## Contributing Partners

<table>
<thead>
<tr>
<th>Partner</th>
<th>Department/Office</th>
<th>Partner</th>
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<tbody>
<tr>
<td>Walter Rand Institute for Public Affairs, Rutgers University-Camden,</td>
<td>-Cumberland County Department of Health</td>
<td>Inspira Health Network</td>
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<tr>
<td>Facilitator</td>
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<tr>
<td>Atlantic Prevention Resources</td>
<td>-Cumberland County Department of Office on Aging and Disabled</td>
<td>New Jersey Health Initiatives</td>
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<tr>
<td>Bethany Grace Community Church</td>
<td>-Cumberland County Division of Homeless</td>
<td>The Parish of the Holy Cross</td>
</tr>
<tr>
<td>Bridgeton Public Schools</td>
<td>-Cumberland County Education Department</td>
<td>The Southwest Council, Inc.</td>
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<tr>
<td>Bridgeton Main Street</td>
<td>-Cumberland County Government</td>
<td>Revive South Jersey</td>
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<tr>
<td>Community Food Bank of New Jersey</td>
<td>-Cumberland County Human Services</td>
<td>United Advocacy Group</td>
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<tr>
<td>CompleteCare Health Network</td>
<td>-Cumberland County Prosecutor’s Office</td>
<td>The City of Bridgeton</td>
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<tr>
<td>Cooperative Extension of Atlantic County-Rutgers SNAP-Ed</td>
<td>-Gateway Community Action Partnership</td>
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<tr>
<td>Cumberland Cape Atlantic YMCA (Live Healthy Vineland)</td>
<td>-Greater Bridgeton Family Success Center</td>
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*A special thanks to the Robert Wood Johnson Foundation for your support.*
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I. Live Healthy Bridgeton Coalition: Building Bridges to Health and Wellness

The Live Healthy Bridgeton Coalition (LHBC) is a partnership of public, private, and nonprofit organizations focused on improving health outcomes for the residents of Bridgeton, NJ. The Coalition’s mission is to engage community partners in building a culture of health through policies, programs, and practices.

Over the last nine months, the Live Healthy Bridgeton Coalition worked diligently to develop a plan that will serve as a foundation to address health issues that have adversely affected the city and its residents for decades. The combined efforts of this diverse and dedicated group of stakeholders has culminated in the development of a living Blueprint for Action.
II. About the City of Bridgeton

The City of Bridgeton, incorporated in 1865, sits on the Cohansey River near the Delaware Bay. Bridgeton has a population of 25,031 and together with Vineland and Millville, NJ, form a Metropolitan Statistical Area. A little more than a quarter of Bridgeton’s population is under the age of 18. Only 7% of the population is 65 years and over, which is nearly half the percentage of Cumberland County and the state of New Jersey as a whole. The graph below displays the city of Bridgeton, Cumberland County, and the state of New Jersey’s population by age group.

![Graph showing population distribution by age group for Bridgeton City, Cumberland County, and New Jersey.]

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Bridgeton City</th>
<th>Cumberland County</th>
<th>New Jersey</th>
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<tr>
<td>Under 15 years</td>
<td>24%</td>
<td>20%</td>
<td>19%</td>
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<tr>
<td>18 years and over</td>
<td>73%</td>
<td>76%</td>
<td>77%</td>
</tr>
<tr>
<td>15 to 64 years old</td>
<td>69%</td>
<td>68%</td>
<td>67%</td>
</tr>
<tr>
<td>65 years and over</td>
<td>7%</td>
<td>13%</td>
<td>14%</td>
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</tbody>
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Bridgeton is one of only 44 majority-minority municipalities in the state of New Jersey. Hispanics and Latinos make up 43.6% of the population while Blacks and Whites make up 35.5% and 32.6%, respectively. The city of Bridgeton ranks first in Cumberland County in both population density (4102.5) and housing density (1,097.6).

Similar to a number of communities across the region, state, and country, Bridgeton has been adversely affected by deindustrialization and economic restructuring. The once thriving community whose industrial and commercial base was sustained by its intense agricultural production, education facilities such as the South Jersey Institute and West Jersey Academy, glass factories, sewing factories and metal and machine manufactures, has seen much of its industrial sector disappear. These departures have left a number of vacant buildings, yet remnants of a more prosperous community are evident when driving through the city’s historic district with its large Victorian homes and nationally recognized architecture.

The loss of major industries and failure to create or attract new industries over the last 40 years has left the city struggling in a number of socio-economic areas. Those areas -- including poverty, income, employment, and education -- are central determinants of health outcomes. The Live Healthy Bridgeton Coalition’s Blueprint for Action was developed to address key determinants of health outcomes including: health behaviors, social economic factors, and the physical environment.
III. The Process
Senator Walter Rand Institute for Public Affairs (WRI) facilitated a data centered, structured strategic planning process driven by the coalition partners’ level of commitment. The process the coalition undertook to develop the Blueprint for Action is described below:

Data Collected and Reviewed
- WRI developed a data book that included available health, demographic, and socio-economic data on the City of Bridgeton.
- Coalition members reviewed the data and shared their experiences working on the ground to address identified areas of concern as they relate to health outcomes.
- Based on their review of the data, the coalition identified health areas to focus: health behaviors, social economic factors, and the physical environment.

Subcommittees and SWOT Analysis
- Committees were developed for each impact area.
- Each committee completed a SWOT Analysis to determine the strengths, weaknesses, opportunities, and threats that exist within the systems responsible for addressing the health areas targeted by the Coalition.

Development of Implementation Actions and Goals
- The subcommittees identified goals, the resources, and the stakeholders required to reach short and long term goals related to health.
- The Subcommittees identified outcomes for each goal and activity.
IV. Social Economic Factors and the Physical Environment

The LHBC identified social economic factors and the physical environment as areas of focus in the Blueprint for Action. The two areas are closely linked because many citizens who struggle with socio-economic challenges also live in environments that increase the chances they will suffer from a number of different health ailments.

Social Economic Factors: Current Landscape

As mentioned earlier above, Bridgeton has struggled to rebound from the exodus of manufacturing jobs in the city and across the region. The loss of jobs has led to a number of social and economic challenges that have contributed to poor health outcomes. Similar to other predominately minority communities across the nation, Bridgeton has been disproportionately impacted by the effects of a weak economy.

Cumberland County ranks last in the state of New Jersey in social and economic factors based on the 2016 Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute’s County Health Rankings. The economic health of Bridgeton plays a central role in the ranking. Cumberland County and New Jersey as a whole disproportionately outperform Bridgeton in a number of social and economic indicators. The graphics below compares Bridgeton to Cumberland County and New Jersey on key economic indicators:
Bridgeton also struggles with education outcomes; roughly 4 out of 10 residents over the age of 25 do not have a high school diploma. Even though the high school graduation rate has increased from 2011 to 2014, the city’s rate is consistently and significantly lower than the State’s target. In the 2013-2014 school year, Bridgeton’s high school graduation rate was 69%; the State’s target is 78%. As the charts below show, the city’s crime rate far outpaces New Jersey’s in three categories.

**Social and Economic Factors: Actions for Improvement**

The Live Healthy Bridgeton Coalition completed a scan of the city’s workforce development resources. Additionally, the coalition wanted to ensure that residents of all ages would have access to employment opportunities. The group identified two outcomes to address social and economic factors adversely affecting the City of Bridgeton.
### Outcome #1 Increased access to workshops for individuals and families.
**Goal:** Provide workshops through existing community organizations/ resources to promote life skills, soft skills, home skills, financial literacy, etc.

<table>
<thead>
<tr>
<th>Program, Practice, or Policy</th>
<th>Strategies</th>
<th>Year 2 and 3 Outcomes</th>
<th>Partners Responsible for Implementation</th>
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<tbody>
<tr>
<td>Increase participation and access to programming provided by the Greater Bridgeton Family Success Center, specifically resume writing and job search skills.</td>
<td>- Involve community partners in marketing opportunities to citizens by setting up communication systems that better take advantage of social media and cellular communication. - Co-locate training opportunities throughout the city at churches and other community organizations.</td>
<td>- Have one training workshop per quarter at an organization or church across the city. - Increase the number of people attending resume writing and job search workshops provided by the Greater Bridgeton Family Success Center by 15% per year.</td>
<td>- Social and Economic and Physical Environment Committee - Gateway CAP - Cumberland County Center for Workforce &amp; Economic Development</td>
</tr>
<tr>
<td>Increase participation in life skills classes facilitated by Unidos Para La Familia (UPLF).</td>
<td>- Co-locate training opportunities throughout the city at churches and other community organizations.</td>
<td>A 15% increase in participation per year.</td>
<td>- UPLF - ReviveSJ - Father David Rivera</td>
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### Outcome #2 Increased youth skill development and employment programs.
**Goal:** Expand and develop partnerships to promote skill development and job readiness for youth across the city.

<table>
<thead>
<tr>
<th>Program, Practice, or Policy</th>
<th>Strategies</th>
<th>Year 2 and 3 Outcomes</th>
<th>Partners Responsible for Implementation</th>
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</thead>
<tbody>
<tr>
<td>Partner with Youth Summer Feeding Program to use it as an employment development experience for youth working in the program.</td>
<td>- Partially fund the Youth Summer Feeding Program.</td>
<td>- Year 2: Increase participation by 10%.</td>
<td>- Gateway CAP - Community Food Bank of NJ - Bridgeton School District - Faith-Based Community - Social and Economic and Physical Environment Committee - Valarie Hall, Bridgeton Commons</td>
</tr>
<tr>
<td>Form partnership with STEAMWorks and increase partnership.</td>
<td>- Increase the amount of makerspace programming. - Increase programing so that youth can be dropped off while caregivers are working and picked up at the end of the work day. - Partner with school district to increase youth interest in areas such as music production, computer programming and coding through presentations and brief introductions of opportunities during school time. - Review public transportation system to make sure youth can get to STEAMWorks’ facility. - Seek to co-locate services for parents in the building (e.g., health screenings, literacy programs, and so forth).</td>
<td>- Year 2: Increase participation in programming by 10% per year.</td>
<td>- Father David Rivera - Social and Economic and Physical Environment Committee - Mayor’s Office - Bridgeton School District - STEAMWorks - Cumberland County College</td>
</tr>
<tr>
<td>Employ teens in the PAL’s soccer league.</td>
<td>- Find funding to provide stipends for Junior, Seniors and College Freshmen and Sophomores to coach and mentor youth in soccer league.</td>
<td>- Year 2: identify funding sources. - Year 3: Fund at least 10 youth.</td>
<td>- Father David Rivera - Social and Economic and Physical Environment Committee - Dt. Thomas Gramp, Bridgeton PAL - Maria Perez, Bridgeton Main St.</td>
</tr>
</tbody>
</table>
The Physical Environment: Current Landscape and Actions for Improvement

Cumberland County ranks 19 out of the 21 counties in Physical Environment according to the County Health Rankings. Physical Environment rankings are based on air pollution-particulate matter, drinking water violations, severe housing problems, driving alone to work, and long commute-driving alone. The City of Bridgeton identified two outcomes related to the physical environment.

**Outcome #1** An increase in access to clean and safe green spaces and recreational facilities for residents of Bridgeton.

**Goal:** Through strategic partnerships, increase access to green spaces and recreational facilities.

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<tr>
<th>Program, Practice, or Policy</th>
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<th>Year 2 and 3 Outcomes</th>
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</table>
| Collaborate with the county to develop a more robust county park system in the municipality. | -Work with the Cumberland County Improvement Authority to provide safe and green spaces, utilizing a likely increase in tourism as an incentive. | -Year 3: An agreement with county on park plan.                                          | -Cumberland County Improvement Authority  
-City of Bridgeton Department Parks and Recreation  
-Identified Community Organizations  
-Social and Economic and Physical Environment Committee  
-WRI |
| Create more joint use agreements with the school district and other community organizations to increase the accessibility of green spaces and recreational facilities. | -Coalition will identify locations across the city, school-based and/or nonprofit facilities to utilize for family programming. | -Year 2: Preliminary agreement plan with at least 2 sites.  
-Year 3: Finalize agreement and programming plan. | -Bridgeton School District  
-City of Bridgeton Department Parks and Recreation  
-Identified Community Organizations  
-Social and Economic and Physical Environment Committee |
V. Health Behaviors

The LHBC reviewed data on health behaviors and clinical care and decided to combine the two areas into one committee. Strategically, the group determined that access played a central role in poor outcomes across both determinants of health.

Health Behaviors: Current Landscape

In reviewing the health behavior data, LHBC relied on data from the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute’s County Health Rankings. The data is at the county level, but given Bridgeton’s population (3rd most populated municipality and 17% of the County’s total population) and socio-economic status in compared to the rest of the county, Bridgeton substantially influences the county’s health outcomes data.

In 2016, Cumberland County ranked last in the region and state in Health Behaviors rankings. Cumberland County outpaces the region in determinants of health behaviors including adult smoking, obesity, and teen births.
Health Behaviors: Actions for Improvement

Central to the action plan developed by the LHBC to address health behaviors, is an increased effort in increasing access to programs and practices that will promote healthier diets, and increased opportunities for physical activities. Secondarily, the coalition wants to increase access to substance abuse treatment.

### Figure 12: Health Behaviors Rankings

<table>
<thead>
<tr>
<th>County</th>
<th>Atlantic</th>
<th>Burlington</th>
<th>Camden</th>
<th>Cape May</th>
<th>Cumberland</th>
<th>Gloucester</th>
<th>Ocean</th>
<th>Salem</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rankings</td>
<td>19</td>
<td>8</td>
<td>14</td>
<td>18</td>
<td>21</td>
<td>15</td>
<td>13</td>
<td>20</td>
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Health Behaviors rankings are based on the following variables: adult smoking, adult obesity, food environment index, physical inactivity, access to exercise opportunities, excessive drinking, alcohol-impaired driving deaths, sexually transmitted infections, and teen births.
### Outcome #1: An increased access to healthy food and health and wellness information.
**Goal:** Through strategic partnerships, increase access to healthy food and information regarding health and wellness.

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<thead>
<tr>
<th>Program, Practice, or Policy</th>
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| Expand the Healthy Corner Store Initiative, in terms of locations and programming. | -Increase the number of stores the initiative is operating in by further increasing incentives.  
-Partner with health organizations to provide health screenings at corner stores that participate in the initiative. Provide incentives for corner stores by reaching out to businesses like Home Depot and Lowes to receive donations for store shelving. Provide incentives for families to get health screenings by providing discounts at corner stores.  
-Use corner stores to provide families with information on Deterra bags and gun locks. | -Year 2: Increase participation in the Healthy Corner Store Initiative by 5 stores.  
-Year 2: Finalize partnership agreement with a health organization to provide health screenings at sites.  
-Year 2: Obtain funding to provide stores incentives. | -Health Behaviors Committee  
-Lisa Scheetz, YMCA  
-Live Healthy Vineland  
-Identified Corner Stores  
-Cumberland County Chamber of Commerce |
| Increase partnerships with Community Garden Initiative. | -The Community Garden Initiative (Revive South Jersey), having recently received additional funding, will work with the LHBC to increase the reach of its Garden to Table Program.  
-The initiative will also forge a relationship with the school district for healthy eating programming.  
-The program will also employ youth to work in the gardens. | -Year 2: Double the amount of families served.  
-Year 2: Finalize partnership with schools. | -Health Behaviors Committee  
-Jon Cummings, ReviveSJ  
-Warren DeShields, Bridgeton School District  
-Marcus Weaver, Mill Creek Urban Farm |
| Develop a new Walkability and Bikeability plan. | -Develop a plan that connects all the city parks with the City Park, Zoo, and Water Park through the use of bikes and walking paths. | -Year 2: Identify funding for plan.  
-Year 3: Begin to develop plan. | -Health Behaviors Committee  
-NJ Department of Community Affairs  
-Mayor’s Office  
-Social and Economic and Physical Environment Committee  
-County Government  
-Identified Environmental Advocacy Group  
-WRI |
| Increase the number of residents utilizing the YMCA’s Diabetes Prevention Program. | -Provide information at partner events. | -Year 2 and 3: Increase participation by 10% per year. | -Health Behaviors Committee  
-Lisa Scheetz, YMCA  
-Inspira Health Network  
-CompleteCare Health Network |
**Outcome #2: Development of comprehensive School Wellness Program and increased participation in Workplace Wellness Program.**

**Goal:** Facilitate planning to develop comprehensive School Wellness Program and increase participation in Workplace Wellness Program provided by Cumberland County Department of Health

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</thead>
</table>
| Recruit businesses to implement Workplace Wellness Program. | -Recruit staff and leadership from businesses in which program currently operates to recruit fellow businesses to participate in the Wellness Program.  
-Have the City of Bridgeton champion workplace wellness by increasing programming for city workers. | -Year 2: Increase the number of sites implementing the Workplace Wellness Program by 10 sites per year. | -Jessica Atkinson, Cumberland County Department of Health  
-Health Behaviors Committee  
-City of Bridgeton Government  
-Identified Businesses |

The coalition will work with community partners and the school district to develop and implement a more comprehensive School Wellness Program.

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</tr>
</thead>
</table>
| Increase smoking age in the city. | -Organize community campaign to gain traction. | Year 3: City ordinance passed. | -Health Behaviors Committee  
-Kim Burns, Atlantic Prevention Resources  
-City of Bridgeton Government |

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</thead>
</table>
| Increase showings for Hidden in Plain Sight Program. | -Collaborate with school district to include as part of school day programming. | Year 2 and 3: Sponsor four showings per year. | -Health Behaviors Committee  
-The Southwest Council, Inc. |

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| Increase early educational opportunities regarding substance abuse and tobacco prevention. | -Facilitate a collaboration between The Southwest Council, Inc. and the Atlantic Prevention Resources to provide brief presentation and programming during the school day. (during lunch or health periods)  
-Increase the use of free anti-tobacco signage. | -Year 2: Formulate a partnership with the school district.  
-Year 2 and 3: Utilize anti-tobacco signage on at least 15 public properties per year. | -Health Behaviors Committee  
-Kim Burns, Atlantic Prevention Resources  
-Mike Reginelli and Ashley Mallon, The Southwest Council, Inc.  
-Mayor’s Office |
VI. Youth Committee

The LHBC’s Youth Subcommittee formed late in the process and identified goals for the second year of the grant, which it will continue to develop. Below are brief goal descriptions:

- Increase after-school and summer activities at the library, churches, and the Alms Center from 3pm to 6pm on school days and all day during the summer months.
- Promote college readiness activities and dual enrollment programs by partnering with Cumberland County College.
- Increase youth employment opportunities by increasing partnerships with local and regional businesses such as Wawa.
- Hold a yearly Health Expo/Youth Summit focused on educating youth about substance abuse, healthy living, employment, and educational opportunities.
- Create a calendar of available activities for youth.
VII. Other Policies, Programs, and Practices
There are a number of ideas and strategies the coalition discussed that warrant further discussion and consideration, including:

- Increase access to City Park, Zoo and Water Park, specifically make sure there is public transportation that services the attractions.
- Increase partnerships between organizations throughout the city to improve communication related to events and services.
- Identify a source for sharing information, for example, media outlets, social media and cellular options. (possibly look into the Dodge Foundation funding a media project or program)
- Collaborate with local businesses to further increase health initiatives such as ensuring that all restaurant menus have nutritional information readily available for customers.
- Implement a Healthy Living Card Program that provide residents with a card that tracks participation in healthy events and rewards participation with discount coupons at local stores.
VIII. Community Outreach

Overview of Year 1’s Efforts

The Walter Rand Institute (WRI) convened stakeholders from the public, private, and nonprofit sectors, augmenting the number of coalition members identified in the initial proposal, for the purpose of strategically planning and implementing practices, programs, and policies that will holistically address health issues in the City of Bridgeton over the next several years.

Steering committee members worked with WRI to identify gaps in representation within the coalition. Coalition members continue to ensure that all relevant stakeholders needed to both plan and implement the practices, programs, and policies to improve health in the county are at the table and engaged in the process. WRI and coalition members will be working to increase coalition membership to include community members ranging from youth to seniors as well as elected officials.

Results from Live Healthy Bridgeton Coalition Community Survey

WRI in partnership with coalition members developed a survey to obtain feedback from the community. The survey asked questions about the areas of health that residents feel need the most improvement in the City of Bridgeton. The majority of the surveys were administered using pen and paper; several were also completed via Qualtrics, an online survey tool. On average, the surveys took 10 minutes. Sixty-seven residents completed the survey.

Nearly 60% of the residents stated that access to fresh and healthy foods was the most important need concerning health for city residents. And that number increases to 79% when participants were asked what was their most pressing personal health focused need. Nearly 50% of residents said that they would be interested in attending exercise classes and/or healthy lifestyle courses if offered in the City of Bridgeton. Two-thirds of respondents stated that their income was their biggest obstacle to making healthy choices.

Community Survey Results Regarding Summer Feeding

The focus of this survey was to assess the needs of the community and their interest in participating in and utilizing a food distribution program. Stated alternatively, we aimed to garner feedback on the various programmatic selections (i.e., chosen by the stakeholders in step one). The overarching purpose was to determine if members of the Bridgeton community are interested in and will utilize the different programmatic models selected. WRI developed a survey for adults, in English and Spanish, and youth in the community to glean their thoughts and opinions about summer feeding and access to food during the summer months. The majority of the surveys were administered using pen and paper; several were also completed via Qualtrics, an online survey program. The average completion time for the survey was five minutes.

We worked with several key partners to identify appropriate sites to administer the survey. Partners enlisted to support the effort were: Bridgeton Commons, Food Pantry (Gateway CAP), Unidos Para la
Familia (United for Families), Parish of the Holy Cross, Bridgeton Main Street, Bridgeton Family Success Center, and Head Start. In an attempt to reach the Hispanic community, we worked with Jon Cummings at Unidos Para la Familia and Father David Rivera at the Parish of the Holy Cross. In total, 150 parents completed the survey and 47 youth filled out the survey.

**Summary of Parent Survey Responses**

Most of the children (84%) receive free lunch during the school year and that because of the cost it is difficult for parents to provide food for their children during the summer. When school is out they need to provide three meals and snacks every day. This is a hardship for many parents and several shared that “sometimes the healthy option isn’t always the cheapest option.” Nearly 45% of the parents surveyed stated that every day of the week during the summer months they worry about having to provide breakfast, lunch, and dinner for their children. Parents worry about their children eating nutritious and healthy foods. Please see below for selected excerpts from our respondents.

“As a single dad raising my 2 kids is hard. I really need more help in the summer as I am also working.”

“It’s harder in the summer. The kids are at home all day eating up everything. We should be able to get more food stamps.”

“It’s hardest in the summertime because they are home all day.”

“My children receive free breakfast and lunch at school and during the summer I am providing 3 meals a day plus snacks 7 days a week. Food costs are high. I struggle during the school year and it is harder in the summer.”

“My food does not last me a month in the summer. We need other resources for our neighborhood.”

Results also identify safety and transportation concerns as the primary reasons surveyed parents did not utilize the summer feeding program last year. Forty-three percent of parents responded that they did not feel their children were safe walking to the meal site. One parent took the time to share that “It’s so dangerous around here at times I think that they need a site in the neighborhoods. Some kids don’t have anyone to escort them to the office every day.” Another parent echoed this sentiment by writing that “It is so dangerous out here. I don’t trust my three kids walking all the way to the office for the program.” And last but not least, one mother told us “It is not safe in my hood. Too much violence. Gotta think of my kids’ safety.”
Summary of Youth Survey Responses

Several of the youth shared that they have a desire for good food (such as a hot meal every once in a while) and a lack of awareness that food is available to them at no cost. Youth responded that they did not feel safe traveling to the meal sites. Additionally, slightly more than one in five respondents stated that the meal sites were too far from their home and they could not get to the meal site. Just over half said that they did not like the food being served and nearly 25% of those surveyed said it is boring because there is nothing to do besides eating the meal. To the right are some suggestions from our youth respondents, ranging from adding activities to incentives for families to participate.

Next Steps

WRI and coalition members will be working to increase coalition membership to include community members ranging from youth to seniors as well as elected officials. The Live Healthy Bridgeton Coalition will maintain its effective communication strategy in order to further the aims of the initiative. A contact list and calendar of meeting dates will receive periodic updates and be shared with members to ensure that coalition representatives are well informed of the status of the coalition’s goals and deliverables. Also, these meeting dates, times, and locations will be shared with the community to solicit membership from residents.

An effective external communication strategy will be created and implemented starting in year two. For instance, coalition members will modify a one-page fact sheet to communicate clearly and succinctly to the local community the details and aims of this coalition. Each partner within the coalition will distribute this document to their network of clients, consumers, and professional contacts. The fact sheet will include a brief overview of the data that drove the development of the Blueprint for Action.

In addition, the Live Healthy Bridgeton Coalition has an active presence on social media particularly on Facebook and Twitter. These tools are utilized to not only share information with Coalition members, but also with the community-at-large about upcoming meetings and events. In year two, social media tools will assist in highlighting the Coalition’s successes and partners in the community that assist with fulfilling the objectives of the Coalition.

To help further the engagement and involvement of community members who may not be able to commit to attending meetings on a regular basis, the Coalition will hold at least two focus groups or
two town hall type meetings each year. The purpose of these meetings will be to review the status of the Coalition’s efforts and secure input and buy-in from community residents.

In years three and four, the coalition would like to implement the Agency for Healthcare Research and Quality (AHRQ) Health Literacy Measurement Tool. Health literacy is the degree to which individuals have the capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions. The AHRQ tools can be utilized in various contexts such as for research, programmatic planning, and training. Based on the findings of the Health Literacy Measurement, community organizations and churches will be encouraged to sponsor workshops and training in the needed health literacy areas.

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IX. Coalition Structure

Committees

- **Social and Economic Factors and Physical Environment**
  Charge: To implement plans related to Social and Economic Factors and Physical Environment section of the Blueprint for Action.

- **Health Behaviors**
  Charge: To implement plans related to the Health Behaviors section of the Blueprint for Action.

- **Youth**
  Charge: To implement plans related to the Youth section of the Blueprint for Action.

- **Gateway GAP, Lead Agency**
  Charge: The lead agency is the fiduciary responsible for the grant and will work with the facilitator to set agenda and meet the other deliverables of the grant. Additionally the lead agency will help form partnerships and obtain further funding to implement plans.

- **WRI, Facilitator**
  Charge: To help plan and facilitate meetings and obtain resources to help implement the Blueprint for Action.
X. Committee List

<table>
<thead>
<tr>
<th>Health Behaviors Committee</th>
<th>Social and Economic Factors and Physical Environment Committee</th>
<th>Youth Committee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Christine Zellers, Cooperative Extension of Atlantic County, Rutgers SNAP-Ed</td>
<td>Dante Rieti, Community Member</td>
<td>Sara Williams, Cumberland County Department of Human Services</td>
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<tr>
<td>Richard Uniacke, Community Food Bank of New Jersey</td>
<td>Kim Friddell, Inspira Health Network</td>
<td>Mike Reginelli, The Southwest Council, Inc.</td>
</tr>
<tr>
<td>Caroline Knower, Cumberland County Department of Education</td>
<td>Melissa Helmbrecht, United Advocacy Group</td>
<td>Maria Perez, Bridgeton Main Street</td>
</tr>
<tr>
<td>Lisa Scheetz, Cumberland Cape Atlantic YMCA of Vineland (Live Healthy Vineland)</td>
<td>David Calderetti, Community Food Bank of New Jersey</td>
<td>Warren DeShields, Bridgeton Public Schools</td>
</tr>
<tr>
<td>Tejlah Cooper, Cumberland County Department of Health</td>
<td>Nick Dobrowolski, Bethany Grace Community Church</td>
<td>Marcus Weaver, Gateway CAP (Mill Creek Urban Farm)</td>
</tr>
<tr>
<td>Shawn Carter, Inspira Health Network</td>
<td>Diane Strozyk, Cumberland County Division of Homeless</td>
<td>Jon Cummings, Revive South Jersey (Unidos Para la Familia)</td>
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<tr>
<td>Kim Burns, Atlantic Prevention Resources</td>
<td>Mark Anderson, Cumberland County Prosecutor’s Office</td>
<td>Fr. David Rivera, The Parish of the Holy Cross</td>
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<tr>
<td>Misty Sheppard, Gateway Community Action Partnership</td>
<td>Kim Wood, Cumberland County Government</td>
<td>Mayor Albert Kelly, The City of Bridgeton</td>
</tr>
<tr>
<td>Briana Lyons, Community Food Bank of New Jersey</td>
<td>Megan Sheppard, Cumberland County Department of Health</td>
<td>Ashley Mallon, The Southwest Council, Inc.</td>
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<tr>
<td>Dr. Jazmine Harris, CompleteCare Health Network</td>
<td>Jessica Atkinson, Cumberland County Department of Health</td>
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<tr>
<td>Carolyn Heckman, Inspira Health Network</td>
<td>Valarie Hall, Bridgeton Commons</td>
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<td></td>
<td>Nina Young, Gateway Community Action Partnership</td>
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