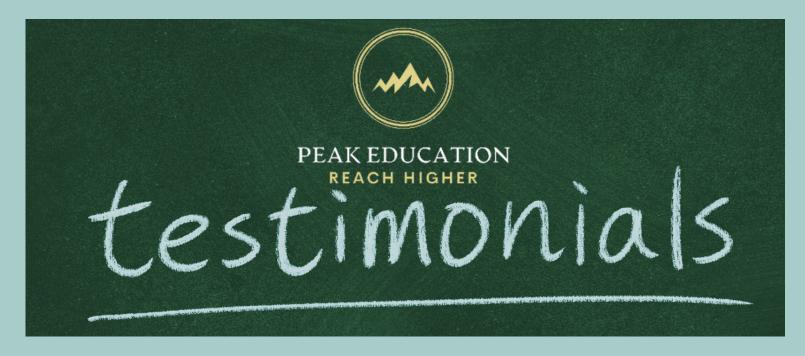


# PEAK EDUCATION REACH HIGHER

Community Health Needs Assessment



**Conducted by Highroots Wellness & Consulting** 



## "GETTING THE OPPORTUNITY TO GO TO YALE AND DISCOVER MY PASSION."

#### "PROVIDED ME WITH KNOWLEDGE FOR LIFE AFTER HIGH SCHOOL."

"I have been part of Peak Education since I was 12 years old. My time in the program has changed my life in the most wonderful way.

Aside from the countless hours of workshops and skill teaching, Peak Education also provided to me, at no cost:

-A full-length driver's education course through Masterdrive, STEM summer camps at UCCS, round-trip flights and tuition to attend an Economics for Leaders Summer Camp at Wake Forest University, scholarship money every single semester of college, a community mentor that helped me with college applications, learning to cook, and my FAFSA application.

The world is a better place because Peak Education exists."

"GAVE ME OPPORTUNITIES AND A PATH TO A 4-YEAR SCHOOL AND A GOOD MENTORSHIP." "PROVIDED A STABLE CONNECTION TO MY COMMUNITY."

## **"BROUGHT JOY INTO MY LIFE, KNOWING HOW MUCH THEY CARE FOR OUR CHILDREN AND COMMUNITY."**

## "IT'S GIVEN ME SOME SENSE OF PURPOSE IN MY LIFE AND LET'S ME USE MY SKILLS TO CONTRIBUTE TO THE GREATER GOOD."

"As an alumni of this program and some who is dedicated to the advancement of student education, specifically, black and brown students.

I couldn't count the numbers of ways this program has gone to improve the lives of the students and families they serve.

But here are just a few examples:

- Encourage participation in collegiate programming that gave me knowledge into what campus life could be like.
- Had classes dedicated to building resumes and learning what new scholarships were out there that I could apply for.
- Had loving and dedicated staff that knew not only me, but my brothers and sisters. Took time out to go the extra mile for me.
- Help sponsor trips through volunteer programs to get a broad spectrum of experiences.
- Partnered with elite schools in the area to find summer classes for students who wanted to continue to learn.

Peak Education, thank you."

## "I FEEL LIKE I AM MAKING A DIFFERENCE IN THE LIVES OF THE STUDENTS AND FAMILIES."

"MORE OPPORTUNITIES TO EXPLORE MY FUTURE AND PRESENT CHOICES."

### "I HAVE MORE UNDERSTANDING OF THE INEQUITIES THAT EXIST FOR STUDENTS OF COLOR."



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## **Executive Summary**

"Interventions that help children and adolescents do well in school and help families pay for college can have longterm health benefits.<sup>54</sup>"

-Healthy People 2030

*Health happens in communities.* The primary goal of this community health needs assessment is to showcase the vital link between the nonprofit organization Peak Education and its influence on the health and well-being of the Colorado Springs community. An increased focus on the nonprofit's assets aims to pinpoint avenues for community support and identify the specific needs of the population it serves. This approach allows a closer look at the impact of Peak Education's programs on their students and families, contributing to healthy and thriving lives in our community.

The assessment seeks to lay the foundation for promoting community health through collaborative efforts. Notably, Healthy People 2030, a national plan to improve the health of Americans, highlights five social determinants that impact our daily health. They include economic stability, education access and quality, neighborhood and built environment, social and community context, and health care access and quality.<sup>54</sup>

Highroots Wellness & Consulting strives to demonstrate how the organizations serving our communities do far more than meets the eye. Peak Education supports students with lower-income backgrounds from 7th grade through college. Higher education leads to safer high-paying jobs and healthier, longer lives.<sup>54</sup> These outcomes also lead to a decreased risk of chronic health issues such as depression, heart disease, diabetes, and cancer. The

economic benefits of higher education improve generational health and demonstrate why there are evidence-based recommendations for addressing health in communities through everyday settings.<sup>45</sup>

The collaboration of community-based organizations drives the ability to ensure everyone has equitable health outcomes. This aligns with the U.S. Department of Health and Human Services' proposed action plan to improve social determinants of health by supporting the coordination of health with social care services through community care hubs.<sup>53</sup>As an aspiring hub, Highroots Wellness & Consulting is growing to support a network of organizations that provide social services impacting health outcomes. The increasing reliance on the community to improve health outcomes will require infrastructural support that this organization is motivated to lead.

This thorough report on Peak Education delves into the demographic profiles of students, provides an intimate review of internal data and services, and examines the outcomes of interventions. Additionally, there is an analysis of populations throughout Colorado at the city, county, and state levels, including the city of Colorado Springs and El Paso County. El Paso County is the most populous county in Colorado, with Colorado Springs the largest and most populous municipality in El Paso County.<sup>19</sup> Also, data collected for the assessment includes national and regional areas of the United States of America for comparison and additional insight.

This information will inform the community of how health sustainability overlaps the daily interactions of individuals and the organizations that serve them. This foundational knowledge allows the community to come together to address the shifting economy and state of healthcare with a proactive plan supporting the organizations that help the community of Colorado Springs thrive.

## Acknowledgments

Highroots Wellness & Consulting would like to extend gratitude to the community partnerships and engagements that have allowed for the successful completion of this assessment. We especially thank Peak Education, Ebon Business Services, and Ponderosa Media for supporting the initial community health needs assessment conducted by Highroots Wellness & Consulting. We would also like to thank the many stakeholders including community members, organizations, institutions, and individuals from varying business sectors that have participated in discussions, brainstorming sessions, feedback, and partnership discussions. Your time to collaborate in our work is invaluable. We look forward to serving as a community care hub for Colorado Springs.

## Letter from the Executive Director, Jennaya Colóns

Community organizations allow us to thrive in a holistic sense of wellness. This work cannot and should not be done in silos. We are a system that must work together and start somewhere that makes sense. Education is a foundation necessary to increase access to optimal quality of life.



The quality of life of individuals has been at the center of my clinical career as a physical therapist assistant for nearly a decade. Highroots Wellness & Consulting was founded because of the countless stories individuals from the community have shared with me. These stories often reflect the challenges of everyday life that snowball into health issues with continued barriers to resource access. These situations are frustrating, without many tools to change the situation of so many.

Wanting to find a more preventative approach meant listening deeply to the specific experiences of people in their communities living their lives. It meant identifying the shortterm challenges people were experiencing before they turned into long-term catastrophes,

especially since social determinants of health impact fifty percent of our health. And then I found out there were organizations all around me already doing this work. We just needed a network to connect them with the direct purpose of improving long-term community health. Peak Education is one of those gems.

It became clear that it was important to find a way to impact the lives of others long before they were in the clinic at the hospital expressing their needs in navigating the complex and expensive health system, leaving me with little ability to change their situations. It had started to pile on; the weight from worry about patients' experiences, my own story of health disparities experienced by family members, watching the compounding effects of communities during COVID-19, and the death of George Floyd jolted me to find answers. And those answers led to the very faces in front of me. My community.

I love Colorado Springs; it is where I was born and raised. It has become very apparent on this journey that the city of Colorado Springs offers something uniquely special. Community organizations have a culture of wrapping their arms around their members to bridge the gaps caused by decreased access to resources for individuals with lower socioeconomic status in specific geographical areas. Organizations often provide resources such as income, food, housing, education, and social support when they see that their neighbors are in need.

Highroots Wellness & Consulting, a connection hub between healthcare organizations and social support systems, creates a bridge of trust and infrastructure that will decrease gaps in healthcare and the community. The board of directors possesses extensive experience as healthcare providers and equity advocates. As the executive director, I have a background as a clinician and an outreach liaison, and in November 2024 will complete a Master of Science in Health Education and Promotion with an emphasis on data analytics. Together, we are prepared to lead in this evolutionary process of community health.

Jennaya logons

## Methodology

Conducting this community health needs assessment included multiple steps to increase the accuracy of the information. Methods included bi-weekly meetings with leadership, reviewing data provided by Peak Education interviews, staff meeting participation, survey distribution, observations of events and activities, and reviewing their website and online platforms. This assessment was guided by personal interactions with staff, students, families, and community members. Discovering how the nonprofit organization operates toward its vision revealed invaluable stories and experiences.

In addition to the information collected firsthand, it was equally important to use data from federal agencies, state agencies, and peer-reviewed articles for support. Together, these data collection methods create a whole picture that captures the numbers and, most importantly, the stories of people. This amplifies community voices through the platforms of organizations that often impact them. Highroots Wellness & Consulting then analyzed the data, leading to insights for community collaboration.

## **Peak Education**

*Reach higher.* This is the motto of Peak Education, a 25-year-old nonprofit in Colorado Springs.<sup>36</sup>Peak Education is a pillar of the community, with a growing need to support lowincome graduates within local schools since they are less likely than their peers to enroll in college in the state and nationwide. The organization has identified that nearly 70% of all careers in Colorado following high school require college or post-secondary training, with only 43% of low-income high school graduates from Colorado Springs schools enrolling in these options. That is why they have continued a legacy holding avenues of opportunities for children from 7<sup>th</sup> grade through college.

In the United States, there is a decreasing trend of students in college by October of the same year they graduate high school. This number was 62% in 2022, down from 69% in 2018.<sup>54</sup> In Colorado, this number has dropped from 56.6% in 2018 to 49.9% in 2021.<sup>15</sup> Education is strongly connected to healthy behaviors and longevity in life. Peak Education understands that educational attainment plays an important role in health by shaping

opportunities, employment, and income, often impacted by race and socioeconomic status. In Colorado Springs, the city's school districts are shown to have a significant connection between race, socioeconomic status, and performance outcomes.<sup>30</sup>

When a student of color from a low-income background does not attend college, they fall further behind economically than their family members. For instance, a student of color from a low-income family earning at the 45<sup>th</sup> percentile will most likely earn in the 40<sup>th</sup> percentile if they do not earn at least a certificate.<sup>22</sup> First-generation children of color are shown to need the most support for college readiness.<sup>47</sup> Peak Education also recognizes that systemic racism in society's structures cascades and impacts White individuals with low socioeconomic status due to policies that do not favor their circumstances.

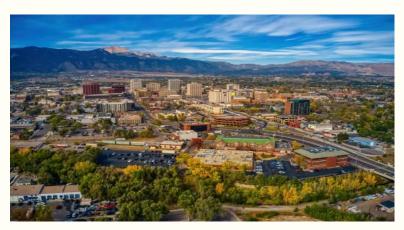
Peak Education's outcomes are outstanding; 100% of recent students graduated on time compared to approximately 80% of primary school partners. Additionally, 100% have gone onward to a post-secondary option, including one student entering military service, which is as high as 17-40% in partner schools. Peak Education's class of 2024 earned scholarships, and full tuition grants worth over \$1 million.

Peak Education has achieved these impactful achievements because the program is built on human connection and resilience. The foundation of this organization is the Four Peaks, which include Social Skills and Mental Health, Self-Advocacy & Life Skills, Post-Secondary & Career, and Community Engagement.<sup>36</sup> Students benefit from the Four Peaks of programming by gaining increased awareness of the world around them and being guided toward becoming responsible and successful citizens.

Peak Education builds a sense of community and inspiration. They require continued partnerships from the Colorado Springs community to continue to impact the students who benefit from their services. They have established a pathway through Innovate Pikes Peak in collaboration with the Colorado Springs Chamber & EDC, a career hub that connects educational pathways to industry.<sup>37</sup> This aligns with the Global Education Monitoring report, acknowledging that education policy should not be decided only by education but created through partnerships across agencies.<sup>46</sup>

## Demographics

Understanding the full picture of the community in which Peak Education provides services is needed to determine the organization's impact on the students and families in Colorado Springs. It also allows the assessment to identify specific



characteristics of the population that Peak Education targets and serves and compare them to the general population. This increased understanding will highlight trends seen in different groups in the city and optimize access to the most appropriate resources.

Population Demographic	Colorado <sup>50</sup>	El Paso County <sup>52</sup>	Colorado Springs <sup>51</sup>
Total Population	5,877,610	744,215	488,664
18 years and below	20.7%	22.8%	22.1%
65 years and above	16.0%	14.4%	14.3%
Males	50.6%	50.8%	50.2%
Females	49.4%	49.2%	49.8%
Non-Hispanic White	66.1%	82.3%	73.4%
Hispanic (any race)	22.7%	19.1%	18.5%
Two or more races	3.5%	5.4%	11.5%
Non-Hispanic Black	4.8%	7%	6.0%
Asian	3.8%	3.1%	3.1%
American Indian/Alaskan	1.7%	1.4%	1.1%
Native			
Native Hawaiian/ Pacific	0.2%	0.4%	0.3%
Islander			

#### Colorado, El Paso County, and Colorado Springs Demographic Characteristics

In El Paso County, 7.7% of White people live in poverty, compared to 15.9% Hispanic, 16% American Indians/Alaska Natives, 12.4% Black, 13.5% two or more races, and 15.7% other races.<sup>9</sup>

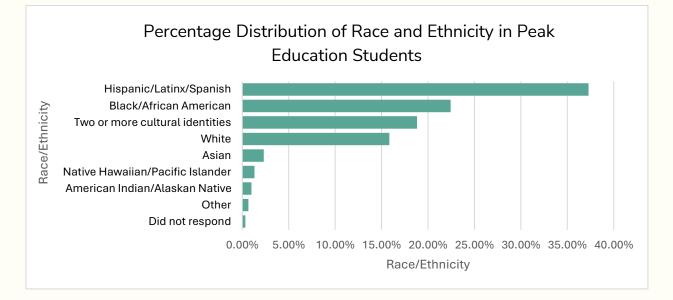
#### **Peak Education Demographics**

Internal data from Peak Education was used to analyze and chart the demographic characteristics of their students. 303 students were identified in Peak Education's enrollment system over 5 years identifying the students from high school graduation cohorts 2025-2029.

#### **Peak Education Enrollment**

Students Graduating High School 2025-2029

Race/Ethnicity	Number of Peak Ed Students	Percentage
Hispanic/Latinx/Spanish	113	37.29%
Black/African American	68	22.44%
Two or more cultural identities*	57	18.81%
White	48	15.84%
Asian	7	2.31%
Native Hawaiian/Pacific Islander	4	1.32%
American Indian/Alaskan Native	3	0.99%
Other	2	0.66%
Did not respond	1	0.33%
Total Students	303	100.00%



\*The category "Two or more cultural identities" includes students who reported more than one cultural identity, including individuals with Hispanic ethnicity combined with one or more races. It was used instead of the category "Hispanic (any race)" in the U.S. census. This is to emphasize an insight noted by a Peak Education senior director; there is a lack of connection that many Hispanic students at Peak Education have with the traditional U.S. race classification system, especially if their families have immigrated to this country. Students from the U.S. often report race in addition to their Hispanic ethnicity without pause, demonstrating the significance that race plays in American culture.

Gender	Number of Students	Percentage of Students
Female	165	54.46%
Male	126	41.58%
Non-Binary	7	2.31%
Did not respond	3	0.99%
Prefer not to say	2	0.66%
Number of Students	303	100.00%

#### Peak Education Students by Gender

#### Peak Education Families

Median Household Income Median of Yearly Income \$46,000.00

For comparison, the median household income in Colorado Springs is \$83,215.

#### Median Yearly Income for Most Common Groups Served

Race/Ethnicity	Median of Yearly Income	
Two or more cultural identities	\$	54,343
White	\$	51,358
Hispanic/Latinx/Spanish	\$	47,302
Black/African American	\$	43,771
Average Median Income	\$	48,654

A total of 78% of Peak Education students with high school graduation years 2025-2029 have reported their income. This assessment includes 235 of the 303 students served during this timeframe. Each year, Peak Education has been able to significantly increase the number of students who report each year.

In the cohort of students who will graduate in 2025, 7% reported income, 46% of 2026, 93% of 2028, and 100% of students that will graduate in 2029.

Nearly 66% of the students from Peak Education reside in one of five zip codes in Colorado Springs. The zip codes are 80916, 80910, 80906, 80909, and 80911. Similarly, 67% of students live in District 2 or District 11.

#### Most Common Zip Codes Served by Peak Education

Zip Code	Count of Zip Code
80916	28.38%
80910	17.16%
80906	9.24%
80909	7.26%
80911	3.63%
Total Students	65.57%

District	Percentage of Peak Ed Students
Harrison School District 2	38.10%
Colorado Springs Schools District 11	28.57%
Manitou Springs School District 14	9.52%
Widefield School District 3	9.52%
Academy District 20	4.76%
School District 49	4.76%
Cheyenne Mountain School District 12	4.76%
Total Students	100.00%

#### District Partnership and Student Enrollment

#### Schools served by Peak Education

Student Graduation Years 2025-2029

	School District	Number of
Colorado Springs School		Students Enrolled
Harrison High School	Harrison School District 2	65
Sierra High School	Harrison School District 2	30
Panorama Middle School	Harrison School District 2	22
Manitou Springs High School	Manitou Springs School District 14	21
Sand Creek International School	Harrison School District 2	20
Mountain Vista Community School	Harrison School District 2	19
Carmel Community School	Harrison School District 2	16
Palmer High School	Colorado Springs School District 11	15
Fox Meadow Middle School	Harrison School District 2	14
Mitchell High School	Colorado Springs School District 11	14
North Middle School	Colorado Springs School District 11	13
Mann Middle School	Colorado Springs School District 11	13
Sproul Jr. High	Widefield School District 3	10
Janitell Jr. High School	Widefield School District 3	10
Manitou Springs Middle School	Manitou Springs School District 14	9
Cheyenne Mountain High School	Cheyenne Mountain School District 12	3
Coronado High School	Colorado Springs School District 11	3
Sand Creek High School	School District 49	2
Rampart High School	Academy District 20	2
Civa Charter High School	Colorado Springs School District 11	1
Atlas Preparatory Academy	Harrison School District 2	1
Total Students		303

## Findings

Income level combined with the household numbers collected by Peak Education provided a deeper understanding of the financial challenge of each family. To understand the impact of income level on family needs, the Colorado Department of Public Health and Environment's federal poverty level calculator was utilized by Highroots Wellness and Consulting.<sup>12</sup> The poverty level is significant to understanding what resources households qualify for that will improve their quality of life.

The poverty level limits that determine the amount of need for each family are followed by the U.S. Census Bureau. Resources can usually be provided for families with an income of 250% of the poverty level (see Appendix A).

Around 87% of Peak Education family households have an income of 250% of the poverty level or below. Peak Education's access to this information allows the staff to accurately identify the needs of the students they serve and offer them access to resources.

#### **Peak Education Families**

% of Poverty Level

Median % of the Poverty Level139%

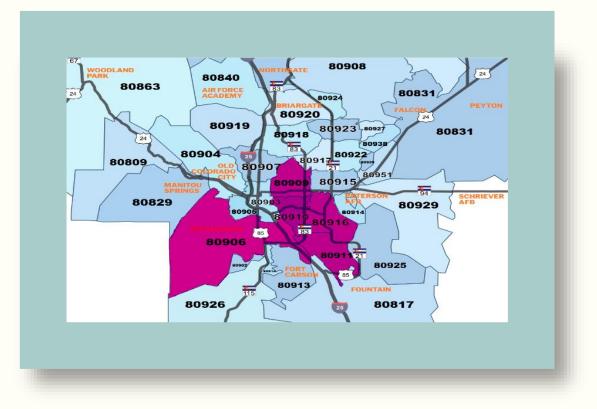
#### Median % of Poverty Level for Most Common Groups Served

Race/Ethnicity	Median % of Poverty Level	
Two or more cultural identities	158%	
White	153%	
Black/African American	137%	
Hispanic/Latinx/Spanish	118%	

#### **Finding the Gaps**

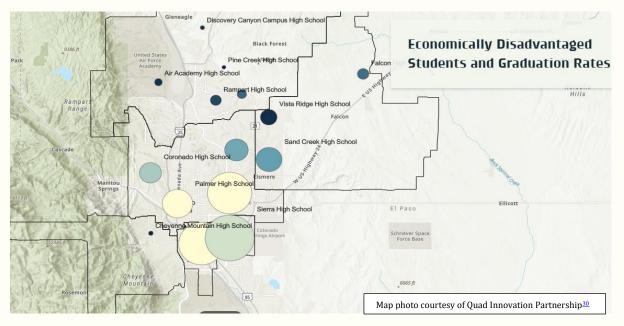
Living in poverty creates stress that can affect brain development and the ability to do well in school.<sup>54</sup> Education is necessary for students to gain access to problem-solving skills, regulation of emotions, and interaction with others for a productive life with a meaningful career.<sup>4</sup>

The southeast portion of Colorado Springs has a historical pattern of an increased population of people of color, decreased median income, housing availability, and health insurance coverage.<sup>28</sup> In Colorado, the median income of White families is 7.8x greater than that of Black families and 5.2x greater than that of Hispanic families.<sup>11,28</sup>



#### Most Common Zip Codes Served by Peak Education

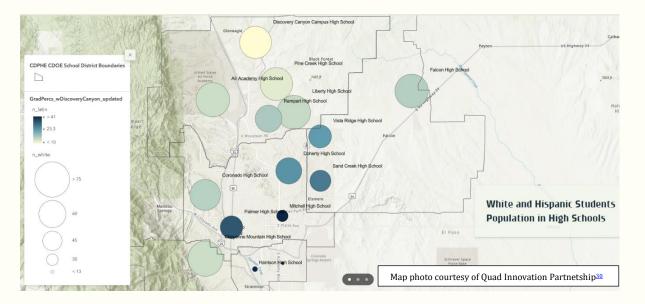
Above are the top five zip codes served by Peak Education, consisting of 67% of their student enrollment. The schools in the zip codes served by Peak Education have higher rates of economic disadvantage and lower graduation rates. The map below is from the Quad Innovation Partnership, a collaborative between Colorado College, Pikes Peak State College, the University of Colorado Colorado Springs, and the U.S. Air Force Academy.<sup>30</sup>

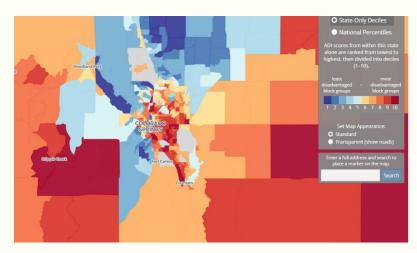


The school districts with the highest graduation rates between 2020-2021 were Cheyenne Mountain District 2, Air Academy District 20, and School District 49.<sup>30</sup> Districts with the lowest graduation rates were District 2 and District 11. In these districts, the highest number of Peak Education students are enrolled.

The high schools with the lowest graduation rates in District 2 are Sierra High School at 78%, and Harrison High School at 76%.<sup>30</sup> District 11 schools with the lowest rates are Mitchell High School at 58.6% and Palmer High School at 73.60%.

Colorado Springs also has a significant connection between the amount of White and Hispanic Populations and the graduation rates. The higher the amount of White and/or Hispanics identifying as White is correlated to significant differences in graduation rates.<sup>30</sup> Sierra High School, Harrison High School, Palmer High School, and Mitchell High School had the lowest enrollments of White students and the lowest graduation rates.





The southeast area of the city of Colorado Springs has areas ranked as 9-10, which describes areas that have high rates of economic disadvantage according to the Neighborhood Atlas.<sup>56</sup>

#### **Filling the Gaps**

Peak Education is the buffer to the outcomes and disparities seen in the numbers above. This nonprofit organization not only directly addresses the populations highlighted above but does so by participating in creative ways to accomplish this. All that they do is guided by the Four Peaks. Highroots Wellness & Consulting was able to participate in various observational opportunities to see these peaks in action.



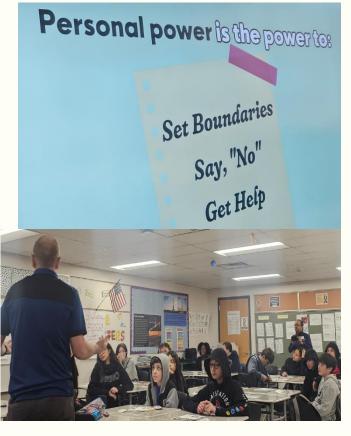
Pictured above are student leaders who serve as peer support mentors and are a part of the Student Family Advisory Council for Peak Education. These students have been successful with Peak Education's guidance, and they encourage younger students to remain engaged by sharing their experiences and knowledge.

Peak Education offers programming all year round to support their youth. The process begins with an interview at the end of 6<sup>th</sup> grade, where potential youth are chosen based on a whole picture of who they are. The child isn't chosen based on their grades; they are admitted into the program based on their story and potential to obtain success. The process starts when they are in 7<sup>th</sup> grade and will follow them through college graduation.

Once the youth are chosen to represent Peak Education, they are welcomed with a wonderful celebration. It is in this space that the expectations of this program are laid out. The students will participate in monthly meetings at their home school and be offered enrichment and volunteer opportunities outside of the classroom. Peak Education partners with other organizations in the community to provide access to different areas of knowledge. The topics of each monthly meeting are as follows:

September	Launch for Success
October	College Readiness
November	Career Integration
December	Networking and Communication
January	Financial Literacy
February	Self-Care and Mental Health
March	Looking Back, Looking Forward

One example of their monthly programming is a partnership with Education for a Lifetime called "Pursue". in which middle school students learn about the power of boundaries during February's meeting. At the end of the meeting, students were asked to identify situations they face at school, and whether they would identify the situation as unsafe, approaching a boundary limit, or healthy and safe (see Appendix B). All 15 students identified and appropriately rated the situation. This activity provided the tools needed to speak up in situations that do not align with the student's beliefs and values.



Throughout the year, the student's academic and extracurricular activities are closely followed, with mentorship guidance from staff and peer mentors to help youth remain on track. During the summer months, Peak Education's mission does not rest. Middle and high school students are invited to participate in Future Scholars Academy (FSA). In this week-long experience, Peak Education partnered with organizations including Catamount Institue, Rocky Mountain Field Institute, and the US Olympic Museum. Below is the list of organizations and activities in July 2024 for the middle school cohort.

Organization/Activity	Purpose
Catamount Institute	A nonprofit dedicated to developing ecological stewardship through education and adventure by connecting kids with the outdoors.
RMFI- Rocky Mountain Field Institute	An organization of stewards and guardians, passionate about caring for the public land we all love and engaging our community to protect it
Telling Your Story - Michelle Guinto, educator	Helping students understand the power of their experiences, and perspectives and connecting with the world around them.
US Olympic Museum	Home to the U.S. Olympic and Paralympic legacy, igniting dreams through athlete stories, and inspiring excellence in all served.
Ropes Course	Challenging outdoor personal development and team building activity.

In these spaces, the youth learned about nature, the world around them, and how to preserve trails and wildlife. The students were exposed to the power of using their stories to propel them to success and the impact of others' stories at the Olympic and Paralymic Museum. Additionally, they were able to participate in creative team-building and problem-solving. Peak Education also participated in a cultural enrichment experience infused with a good time at the Pikes Peak or Bust Rodeo. During these summer events, Peak Education college students who were home for the summer volunteered and provided mentorship.



#### The Peaks in Action

Peak Education focuses greatly on the impact of social connection in youth's lives to make them successful. Significant benefits are found in social wellness through activities including bonding with friends and family bonding. It also includes volunteering opportunities, peer mentor opportunities, and building social connections with organizations and individuals. These lifestyle benefits are shown to decrease chronic illness and improve life quality and longevity.<sup>41</sup>

Peak Education strives to ensure its programs are accessible to everyone, providing interpretation services in Spanish as needed. The staff also includes multiple staff members who speak Spanish.

Highroots Wellness & Consulting distributed a survey in three different settings. These settings included a staff meeting, a student-parent advisory council meeting, and the 2024 Back-to-School Kick-Off consisting of current Peak Education students and families. The Back-to-School survey was also offered in Spanish for accessibility.

#### The Question:

#### "What do you need in your life to make you happy and healthy?"

A total of 72 responses were received between the three groups.

54% of all respondents said they need some level of support, including friends, family, and/or community to be happy and healthy.

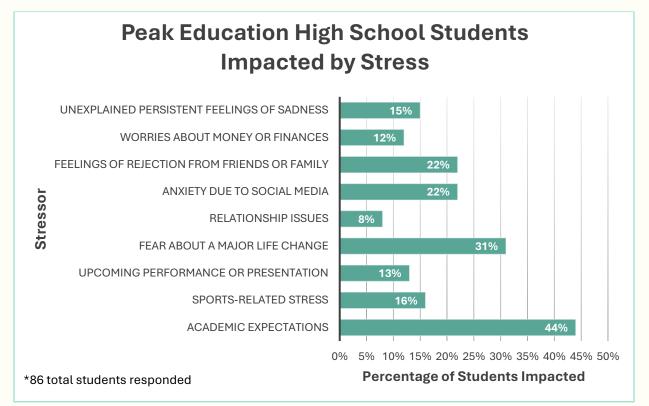
When broken down into groups this view on the importance of support was seen as:

36% among staff, 56% among the student parent advisory council, and 59% for parents and students at the 2024 Back-to-School Kick-Off.

In addition to the academic success achieved by Peak Education youth, Peak Education prioritizes mental and physical well-being. During a pre-collegiate survey distributed twice a year, mental wellness is assessed, and a question is presented about feelings of stress outside of everyday norms.

In that survey, 86 high school students answered. Forty-four percent of students reported stress due to academic expectations, demonstrating a need for support that Peak Education provides.

The interview also revealed that 15% of students reported unexplained feelings of sadness. This is significantly less than the 40% reported for high school students in El Paso County.<sup>13</sup> This may be a significant indicator of the benefit of support that Peak Education provides to the youth served.



### **Making an Impact**

All the impact steps that Peak Education has installed ultimately guide the student towards success in pursuing their career interest, which is also assessed in the pre-collegiate counseling questions provided by Peak Education. This assists with formulating a pathway to successful completion of post-secondary education.

At Peak Education, many students are currently interested in a healthcare career.

Current Top Career Interest at Peak Education	
Healthcare-Related Field	33%

33% of 86 Peak Education high school students are interested in healthcare-related fields.

The interest in different career fields was 17% for engineering/architecture, 15% for marketing/design, 13% for trade careers, and 12% for politics/law.

## **Priorities Based on Findings**

#### Supporting the Bigger Picture

"Interventions that help children and adolescents do well in school and help families pay for college can have long-term health benefits.<sup>54</sup>" It is apparent through various avenues that Peak Education addresses social determinants that improve the health of the community members they serve. Optimizing the role of Peak Education to improve community health is a goal that sets the standard for identifying the community as a "first line of defense" in health.

Peak Education supports improved health in many ways. This is significant since social environments influence 50% of health, and behaviors influence 30%.<sup>54</sup> Individuals with a higher level of education are more likely to obtain and understand basic health information and services to make health decisions.<sup>4</sup> They are also less likely to experience health risks including obesity and substance abuse.

The top priorities identified in this community health needs assessment are expanded community support of Peak Education, healthcare workforce development, and increasing capacity for social service coordination. Solutions include the development of a youth health ambassador program, addressing community health workforce demand through the Innovate Pikes Peak collaboration, and improving efficiency and access to community services through partnerships supported by a community hub. Focusing on these priorities will create undeniable benefits for the entire community in Colorado Springs.

#### **Keeping the Mission Going**

Peak Education must continue the impact work in their target communities, creating a ripple effect into the greater community. Enrichments activities are important in the districts served by Peak Education since these schools have the lowest amount of advanced placement (AP) course offerings, which is also connected to lower graduation rates (see Appendix C).<sup>30</sup> In addition to significantly impacting graduation rates, the unique student engagement provided by Peak Education demonstrates a connection to improved health outcomes.

Peak Education's drive to improve social support, mental wellness, building life skills, community engagement, and career building has turned into tangible outcomes. Their impact on mental health is especially inspiring, with their students expressing significantly fewer feelings of depression. This is valuable since there has been a significant increase in reported youth depression and risk of suicide, especially among young Black youth.<sup>2</sup>

Within the mission of the Four Peaks, Peak Education can increase health life skills around wellness, healthcare knowledge, and access. This can be possible by collaborating with their partnership districts and reviewing the newly published 2024 National Health and Physical Education Standards outlining the recommendations of health education for grades K-12.<sup>43</sup> Peak Education students will have the opportunity to lead the way in providing examples of healthy behaviors throughout districts in Colorado Springs.

Youth can apply the knowledge of responsible health behaviors through participation in a youth health ambassador program. Youth engaged in the program would participate in peer education to increase their responsibility for their health and others.<sup>42</sup> Furthermore, there is an opportunity for community health worker apprentice pathways that branch from the ambassador program, seen as a successful model funded by the Office of Minority Health in Fairfax County, Virginia to improve health literacy among residents.<sup>32</sup>

#### **Developing the Healthcare Workforce**

A leading strategy in health equity is the support of the growing workforce of community health workers(CHWs).<sup>8</sup> The workforce is growing at a 13% rate, much higher than the average of 4%.<sup>48</sup> Community health workers are frontline public health individuals with knowledge and trust established with the community residents.<sup>8</sup> This workforce is shown to decrease emergency visits, improve access to preventative care, decrease disease rates, and decrease medical costs. This is a necessary step due to the expected physician shortage by 2036.<sup>1</sup>

Peak Education is equipped to address workforce needs through partnership and collaboration, just as the organization did in a partnership with Colorado College to address the educator shortage.<sup>25</sup> Peak Education has up to 33% of youth interested in the healthcare field, an opportunity into entry-level CHW certificate programs that can advance to other

healthcare degrees provides a pathway for these students. Partnerships with regional programs and schools with current training pathways are available including the Patient Navigation and Community Health Worker Training Collaborative created by the Colorado Schools of Public Health and Metropolitan State University- Denver (MSU). <sup>31, 35</sup>



Community health workers help individuals

navigate the healthcare system and resources in the community. CHWs often share the same race, ethnicity, cultural background, neighborhood, or life experiences, leading to their effectiveness in improving health outcomes.<sup>18</sup> Their unique ability to address systemic issues is so impactful that the local health system, CommonSpirit Health offers a health equity grant to supports community health worker initiatives in community-based organizations.<sup>17</sup>

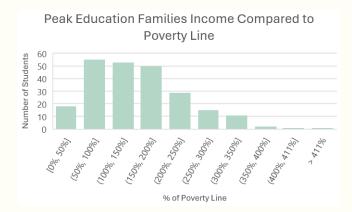
The exciting career opportunities in community health are options that can fulfill a need in Peak Education's student career interest and address the need to address health equity for education and healthcare. These training opportunities can be available for Peak Education students and their families due to varying pathways available based on previous experience and training. Peak Education can address workforce needs and increase access to quality healthcare. Additionally, expanding access to these areas in community health will assist other Peak Education students and families in navigating community resources.

#### **Coordinating Social Services**

Peak Education is in a trusted position with their families and have access to private information such as income. Information such as this serves a significant aspect of

coordinating social services for community members. Peak Education represents a population that would benefit from input on services and resources available (see Appendix A).

Income below 200% of the federal poverty level creates the greatest burden on life expectancy compared to other health risk factors.<sup>55</sup> Seventy-five percent of Peak Education students live in households with income below 200% of the federal poverty level. Ensuring students and families have access to knowledge of available resources will improve economic wellness for the families of Peak Education students.



Individuals with incomes 200% of the poverty line and below qualify for SNAP (Supplemental Nutrition Assistance Program) food benefits, allowing families to access healthy food options (see Table A2). Access to nutritious food is a social determinant.<sup>54</sup> Between 2014-2018, SNAP benefits lifted 93,000 people on average above the poverty line in Colorado, including 46,000 children.<sup>3</sup> Individuals need to know what social services they may qualify for to reduce the burden on their families

Sharing knowledge of these guidelines is significant since services like SNAP can be underutilized. In 2021, only 34.7% of eligible households in El Paso County were actively receiving their benefits, meaning the remaining 65.3% of households did not access benefits.<sup>49</sup> Peak Education's collaboration with social services throughout the city can mediate risk factors in the youth's life and bring awareness to structures and policies that have historically decreased access to resources.

## Conclusion

#### It's All Connected

*Health happens in communities.* Newly emerging models across the United States demonstrate the importance of creating partnerships with community organizations in addition to health systems, government entities, and community organizations.<sup>8</sup> These partnerships will benefit community health by improving capacity and outcomes. This is necessary since health circumstances and access to resources are more connected to the zip code in which one resides than any other factor.

The Environmental Protection Agency (EPA) Environmental Justice Screening Tool was used to highlight areas of disparities in Colorado Springs.<sup>23</sup> When concentrated in southeast Colorado Springs, the tool shows higher rates of people of color along with more food deserts, wastewater discharge, underground storage tanks, surrounding traffic, toxic releases in the air, and proximity to Risk Management Plan (RMP) facilities. Alarmingly, these areas are measured at 80% or higher compared to the national percentile, indicating increased risk in this area.

The environmental risk in the areas is seen alongside higher asthma rates and lower life expectancy.<sup>23</sup> There is a growing awareness of the impact of social conditions that affect the health of a community.<sup>8</sup> Highroots Wellness & Consulting also utilized the Hanlon Method to determine the priority health issues to be addressed in El Paso County<sup>33</sup> (see Appendix D). The top health issues include cancer, heart disease, and suicide, with higher rates for all in El Paso County than in the rest of the state.<sup>10</sup>

In El Paso County between 2020-2022, suicide was the leading cause of death for youth ages 11-17 years was suicide and the second leading cause for ages 18-24 years.<sup>20</sup> Colorado is the 6<sup>th</sup> leading state for suicide.<sup>5</sup> Hispanic and Black individuals commit suicide at 2-3 times the rate as the national rate, which is also increasing.<sup>6,11</sup> Organizations like Peak Education work to mitigate these risks, and more can be done.

This project intends to increase awareness of the various layers of society that shape individual and community health. These include public policy, community, organizations, social connections, and the individual (see Appendix E).

#### **Stronger Together**

The United States has the highest healthcare spending globally, the worst health outcomes, and the lowest life expectancy among the world's most developed countries. The costs are a result of high chronic disease rates, suicide rates, and hospitalizations for preventative causes.<sup>24</sup> Existing racial and ethnic disparities further compound this impact. The 2018 estimated economic cost and burden for ethnic and racial disparities was \$451 billion.<sup>29</sup> Additionally, education-related health disparities cost upward of \$978 billion that same year.

Social inequities lead to a health system that is expensive and lacks efficiency. The worst outcomes are observed among racial and ethnic populations but are also noted in wealthy White populations.<sup>21</sup> Increased diversity in healthcare increases trust among patients and improves care, which improves health outcomes for everyone.

Organizations with culturally diverse teams are 33% more likely to experience industryleading profitability.<sup>27</sup> This insight is derived from the observation that diverse groups can tackle multifaceted issues due to an increased understanding of different social classifications including race, ethnicity, religion, gender, sexual orientation, ability, economic status, etc. This in turn means that diverse and inclusive workforces increase innovation and problem-solving.<sup>7,38</sup>

Providers from various social and cultural backgrounds can improve interactions between providers and patients.<sup>44</sup> This interaction provides a learning opportunity for both individuals to improve skills for adapting to different communication styles, accepting other cultures and beliefs, and increasing empathy.<sup>26</sup> Unfortunately, as population demographics diversify, healthcare careers remain predominately White, especially among leadership and physician positions.<sup>44</sup>

In medical schools, 7.3% of students identify as Black, and 8.9% as Hispanic.<sup>44</sup> The number of medical school students is not representative of the population of Clack and Hispanic

populations in the US which are 14.1% and 17%. Peak Education is diversifying the workforce through the demographics it serves, a significant need to improve health for the entire Colorado Springs community.

#### The Future of Community Health

Peak Education is diligent in its mission to increase access to education among low-income racial and ethnic groups in Colorado Springs, leading to life-long success. Improving the health of youth shapes the current and future status of the community.<sup>40</sup> While they have made impactful differences in the lives of children for over 25 years, inequities in the community persist.

The healthcare system has been implicit in creating racial and ethnic inequities that exist and must now take appropriate steps to improve the current state.<sup>8</sup> This means leaning into the needs of community members by supporting a system in the community that improves navigation and health decisions. To accomplish this, increased partnerships must happen across health systems and communities to continue to support and grow Peak Education's mission.

The initial strategy for Peak Education should include establishing youth health ambassador programs based on the 2024 National Health and Physical Education Standards to increase life skills and workforce advancement. Opportunities to enter community health can progress to advanced degrees address demands in the healthcare workforce. Lastly, improving policy and infrastructure in connection with Peak Education will lead to improved navigation of resources. Intentional programming will support Peak Education's ability to increase post-secondary options for youth while reaching across community sectors to address social needs.

#### References

- Association of American Medical Colleges. New AAMC report shows continuing projected physician shortage. (2024, March 26). *AAMC*. <u>https://www.aamc.org/news/press-releases/new-aamc-report-shows-continuing-projected-physician-shortage</u>
- Akkas, F., & Corr, A. (2024, April 22). Black adolescent suicide rate reveals urgent need to address mental health care barriers. *The Pew Charitable Trusts.* <u>https://www.pewtrusts.org/en/research-and-analysis/articles/2024/04/22/black-adolescent-suicide-rate-reveals-urgent-need-to-address-mental-health-care-barriers</u>
- 3. Center on Budget and Policy Priorities. (2020). *Most SNAP participants in Colorado have incomes below the poverty line* [Report]. CBPP. https://www.cbpp.org/sites/default/files/atoms/files/snap\_factsheet\_colorado.pdf
- Centers for Disease Control and Prevention. (2023, May 26). *Health disparities*. U.S. Department for Health and Human Services. https://www.cdc.gov/healthyyouth/disparities/index.htm
- 5. Centers for Disease Control and Prevention. (2023, February 15). *Suicide mortality by state. national center for health statistics.* CDC. https://www.cdc.gov/nchs/pressroom/sosmap/suicide-mortality/suicide.htm
- Centers for Disease Control and Prevention; Curtin, S., Brown, K., Jordan, M. (2022 November). *Suicide rates for the three leading methods by race and ethnicity: United States,* 2000–2020. National Center for Health Statistics. https://www.cdc.gov/nchs/products/databriefs/db450.htm
- Chaudhry, I. S., Paquibut, R. Y., & Tunio, M. N. (2021). Do workforce diversity, inclusion practices, & organizational characteristics contribute to organizational innovation? Evidence from the U.A.E. *Cogent Business & Management*, 8(1). <u>https://doi.org/10.1080/23311975.2021.1947549</u>
- Chisolm, D. J., Dugan, J. A., Figueroa, J. F., Lane-Fall, M. B., Roby, D. H., Rodriguez, H. P., & Ortega, A. N. (2023). Improving health equity through health care systems research. *Health Services Research*, 58(S3), 289–299. <u>https://doi.org/10.1111/1475-6773.14192</u>
- 9. Colorado Department of Local Affairs. Community services block grant dashboard, El Paso County 2017-2021. DOLA. <u>https://gis.dola.colorado.gov/apps/CSBG/</u>
- 10. Colorado Department of Public Health and Environment. (2024). *Chronic Disease Data and Reports*. <u>https://cdphe.colorado.gov/chronicdisease</u>
- 11. Colorado Department of Public Health and Environment. (2024). *Colorado suicide statistics*. <u>https://cdphe.colorado.gov/colorado-suicide-statistics</u>
- 12. Colorado Department of Public Health and Environment. (2024). *Federal Poverty Level Calculator.* State of Colorado. <u>https://cdphe.colorado.gov/federal-poverty-level-</u> <u>calculator</u>

- 13. Colorado Department of Public Health and Environment. (2019). *Healthy kids Colorado survey data* (2019). <u>https://cdphe.colorado.gov/center-for-health-and-environmental-data/survey-research/healthy-kids-colorado-survey-data</u>
- 14. Colorado Department of Health and Environment. (2024). Income/poverty. <u>https://data-</u> <u>cdphe.opendata.arcgis.com/datasets/92d94a490fc44d8c9a4bf43151789345/explore</u>
- 15. Colorado Department of Public Health and Environment. (2024). *Pathways to Prosperity: Postsecondary access and Success for Colorado's high school graduates-Higher education*. <u>https://cdhe.colorado.gov/data-and-research/tools/data-</u> <u>tools/pathways-to-prosperity-postsecondary-access-and-success-for</u>
- 16. Colorado Environmental Public Health Tracking. (2024). *Explore our data*. Colorado Department of Public Health and Environment <u>https://coepht.colorado.gov/</u>
- 17. CommonSpirit Health. (2024). *Health Equity & Advancement Fund.* <u>https://www.mountain.commonspirit.org/community-impact/social-justice/health-equity-advancement-fund</u>
- Daniels, A. S., Bergeson, S., & Myrick, K. J. (2017). Defining peer roles and status among community health workers and peer support specialists in integrated systems of care. *Psychiatric Services*, 68(12), 1296–1298. <u>https://doi.org/10.1176/appi.ps.201600378</u>
- 19. El Paso County, Colorado. (2024). *Welcome to El Paso County.* https://www.elpasoco.com/
- 20. El Paso County. (2023). *El Paso County Coroner's Office 2023.* Report. <u>https://epc-assets.elpasoco.com/wp-content/uploads/sites/6/2023-Annual-Coroners-Report.pdf</u>
- 21. Emanuel, E. J., Gudbranson, E., Van Parys, J., Gørtz, M., Helgeland, J., & Skinner, J. (2021). Comparing health outcomes of privileged US citizens with those of average residents of other developed countries. *JAMA Internal Medicine*, 181(3), 339. <u>https://doi.org/10.1001/jamainternmed.2020.7484</u>
- 22. Emmons, W. R., & Ricketts, L. R. (2017). College is not enough: higher education does not eliminate racial and ethnic wealth gaps. *Review*, 99(1), 7–39. <u>https://doi.org/10.20955/r.2017.7-39</u>
- 23. Environmental Protection Agency. (2024) *Environmental justice screening and mapping tool*. <u>https://ejscreen.epa.gov/mapper/</u>
- 24. Ferdinand K Hui, Andrew Menard, Kimia Ghobadi, T.Y. Alvin Liu, & Phillip Phan. (2022). Is There a Market for Sustainable Healthcare? *Journal of Sustainable Marketing*, *3*(1), 4–16. https://doi.org/10.51300/jsm-2022-56
- 25. Gromko, Alexa. (2024, April 26). CC partners with Peak Education to address educator shortage. Colorado College. <u>https://www.coloradocollege.edu/newsevents/newsroom/2024/cc-partners-with-peakeducation-to-address-educator-shortage-in-workforce.html</u>

- 26. Howick, J., Palipana, D., Dambha-Miller, H., & Khunti, K. (2022). Turning diversity from a barrier to a facilitator of empathy in health care. *British Journal of General Practice*, 73(726), 24–25. <u>https://doi.org/10.3399/bjgp23x731613</u>
- 27. Hunt, V., Prince S., Dixon-Fyle, S., Yee, L. (2018 January). *McKinsey Reports: Delivering Through Diversity*. McKinsey & Company. <u>https://www.insurance.ca.gov/diversity/41-ISDGBD/GBDExternal/upload/McKinseyDeliverDiv201801-2.pdf</u>
- 28. Kaiser Permanente CHNA Data Platform. (2024). 2025 Community health data platform. Tableau Public. <u>https://public.tableau.com/app/profile/kp.chna.data.platform/viz/2025CommunityHealthdatap</u> latform-Measuredefinitionsmethodogy/DefinitionsMethodology
- 29. LaVeist, T. A., Pérez-Stable, E. J., Richard, P., Anderson, A., Isaac, L. A., Santiago, R., Okoh, C., Breen, N., Farhat, T., Assenov, A., & Gaskin, D. J. (2023). The economic burden of racial, ethnic, and educational health inequities in the US. *JAMA*, *329*(19), 1682-1692. doi:10.1001/jama.2023.5965
- 30. Lechini, J., Allen, G., Murphy, J., Moriarty, M., Thompson, A. (2022, April 15). *High School Performance in Colorado Springs*. Quad Innovative Alliance. <u>https://storymaps.arcgis.com/stories/3a5da31c4e434d5fa3a305dc0eb6d857</u>
- 31. Metropolitan State University. (2024, September 16). Community health worker course, community health worker training program. MSU Denver. <u>https://www.msudenver.edu/innovative-lifelong-learning/career-launchpad/community-health-worker/</u>
- 32. National Academies of Sciences, Engineering, and Medicine; Health and Medicine Division; Board on Population Health and Public Health Practice; Roundtable on Health Literacy; McHugh MK, Dixit N, Alper J, editors. Engaging Community Health Workers/Youth Ambassadors to Improve Health Literacy: Proceedings of a Workshop—in Brief. Washington (DC): National Academies Press (US); 2023 Jul 24. Available from: <u>https://www.ncbi.nlm.nih.gov/books/NBK593550/</u> doi: 10.17226/27146
- 33. National Association of County and City Health Officials. (n.d.) *Guide to prioritization techniques*. <u>NACCHO https://www.naccho.org/uploads/downloadable-resources/Gudie-to-</u> <u>Prioritization-Techniques.pdf</u>
- 34. Ozgen, C. (2021). The economics of diversity: Innovation, productivity and the labour market. *Journal of Economic Surveys*, *35*(4), 1168–1216. <u>https://doi.org/10.1111/joes.12433</u>
- 35. Patient Navigation and Community Health Worker Collaborative. (2024) *Community health worker training*. <u>https://patientnavigatortraining.org/</u>
- 36. Peak Education. (2023). About us. https://www.peakedu.org/about-us
- 37. Peak Education. (2024). *Innovate Pikes Peak*. <u>https://www.peakedu.org/innovatepp</u>
- Piggott, D. A., & Cariaga-Lo, L. (2019). Promoting inclusion, diversity, access, and equity through enhanced institutional culture and climate. *The Journal of Infectious Diseases*, 220(Supplement\_2), S74–S81. <u>https://doi.org/10.1093/infdis/jiz186</u>
- 39. Pikes Peak State College. Behavioral Health Program Options (pikespeak.edu)

- 40. Pulimeno, M., Piscitelli, P., Colazzo, S., Colao, A., & Miani, A. (2020). School as ideal setting to promote health and wellbeing among young people. *Health Promotion Perspectives*, *10*(4), 316–324. <u>https://doi.org/10.34172/hpp.2020.50</u>
- 41. Proctor, A. S., Barth, A., & Holt-Lunstad, J. (2023). A healthy lifestyle is a social lifestyle: The vital link between social connection and health outcomes. *Lifestyle Medicine*, *4*(4). <u>https://doi.org/10.1002/lim2.91</u>
- 42. Sarkhani, N., Pashaeypoor, S., & Negarandeh, R. (2021). Student Health Ambassadors: A New Program to Promote Health among the Adolescent. *International Journal of Community Based Nursing and Midwifery*, 9(1), 88–90. <u>https://doi.org/10.30476/ijcbnm.2020.46761</u>
- 43. Shape America. (2024). 2024 National standards for health and physical education. https://convention.shapeamerica.org/Convention/standards/default.aspx#:~:text=SH APE%20America%27s%20National%20Health%20Education%20Standards%20defin e%20what,develop%20or%20revise%20existing%20standards%2C%20frameworks% 20and%20curricula.
- 44. Stanford, F. C. (2020). The importance of diversity and inclusion in the healthcare workforce. *Journal of the National Medical Association*, *112*(3), 247–249. <u>https://doi.org/10.1016/j.jnma.2020.03.014</u>
- 45. The Community Guide. (2023, May 31) *Guide to community preventative services*. Centers for Disease Control and Prevention. <u>https://www.thecommunityguide.org/pages/about-community-guide.html</u>
- 46. United Nations Educational, Scientific and Cultural Organization. (2016). Creating sustainable futures for all. UNESCO. <u>https://uis.unesco.org/sites/default/files/documents/education-for-people-and-planet-creating-sustainable-futures-for-all-gemr-2016-en.pdf</u>
- 47. United Negro College Fund. (2024, May 1). *Education Inequality: K-12 Disparity Facts*. UNCF. <u>https://uncf.org/pages/k-12-disparity-facts-and-</u> <u>stats#:~:text=In%202015%2C%20the%20average%20reading,to%2032%20percent</u> <u>%20white%20students</u>.
- 48. United States Bureau of Labor Statistics. (2024 August 28). *Community Health Workers*. Occupational Outlook Handbook. <u>https://www.bls.gov/ooh/community-and-social-service/community-health-workers.htm</u>
- 49. United States Census Bureau (2023). American Community Survey, 2017-21. https://gis.dola.colorado.gov/apps/CSBG/
- 50. United States Census Bureau QuickFacts. (July 1, 2023). U.S. Census Bureau QuickFacts: Colorado. <u>https://www.census.gov/quickfacts/fact/table/C0/PST045222</u>
- 51. United States Census Bureau QuickFacts. (July 1, 2023). U.S. Census Bureau QuickFacts: Colorado Springs city, Colorado. <u>https://www.census.gov/quickfacts/fact/table/coloradospringscitycolorado/PST0452</u> 22

52. United States Census Bureau. (July 1, 2022). U.S. Census Bureau QuickFacts: El Paso County, Colorado.

https://www.census.gov/quickfacts/fact/table/elpasocountycolorado/PST045222

- 53. U.S. Department of Health and Human Services. (2023). Community care hubs: A promising model for health and social care coordination. In *HHS Strategic Approach to Addressing Social Determinants of Health to Advance Health Equity*. https://aspe.hhs.gov/sites/default/files/documents/5b8cba1351a99e904589f67648c 5832f/health-social-carep-coordination.pdf
- 54. U.S. Department of Health and Human Services. (2024). *Healthy People 2030*. HHS. https://health.gov/healthypeople/objectives-and-data/browse-objectives/educationaccess-and-quality
- 55. United States Department of Health and Human Services. *Programs that Use the Poverty Guidelines as a Part of Eligibility Determination*. HHS. <u>https://www.hhs.gov/answers/hhs-administrative/what-programs-use-the-poverty-guidelines/index.html</u>
- 56. University of Wisconsin-Madison. (2024). Neighborhood Atlas. https://www.neighborhoodatlas.medicine.wisc.edu/
- 57. Whitman, A., De Lew, N., Chappel, A., Aysola, V., Zuckerman, R., & Sommers, B. D. (2022). Addressing Social Determinants of Health: Examples of successful Evidence-Based Strategies and current federal efforts [Report]. <u>https://aspe.hhs.gov/sites/default/files/documents/e2b650cd64cf84aae8ff0fae7474af82/SDO</u> <u>H-Evidence-Review.pdf</u>

## Appendices

#### Appendix A

The following programs may be additional programs that Peak Education students and families can connect with if they are 250% or below the poverty line:<sup>9.16</sup>

- Medicaid
- Medicare Part D Low-Income Subsidies
- Children's Health Insurance Program
- Consolidated Health Centers (CHCs), including Federally Qualified Health Centers (FQHCs)
- Maternal and child health services
- Title X Family Planning Program
- Older Americans Act Nutrition Program
- Head Start
- Health professions student loans and scholarships
- Community Services Block Grant
- Social Services Block Grant (Including Transfers from TANF)
- Low-income Home Energy Assistance
- SNAP (Supplemental Nutrition Assistance program)

Below are examples of additional programs that individuals may qualify for.

#### Federal Poverty Line=FPL Program Eligibility

FPL= 100-185%	May be eligible for WIC (Women and Children under the age of 5)	
	May be eligible for family planning services, cardiovascular	
FPL= 0-250%	screening for women, and breast and cervical exams	

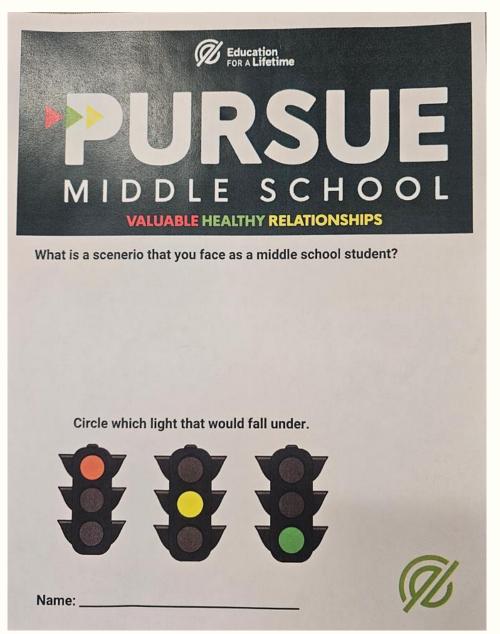
**Table A1**. Up to 44% of Peak Education mothers and guardians assigned female at birth may qualify for WIC if they have a child in the household under the age of 5. Up to 75% could qualify for health screenings

#### **SNAP Food Assistance Income Level Limits**

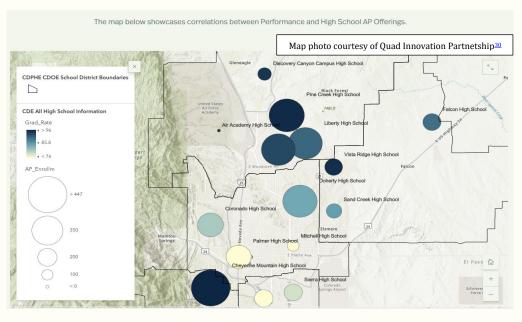
Household Size	Monthly Gross Income Limit	Monthly Maximum SNAP Benefit Amount
1	\$2,430	\$291
2	\$3,288	\$535
3	\$4,054	\$766
4	\$5,000	\$973
5	\$5,858	\$1,155

Table A2. A table of the max income limits for SNAP food assistance based on household size.

#### Appendix B



This is the handout that was provided at the end of the "Pursue" workshop by Education for a lifetime. Kids identified a scenario and then ranked whether it was a violation boundary.



Appendix C

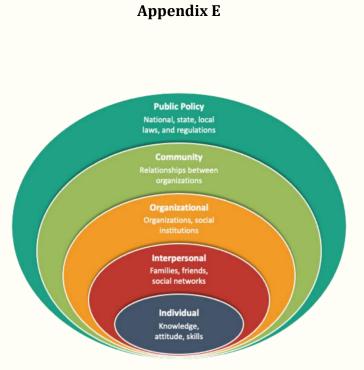
The map above depicts the number of schools with AP offerings and the correlation with higher school graduation rates.

#### Appendix D

Health Problem	Size (a)	Seriousness (b)	Effectiveness (c)	Priority Score (a+2b)c	Rank
Breast Cancer	13.9% (8)	Serious (8)	40-60% (5)	120	2
Cancer (All malignancies)	13.3% (7)	Serious (7)	40-60% (6)	126	1
Heart Disease	7.29% (5)	Serious (5)	60-80% (5)	75	3
Suicide	2.43% (6)	Relatively Serious (7)	5-20% (2)	40	4

#### **Hanlon Method Chart**

The Hanlon Method was used to calculate the ability to address the most prevalent health issues based on size, impact, and proven intervention benefits.



A socio-ecological model developed by Psychologist Urie Bronfenbrenner demonstrates the overlapping levels of individual outcomes and how they are influenced by society.

