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2023 Community Health Needs Assessment
Forces of Change Assessment

MAPP of the Southern Kenai Peninsula, Alaska

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Welcome To Our Community Health Needs Assessment

MAPP stands for Mobilizing for Action through Planning and Partnerships. MAPP of the Southern Kenai Peninsula (SKP) is a health improvement coalition that facilitates citizens who are committed to making their community a better place for everyone. We accomplish this mission by providing information about emerging health issues and opportunities, convening conversations to develop a shared vision for well-being, by serving as a catalyst for community members to act on projects that support the shared vision, and by monitoring and sharing progress on our shared community measures.

The MAPP of the Southern Kenai Peninsula is proud to present its 2023 Community Health Needs Assessment (CHNA) Report. This report summarizes a comprehensive review and analysis of health status indicators, public health, socioeconomic, demographic, and other qualitative and quantitative data from the Southern Kenai Peninsula. This report also includes secondary/disease incidence and prevalence data from the Kenai Peninsula Borough, Alaska, and United States. The data was reviewed and analyzed to determine the top priority needs and issues facing the region overall.

The primary purpose of this assessment was to identify the health needs and issues of the Southern Kenai Peninsula community. The CHNA also provides useful information for public health and health care providers, policy makers, social service agencies, community groups and organizations, religious institutions, businesses, and consumers who are interested in improving the health status of the community and region. The results enable the hospital, as well as other community providers, to identify community health priorities, develop interventions, and commit resources to improve the health status of the region more strategically.

Improving the health of the community is the foundation of the mission of the MAPP of the Southern Kenai Peninsula, and an important focus for everyone in the service region, individually and collectively. In addition to the education, patient care, and program interventions provided through the hospital, we hope that the information in this CHNA will encourage additional activities and collaborative efforts to improve the health status of the community.

Acknowledgment

Mobilizing for Action through Planning and Partnerships (MAPP) of the Southern Kenai Peninsula (SKP) would like to thank the Community Health Needs Assessment (CHNA) Workgroup, Steering Committee and community residents who participated in the CHNA process.

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MAPP CHNA Workgroup

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MAPP CHNA Steering Committee

Rick Abboud, City of Homer
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Lisa Marie Talbott, Homer United Methodist Church
Brian Partridge, Kachemak Bay Campus (Kenai Peninsula College)
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Acronyms

AK	Alaska
CHNA	Community Health Needs Assessment
CDC	Centers for Disease Control & Prevention
KP	Kenai Peninsula
KBP	Kenai Peninsula Borough
MAPP	Mobilizing for Action through Planning and Partnerships
NACCHO	National Association of County and City Health Officials
SKP	Southern Kenai Peninsula

Map of Southern Kenai Peninsula

The communities that make up the Southern Kenai Peninsula are illustrated in the map below, including Anchor Point, Diamond Ridge, Fox River, Fritz Creek, Halibut Cove, Happy Valley, Homer, Kachemak City, Kachemak Selo, Nanwalek, Nikolaevsk, Ninilchik, Port Graham, Razdolna, Seldovia[1] and Voznesenka.
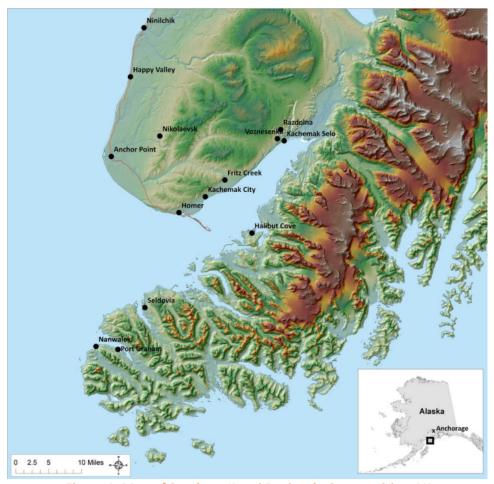

Figure 1: Map of Southern Kenai Peninsula Communities, AK

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[1] Seldovia City is not included in South Peninsula Hospital's service area.

Community Health Needs Assessment Background

In 2008, South Peninsula Hospital initiated the first Community Health Needs Assessment (CHNA) using a framework developed by the Center for Disease Control and Prevention (CDC) and National Association of County and City Health Officials (NACCHO) called Mobilizing for Action through Planning and Partnership (MAPP). Out of this 2008 exercise a local health coalition of community partners actively working together to improve community health was formed, MAPP of the Southern Kenai Peninsula. A CHNA has been conducted every three years[2] to assess the health of the community to inform new and existing community and agency efforts. The CHNA process is composed of six phases and the following four assessments:

I. **Community Themes & Strengths Assessment**
    Qualitative input from community members to identify the issues they feel are important.
    a. Perceptions of Community Health Survey
    b. Wellness Dimension Focus Groups

II. **Community Health Status Assessment**
    Quantitative community health data (representing cultural, economic, emotional, environmental, intellectual, physical, social, and spiritual wellness) that identifies priority health and quality of life issues.

III. **Forces of Change Assessment**
    Identifying forces such as legislation, technology, and other impending changes that affect the context in which the community and its public health system operate.

IV. **Local Public Health System Assessment**
    A prescribed performance assessment tool collaboratively developed by national public health partners that measures how well different local public health system partners work together to deliver the 10 Essential Public Health Services.

Figure 2: MAPP Framework Flowchart

Themes are identified from each sub-assessment and compared across all four sub-assessments, thus enabling a holistic review of community strengths, needs, and opportunities. Using the combined results/observations from all four sub-assessments, a community process is then used to prioritize the opportunities that community members will collaboratively address for the next few years. However, the results from specific sub-assessments can also be utilized independently to inform organizational and community-level opportunities for improvement.

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[2] Section 501(r)(3)(A) requires a hospital organization to conduct a community health needs assessment (CHNA) every three years and to adopt an implementation strategy to meet the community health needs identified through the CHNA. CHNAs were completed in 2009, 2013, 2016, 2020, and 2023. The 2020 assessment was a minimalized version.

In the summer of 2022, the MAPP Steering Committee learned of a new MAPP 2.0 framework being piloted but not yet available. The committee elected to move forward and use the MAPP 1.0 framework for the 2023 assessment, which appears in Figure 3 below.

Figure 3: MAPP 1.0 Framework

The following trends, challenges, and opportunities constitute the Forces of Change Assessment. The goal of this assessment is to enable our community to better anticipate change and to raise our awareness of the factors that are often beyond our control.

To view all assessments and for additional MAPP of the Southern Kenai Peninsula information, please visit www.mappofskp.net. For additional questions, please contact Hannah Gustafson, MAPP of SKP Coordinator, at mappofskp@gmail.com or 907-317-2050.

Forces of Change Assessment

Forces of Change Discussion Participants

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Brian Partridge – Kachemak Bay Campus (Kenai Peninsula College)
Kyra Wagner – Sustainable Homer
Jay Bechtol – South Peninsula Behavioral Health Services
Raquel Eisenmann – Healthy and Equitable Communities Team

Annie Garay – South Peninsula Hospital
Hannah Gustafson – MAPP Coordinator
Rick Abboud – City of Homer
Emma Schumann – SVT Health & Wellness
Judy Kamara – Sprout Family Services
Lisa Marie Talbott – Homer United Methodist Church

Methodology

A group Forces of Change brainstorm was conducted on December 7, 2022, at a MAPP Steering Committee meeting. The Steering Committee brainstormed ideas and captured them on a virtual flipchart in the matrix seen below. The group then reviewed these Forces of Change and identified challenges and opportunities that could result from each trend. Following the brainstorm sessions, Steering Committee members continued to complete the assessment via a shared Google Doc. The most applicable Wellness Dimensions (see definition below) were then identified for each Force of Change to support a consistent comparison lens across sub-assessments. This list reflects the input provided by the Steering Committee.

Data Limitations

There are a variety of limitations to both the secondary and primary data collected and utilized in this study.

The Secondary data may be incomplete and lack accuracy depending on a variety of factors including but not limited to:
- The time lag from the time the data was collected to the time it was reported.
- The research design, methodology, sampling design and sources (target audiences, recruitment methods) do not necessarily match the population of this study and were not consistent.
- Data collection methods (qualitative and quantitative techniques) varied, with a variety of different methodologies used by the sources.

The primary data collection included in the study also has potential limitations that include but are not limited to:
- Data was obtained from a convenience sample of key informant stakeholders willing to participate.
- Data was largely qualitative.

Both the primary and secondary data presented in this report via charts, graphs, tables and narrative are based on that unique data source, which may or may not represent a sample size that is representative of the SKP service area. The narrative introducing each chart, graph or table is intended to highlight some of the data that

is represented in the respective chart, table or graph from that particular data source, and are not necessarily a finding reflecting the SKP service area.

Results

Wellness Dimension Key

Cultural: *Individual awareness of one's own culture as well as understanding and respecting the diversity and richness of other cultures.*	**Intellectual**: *Staying curious, engaging in creative activities, and learning new things*
Economic: *The ability to meet financial needs and adapt to unanticipated financial situations.*	**Physical**: *The ability to perform daily activities without undue fatigue or physical stress.*
Emotional: *The ability to cope effectively with life and create personal enrichment through one's work and relationships.*	**Social**: *A sense of connection, belonging, safety, and a reliable support system.*
Environmental: *A harmonious and sustainable relationship with immediate surroundings that expands to the natural world.*	**Spiritual**: *A sense of purpose and meaning in life.*

The areas colored in the Impacted Wellness Dimensions highlight the dimensions impacted by that force. The blocks with no color indicate that dimension is not impacted by that force.

Forces (Trends, Events, Factors)	Threats Posed	Opportunities Created	Impacted Wellness Dimensions			
1. Housing Crisis/Homelessness	• Outmigration • Impacts workforce • Large portion of salary going towards housing limits resources towards other essentials • Impacts physical and mental health • People suffer from exposure • Increased demand on emergency services • Increased trespassing and arrests	• Creative problem solving (i.e. yurts, tiny homes) • High demand allows developers to invest big while getting a return on their investment • Crosses political lines, all agree it's an issue • Bring additional services to the community • Create transitional housing	CUL	INT	ENV	SOC
			ECO	EMO	PHY	SPI
2. Increased funding/availability of funding	• Creates instability managing programs • Will impact workforce, programs and the community when it goes away • Contributes to inflation • Causes reliance on public assistance programs • Possible outmigration to more affordable areas	• Ability to creatively problem solve/try new solutions • Increased collaboration • Build infrastructure and increase capacity	CUL	INT	ENV	SOC
			ECO	EMO	PHY	SPI
3. Workforce (staffing shortage, remote workforce, women who left workforce)	• Businesses are closing/reducing hours • Increased burn out/turnover • Reduces quality of services	• Professional development and growth • Workforce development/training • More jobs open to lower skilled people	CUL	INT	ENV	SOC

Forces (Trends, Events, Factors)	Threats Posed	Opportunities Created	Impacted Wellness Dimensions			
	• Impacts access to services • Impacts personal/family income • Loss of institutional memory • Isolation which impacts mental health • Pressure on housing system • Not as connected to community	that would not have otherwise been • Shared resources among businesses • More opportunities for those who can work from home • Increased family time • Work/life balance • Easier to share information/data • People are buying/using local • Influx of people into community • Telehealth/remote services	ECO	EMO	PHY	SPI
4. Current Economic Environment	• Creates inequity • Causes reliance on public assistance • Outmigration • Strain on existing resources • Increased crime • Stress/impacts physical and mental health	• Help prioritize where to spend resources • Connect people to available supports	CUL	INT	ENV	SOC
			ECO	EMO	PHY	SPI
5. Increased awareness of mental health/trauma informed practices	• Outpacing existing infrastructure/services • Competition for funding • Increased conflict • Misunderstanding if not trained • False representation	• Reduced stigma • Increased self-awareness • More advocating for services • Redistribute funding toward prevention • Highlighted places where healing can occur • People are seeking services • Continued training	CUL	INT	ENV	SOC
			ECO	EMO	PHY	SPI
6. Trend to understand and seek truth/facts	• Mistrust • Adds stress • Impacts people seeking services	• Willingness to listen • Self-reflection • People are doing research before making decisions	CUL	INT	ENV	SOC
			ECO	EMO	PHY	SPI

Forces (Trends, Events, Factors)	Threats Posed	Opportunities Created	Impacted Wellness Dimensions			
7. Lack of Childcare	• Impacts ability to meet development needs/special needs of children • People leaving workforce • Impacts economic stability of individual/family • May limit number deciding to have children • Impact on mental health of the family	• Cottage industry/home business opportunities • Look at daycare as infrastructure • Might encourage state to increase rates	CUL	INT	ENV	SOC
			ECO	EMO	PHY	SPI
8. Political Climate (also impacting spiritual community)	• Divisiveness in the community • Supreme Court making decisions impacting local level • Trouble making effective policies • People ignore important information • People are less likely to speak up • Loss of community • Declining mental health	• More people are paying attention and participating in discussion • Increased voter turnout • More dialogue • Trauma informed leadership • Create safe spaces	CUL	INT	ENV	SOC
			ECO	EMO	PHY	SPI
9. Limited Transportation	• Reduces ability to find employment • Difficulty accessing services	• Collaboration across different political groups to address • People are talking/problem solving	CUL	INT	ENV	SOC
			ECO	EMO	PHY	SPI
10. Community Involvement	• People do not have as much time to volunteer • Same people always involved • Creates toxicity (i.e. Homer Communications)	• Creating local solutions • Respectful communication within community	CUL	INT	ENV	SOC
			ECO	EMO	PHY	SPI
11. Lot of organizations supporting community	• Those not connected are not getting the	• Creates better outreach	CUL	INT	ENV	SOC

Forces (Trends, Events, Factors)	Threats Posed	Opportunities Created	Impacted Wellness Dimensions			
	message/do not have opportunity • Economy and education knocks people out	• More options to get needed support	ECO	EMO	PHY	SPI
12. Pandemic (current state)	• Those still avoiding interaction are not forming bonds • Isolation impacts physical and mental health • Increased community conflict • Instability of workforce • Susceptibility to those immune compromised • Economic impact to businesses/artists • Delayed care/lack of preventative care • Jails were closed impacting ability to visit with family	• Isolation minimizes spread of infection • COVID relief funding • Seeking care for health conditions delayed during height of pandemic • Return of in person gatherings • Development of therapeutics • More appreciation of traditional things that have been done for years • Ability to care for self (exercise, nutrition) • Provide care in new ways • Opportunity to prioritize family and social connections	CUL	INT	ENV	SOC
			ECO	EMO	PHY	SPI
13. Food Insecurity	• Nutrition issues • Stressor	• Community involvement/support	CUL	INT	ENV	SOC
			ECO	EMO	PHY	SPI
14. Overt Discrimination/Increased Stigmatization	• Violence/Threats of safety • Inequities • Poor quality of life • Social isolation • Access to services • May delay seeking treatment	• Increased conversation • Understanding and acceptance • New services/supports • Inclusive practices	CUL	INT	ENV	SOC
			ECO	EMO	PHY	SPI
15. Education (impact of online learning, available community resources)	• Challenge with interpersonal interactions • Delayed entry into workforce	• Will bring new schools of thought • Technology infrastructure	CUL	INT	ENV	SOC

Forces (Trends, Events, Factors)	Threats Posed	Opportunities Created	Impacted Wellness Dimensions			
	• Shifting educational system • Concept of homework is gone • Dependent on funding from state	• New teaching modalities, better support for students • More job opportunities for those who are tech savvy • Kenai Peninsula College allows students to stay local for education • High school students can earn college credits • Provides workforce training • Space for community gatherings	ECO	EMO	PHY	SPI
16. Licensing agencies/infrastructure is breaking down	• Crippling access to skilled service and professionals at local level • Poor health • Poor quality of life	• Federal partners are more willing to lower standards when comes to hiring • Bringing in more diverse people	CUL	INT	ENV	SOC
			ECO	EMO	PHY	SPI
17. Growing senior population and lack of services	• Increased hospitalizations • Burden on existing services	• Private development/new services to come in • Community step up and care for family and neighbors	CUL	INT	ENV	SOC
			ECO	EMO	PHY	SPI
18. Challenges young families are facing (housing, childcare, employment)	• Outmigration • School closures and impact on funding to schools • Labor shortage	• Increase in wealthy and older demographic that can support local nonprofits	CUL	INT	ENV	SOC
			ECO	EMO	PHY	SPI
19. Substance Use/Abuse	• Not enough services to meet need • Increased crime • Impact on physical and mental health	• Community education and reduction of stigma • Rethink drug misuse treatment	CUL	INT	ENV	SOC
			ECO	EMO	PHY	SPI
20. Increased focus on growing local food/local agriculture	• Increased sale of land not good for agriculture	• Local food • Less reliance on long supply chains	CUL	INT	ENV	SOC

Forces (Trends, Events, Factors)	Threats Posed	Opportunities Created	Impacted Wellness Dimensions			
	• Loss of forest • Impact on climate change • Increased competition on farmers	• Small business opportunities • Long term sustainability • Kenai Peninsula College is starting Ag program	ECO	EMO	PHY	SPI
21. Mental Fatigue	• Burnout • Stress • Loss of workforce • Domestic violence • Long term impact of mental health issues • Long term impact of physical health	• Receptive to self-care practices	CUL	INT	ENV	SOC
			ECO	EMO	PHY	SPI
22. Need creative solutions to reproductive health on regulatory side	• Funding could get cut • Policies can change	• New services • Additional staff • More access	CUL	INT	ENV	SOC
			ECO	EMO	PHY	SPI
23. Climate Change	• Infrastructure destruction	• Longer growing season • Increased connectivity and reverence to the land that sustains us	CUL	INT	ENV	SOC
			ECO	EMO	PHY	SPI
24. People are willing to use Zoom	• Internet infrastructure • Out of town influence on local decisions • Zoom burnout	• More Native representation • Harder to ignore rural voices/better connected to rural communities • New collaborations • Finding shared experiences and similarities • Higher caliber of keynote speakers	CUL	INT	ENV	SOC
			ECO	EMO	PHY	SPI
25. Value and importance of human connection	• Isolation created by pandemic • Difficult time engaging	• People vocalize about social opportunities • Appreciation of opportunities	CUL	INT	ENV	SOC
			ECO	EMO	PHY	SPI
26. Increase in domestic violence during pandemic	• Victims unable to access help • Lack of transitional housing • Wait list of housing vouchers	• Create transitional housing • Increased housing options for low income individuals	CUL	INT	ENV	SOC
			ECO	EMO	PHY	SPI
			CUL	INT	ENV	SOC

Forces (Trends, Events, Factors)	Threats Posed	Opportunities Created	Impacted Wellness Dimensions			
27. Rumors of decreased federal funding for Indian Health Services	• Impact on tribal clinics	• Raised local awareness of importance of tribal health clinics	ECO	EMO	PHY	SPI
28. Growing understanding of indigenous land	• Racist backlash • Lip service versus actual change	• Land acknowledgement has grown • Increased cultural awareness • Opportunity for reparations	CUL	INT	ENV	SOC
			ECO	EMO	PHY	SPI
29. Safe spaces, activities and opportunities for youth	• Possible backlash for self-identity/expression • Increased divide among young people • Cost burden to families	• Increased acceptance • Increased communication skills • Foster healthy relationships • Create safe sidewalks	CUL	INT	ENV	SOC
			ECO	EMO	PHY	SPI
30. Physical beauty of where we are	• Many are away from extended family • Difficulty getting to know one another/finding community	• Connection to place and grounding can heal trauma • Connection to seasons/weather/tides provides framework for connection that transcends socioeconomic divide	CUL	INT	ENV	SOC
			ECO	EMO	PHY	SPI
31. Increase prevalence of disease	• Infected population increases • Impact on vulnerable communities • Death • Quality of life degrades • Can cause mental health issues	• Provide education • Advocate for free vaccinations • Address root cause of disease	CUL	INT	ENV	SOC
			ECO	EMO	PHY	SPI

NOTE: The data and narrative presented are based on this unique data source, which may or may not represent a sample size that is representative of the SKP service area, and the narrative may not be inclusive of all available data points. Please refer to Data Limitations on page 7 for additional information.

Appendix A: Detailed Results

Appendix A: Detailed Results

Detailed notes from brainstorming meeting and follow up exercise.

Forces (Trends, Events, Factors)	Threats Posed	Opportunities Created
Housing crisis in Homer • Lack of affordable houses/rentals • Lack of short-term rentals • Airbnb rentals	• Outmigration • Contributes to inability to fill staff positions • More of one's personal income going toward housing costs, so salaries have to increase which impacts bottom line budget especially for small agencies • Think people are moving around more frequently which is not the greatest for a stable lifestyle • Increased cost of housing is reducing money people have for healthy food, they are putting off medical, dental, behavioral health care – all of these things are impacting quality of life • Disproportionately effects younger families and those of lower socioeconomic status – they are the future leaders and can't afford to live here • Being forced to have 1 income households rather than 2 • Direct impact on healthy physical and mental health for parents and children • Forces people to look further outside of Homer – they are moving to Anchor Point or further out which impacts the amount of money they are spending on fuel, vehicle maintenance, etc. • Directly impacts service provision for the entire town as it limits the workforce • Makes it harder for certain employees to stay here – those who have jobs in housekeeping, restaurants, etc. who are making lower wages	• Has led to people getting creative for solving housing problem – they are adding yurts, tiny homes on their property • When demand is so high developers are more able to make bigger investment in adding to the supply – there is a better chance they will get a return • When demand is high there is better buying power for supplies which helps impact those planning for expansion • This is an issue to cross political divides – it is something we all agree upon and are talking about

Forces (Trends, Events, Factors)	Threats Posed	Opportunities Created
Available funding for services • Many agencies are government funded • Short term increase in funding with COVID money • Federal funding is generous right now	• Creates instability in managing the sustainability of programs • Creates issue with capacity for agencies/providers to be able to apply for increased funding opportunities • The amount of grant funding dumped into the community/agencies for Covid relief will create cliff effect when it ends • Greater amount of money on the street contributes to overall inflation • Causes more reliance on public assistance programs that might not have the capacity to be there • Might lead to out migration to areas with more affordable living, services, etc. • Position opened with funding are short term positions not long term – bring in great folks only promise pay year or so • Crisis will create if not prepared	• Gives ability to think creatively about how to solve some of the issues • Opportunity for agencies to test out creative solutions that might need to be tweaked before they are long term projects – agencies can try something new • Seen more collaboration between agencies trying to address capacity – they have combined forces to apply for these things • Lot of collaborators trying to figure out how to spend/distribute • Short term – build infrastructure and long-term capacity – or at least focus on it
Current Economic Environment • Individuals' ability pay for things • Increased cost/prices • Gas prices • Contractor cost	• Inequity among folks who do not have access to affordable healthy foods, healthcare, activities, etc. • Causes more reliance on public assistance programs that might not have the capacity to be there • Might lead to outmigration to areas with more affordable living, services, etc. • Puts on strain on existing services which may not be adequate to begin with • In addition to outmigration prevents in migration • Impacts one's ability to pay for healthcare, mental health, dental, food, etc. • Creates additional stress that affects mental health • Increased crime	• Might help prioritize consolidating where individuals spend their money – may results in a decrease of waste • May bring some families to services and get them involved in supports

Forces (Trends, Events, Factors)	Threats Posed	Opportunities Created
Workforce issues/challenges • Staffing shortages • Need to pay increased wages • People are switching jobs	• Hit smaller business harder - small business not able to do business – some are closing early or only open limited days, others have closed down • Increase burn out • High turnover rate • Reducing quality of services as straining to get more done with fewer people • Impacting access to services, resources, etc. • Impacting quantity of services available in the community • Impacting image – what is Homer if restaurants are not open? • Long range impact on tourism – especially in the summer when expectation is to be open • Small business ability to stay open in the long term if cannot address those needs in the short term which impacts the economy, people lives, etc. • Unrest of people who can't get services • More work responsibility means less time to play and create • Loss of institutional memory	• Opportunity for individual to expand their professional skills and try new and additional responsibilities • Opportunity to advocate for self – pay and positions • Huge opportunity for workforce development and being creative in what that looks like • Creating an understanding of the value of people working for small business • Paid training – hospital paying more and more of nursing and CNA training and certifications with existing staff • Lower skilled people are able to get job where they can learn and grow that they would not have qualified for in the past • Opportunity to look at how you can streamline processes • Opportunity for shared resourcing with smaller businesses • People are getting dream job – since jobs opening up able to follow passion and find things fit them or lifestyle better • Usually better way to do it might be fine to lose institutional memory and rethink how to do it
Increased awareness of what mental health means (positive force) • Seeing among different generations • People are more attuned to mental health	• Outpacing existing structures/infrastructure/services available • Might be more people vying for same monies • Can increase conflict when have someone more open to express where they are at and someone not as open to hearing where they are – this can appear to increase conflict	• Reduced the stigma • Can increase self-awareness and willingness to get help when it is needed • More people advocating for behavioral health services – working it into every day other services too • Opportunity to restructure and redistribute monies toward prevention

Forces (Trends, Events, Factors)	Threats Posed	Opportunities Created
Development seeing nationwide of the understanding of truth to the facts/seeking truth	• Mistrust of medical system, church, government, education, media – really any institution • Makes education very hard • Adds to stresses of things like education, healthcare • Can prevent people from getting the healthcare they need	• Seen institutions not as revered for places of knowledge - people are willing to listen to people with experience and wait for study, which is great for farming, maybe not for healthcare, people are listening to farmers because they are viewed as experts • Self-reflection and introspection of institution to identify systemic issues such as racism, sexism, etc. – it has called for introspection to change institutional structures • As far as pendulum when it swings in one direction people consider corrective action so it is helping people to think in ways that would not have thought before • Forces people to do more homework on a subject before making decision – can't just believe 1 source for anything
Lack of Childcare • Quality • Affordability • Access	• Ability to meet developmental needs or special needs • Impacts workforce – people resign because they can't find childcare • Impacts people's economic stability • Impact mental health of the family • Impacts decisions about whether to have children or not (at a time when that choice might be taken away) • PASS increase won't make difference if licensure can't license centers to accept PASS	• Great cottage industry/home business that could be useful to person who quit their job because couldn't find childcare • Opportunity for rebranding day care as infrastructure rather than social services • Might encourage state to increase the rates that families get toward childcare which often dictate how much providers charge for childcare – cost of doing business high that is not good for business to survive – might cause state to increase which makes childcare more doable businesses • PASS program at state – going to release in a little bit – increase for family income limit to qualify is going up and amount they pay will change – been close to 20 years since that changed

Forces (Trends, Events, Factors)	Threats Posed	Opportunities Created
Political climate • Swings between if political parties are in position of power then swings to other party and creates instability • Divided • Lack of trust in community officials (beliefs not aligned with internal beliefs)	• Divisiveness in community • Supreme Court make up having different rulings that will effect at local level - legislative roll out • Trouble making effective policies • People ignore important information	• More people paying attention and participating in political discussion/People are getting involved • Increase in voter turnout
Limited affordable transportation	• Reduces the ability to find employment • Trouble accessing services, jobs, etc.	• Collaboration between different political groups to address the issue • People are talking/problem solving
There is a good amount of citizen willing to address local concerns (positive force)	• Because of economy and things identified people don't have as much time to volunteer and get involved – it is the same people who get involved over and over again– not seeing young families getting involved because they can't • Creates toxicity – Homer communications is an example it is argumentative, aggressive behavior that doesn't result in change and stirs pot	• Local solution instead of top down • Being able to have respectful communication within the community when people do not agree and being able to try and find ways to be gracious to one another in that space
There are lots of organizations supporting those who are plugged in – the people who know things/know how to connect	• Those not plugged in are not getting message, they are not part of the solution, they are not getting opportunities – can never catch enough people • Economy and education knocks people out	• Creates better outreach • Potentially more options for people to get the support they need with variety of organizations
Subset of the population still avoiding personal interaction	• Less likely to form bonds/gain perspectives • Isolation and effect on physical and mental health • Increase community conflict	• During pandemic a positive is less spread of Covid and other infections
Food insecurity	• Nutrition issues among all populations	

Forces (Trends, Events, Factors)	Threats Posed	Opportunities Created
	• Stressor	• Homer free fridge project is a great way to get individuals involved and motivated • The Methodist Church hosts availability for food in community through the food bank and church • Community level there is the opportunity for working together to address local opportunities to create food sources
Rise of overt discrimination • Racism • Antisemitism • LQBTQ	• Violence • Inequities in all areas • Poor quality of life for people because they are living in fear	• When it is overt it puts it out there to have the conversation
Current phase of pandemic	• Instability with employees – being able to have full staff reliably all the time • People not masking anymore which has added to susceptibility of those immune compromised	• Covid relief funding at federal and state • People having chance to address other ailments not addressed during the highest phase of Covid • Most groups and clubs are back to in person which is good for people • Continued development of therapeutics
Challenges with students who spent time 100% of learning online are now entering the workforce and education system unprepared	• Challenge communicating face to face/difficulty with interpersonal interactions • Not socially well adjusted • Delaying entry into workforce as they are having to take more remedial/fundamental courses before can start degree • Impact on education system having to respond to young people experiencing pandemic related delays – it is shifting the education system • Whole concept of homework is gone which is challenging for education	• When have entire pop/generation that experience something will have culture shift – new schools of thought • Technology establish as infrastructure for future so students accessible to education • So many more teaching modalities that support more students • More job opportunities for those tech savvy and staying home – more remote work
Women left the workforce during Covid	• Impact on family income	• Spending more time with family

Forces (Trends, Events, Factors)	Threats Posed	Opportunities Created
	• Impact on professional stages/careers • Impact on organizations – loss of institutional knowledge, skill sets • Isolation and impact on women's mental health	• More job opportunities for those who can work from home
Licensing agencies or infrastructure set up to provide body for oversight are beginning to break down which is affecting ability to get qualified and licensed personal or qualified and licensed daycare, timely nursing staff and providers	• Majorly crippling access to skilled service and professionals at local level • Poor health • Poor quality of life	• Seen with federal partners is more willing to lower standards when go out to hire – bringing in more diverse people (training in general not specific to license)
Growing senior population/lack of enough services for seniors (i.e. home care, assisted living, etc.)	• Could lead to acute illness, hospitalization, placement in nursing home because not getting adequate care, not getting preventive care, not getting treatment in advance and state doesn't have those beds ready • Food insecurity, transportation – more burden on those services provided for those things	• Private development to move in and offer services – since there is a high demand • Opportunity for individuals to step up and take care of elderly family and neighbors
Difficulty young families have in trying to be in this community due to lack of affordable housing, daycare, being able to enter the workforce, etc.)	• They are leaving so there are fewer of them • Impacts funding to schools which is based on enrollment – school closure when not enough kids • Labor shortage	• Increase in wealthy and older demographic that can support local nonprofits.
Drug Misuse	• Not enough services to meet the true need in community of those impacted by drugs • Increased crime • Short and long term physical and mental health for those using, abusing and addicted	• Increased opportunity for community education and reduction of stigma • Rethink drug misuse treatment
Increased awareness of Alaskans growing their own food – there is state and federal funding, awareness and support – even seeing at local level so farmers are doing good	• Increased sale of lands not good for agriculture – environmentally delicate lands or native lands that should not be sold and controversy that creates	• Local food • Less reliance on long supply chains • Small business opportunities • Long term sustainability

Forces (Trends, Events, Factors)	Threats Posed	Opportunities Created
	• Start digging up forest for agriculture land contributes to climate change issues	
Workforce going remote	• Burnout • Stress • Now that having meetings again or after cramming so much in stress levels are higher as people are trying to complete all things on the plate – people have taken on more than before	• Improving individual family economics– taking on more opportunities for jobs • Lot took on more family obligations with Covid – as rebalance still maintain family priorities • Flexibility • Remote working gives us ability to collaborate across time zones on projects or beyond geographic people were able to take on more • Sharing information/data got easier
Kenai Peninsula College is huge benefit for community (positive force)	• Dependent on funding from the state (some Borough Grant Funding), not funded locally so statewide decisions could have negative impact if cuts to the local campus were made.	• Allows students to stay in community or get undergrad requirement to tap into UAA and get degree that way • Jump start (⅔ tuition) and middle college (*NEW* 100% coverage up to 6 credits) allows HHS juniors and seniors college credits • Provides workforce training that funnels into local employers (for example CNA classes, RN program) • Provides a great space for community programs and gatherings • Intern source for local NGOs (e.g. Semester by the bay)
Need to expand educational opportunities to meet needs locally for those who can't do online	• Do we have staff to fill positions • Spread of infectious disease	• Get to keep/grow your own from community to fill positions • Leveraging workforce gap • Adds commitment to folks getting the opportunity – they are more committed long term to organization working for • Increase informal opportunities

Forces (Trends, Events, Factors)	Threats Posed	Opportunities Created
Lot of mental fatigue created from the last 2 years	• Burnout • Stress • Loss of workforce who might move on – early retirement • Domestic violence • Long term mental health issues • Long term physical health issues	• Receptive to self-care practices and learning mental health management tools and tips
Kenai Peninsula College is starting Agriculture program (positive force)	• Increase competition if there are more farms • How sustainable from professors and program manager perspective	• More people growing locally for long term sustainability of local food • Onsite and hybrid possibly could reach to rural communities

Need more support for creative solutions to reproductive health needs on regulatory side
  • Understanding how provide good service
  • What learned from Covid and can still work moving forward
	• Always the threat that funding could get cut more, policy could change, and headway made could be lost.	• New services
		• Additional staff
		• More access

Number of professional/remote workers who moved to area from other places during pandemic that are becoming part of the community	• More housing pressure • Not as connected to the community because working at home and not as dialed in – harder to meet people	• Likely buying and using local services • More people for boards – boards always looking for people • Lot of cool people moving to town • Infusion of ideas from other places – new perspectives

Climate change	• Infrastructure destruction
	  o spit and the roads
	  o water
	  o sewer
	  o bluff
	  o land stabilization
	  o farming
	  o fishing
		• Longer growing season potentially
		• Increased connectivity and reverence to the land that sustains us

Pandemic created ease for collaboration for a lot of agencies (positive force)	• Now that pandemic is over some of those regulations that allowed that are being rescinded	• Provides a good platform to keep building on

Forces (Trends, Events, Factors)	Threats Posed	Opportunities Created
More people willing to Zoom statewide representation has become more the norm	• Internet infrastructure need help in Aleutian chain and across the bay • Out of towners being more connected to what we do might influence decision negatively – historically local decisions were made by locals • Zoom burnout – less likely to do things virtually as moving to face to face meetings	• Seen more Native representation and Native voice • Processes deemed not possible via the intranet turned out to be viable because had to be that would not have been there • Harder to ignore rural voices • New collaborations • Finding shared experiences and similarities that would not have been as easy to recognize without influence of virtual connection • Higher caliber keynote speakers at events • Better connected with rural communities
Importance of human connection is really valued and highlighted right now	• There was a lot in isolation and moved into community and had difficult time engaging because of lack of events	• Hearing people vocalize about social opportunities and being appreciative of these opportunities
Houselessness – no homeless shelter/cold weather shelter	• People suffering from exposure when homeless. • Possible increased demand on emergency services • Increased trespassing and arrests (resulting in criminal record)	• Room for improvement • Opportunity to bring additional services into the community • Opportunity for collaboration • Create transitional housing (housing first)
Domestic violence peaked during pandemic	• Victims unable to access help due to being in isolation with their abuser. • Lack of transitional housing for folks leaving spouse (SPHH has had people in shelter for 6+ months). • Wait list locally is 2 years for AHFC housing vouchers	• Room for improvement • Create transitional housing • Increase housing options for low income individuals
Rumors of decreased funding on federal level for Indian Health Services	• If true will be huge impact on tribal clinics	• If false, will have raised local awareness of the importance of tribal health clinics
Growing trend of understanding indigenous land reside and work on (positive force)	• Racist backlash • Lip service versus actual change (slacktivism)	• Land acknowledgment have grown • Increased in cultural awareness of indigenous people and land

Forces (Trends, Events, Factors)	Threats Posed	Opportunities Created
		• Opportunity for reparations
Bringing trauma informed lens to a lot of work	• Possible misunderstanding from those not trained to use trauma informed lens • Can be watered down • False representation , Lip service versus actual change (slacktivism)	• Has highlighted places where healing can take place • Community members seeking out overdue care with providers trained in trauma-informed care • Opportunity for continued training, both intro and round 2
Covid impacted artist community but now things are resuming in person	• Leaves out those with immune deficiencies afraid to attend in person with masking requirements lifted • Economic impact on artist community (financial insecurity)	• Even traditional things that have been done for years are more appreciated/elevated • Continue to explore and use tech to connect people to art and artists
Increased stigmatization of life experiences connected to LGBTQ community	• Threats to the safety and dignity of the LGBTQ community (e.g. housing, employment, access to health service) • Social isolation • Isolation, community members may defer healthcare and other services out of fear of mistreatment or prejudice	• Increased conversation can lead to better understanding and acceptance • New services and systems can be more inclusive (effort to destigmatize) and better meet their needs
Feels like departure from what had been pre-pandemic prioritization of care (commonality before pandemic and not as prevalent now) • Ongoing physical care • Primary care visits • Cancer screening	• Health needs neglected due to fear or rumors • Physical care ignored, exacerbating problems • Screenings for conditions not getting done, conditions not being caught in early stages	• Opportunities for people to take their own health care into their own hands, i.e. eat better, take vitamins, get regular exercise and take better care of themselves. • Opportunities for providing care in new ways and where people need us
Rise in political divisiveness is also part of spiritual community – Christian community and discrimination seeing there	• Divisiveness in town • People may be less likely to speak up now due to fear of public shaming • Less community engagement • Declining mental health • Loss of community	• Opportunity to have more dialogs • Trauma informed leadership, opportunities for youth leadership • Identifying places where there is common ground (youth programs) • People find courage to speak up • Create more safe spaces
Beauty of place we are and ability to feel grounded and connected to place	• Many are far from extended families	• Connection to place and grounding can heal traumas

Forces (Trends, Events, Factors)	Threats Posed	Opportunities Created
– even if felt more isolated from one another because of physical beauty of place	• Potential difficulty getting to know people/finding community/connection	• Connection to the seasons/weather/tides is inherently grounding and provides framework for connection that transcends socioeconomic divide
Seeing younger generation feeling more open to communicating who they are and coming out where they are and expressing self more has been bold and inspiring	• Possible backlash • Increased divide among people, over reactionary responses to ideas/forms of self-expressions leaving little to no room for constructive engagement	• Increased acceptance of all • Room to increase our listening skills • Room to learn increased tools for engaging in constructive dialogue
Safe spaces for youth • After school and evening	• Potential cost barrier for parents if cost of after school programing is unattainable- creating opportunities for some youth and not for others	• City is working on safe routes in town – sidewalks and that sort of thing • Increased awareness of need to cultivate and foster healthy mentorship and spaces for youth
Jails and other institutions were closed to visitors throughout the pandemic so there are several community members who have not seen their family member(s) in years	• Increased isolation and depression	• Opportunity to support and prioritize family visits
Increase incidence/prevalence of several communicable diseases	• Infected population increase • Vulnerable communities most impacted: native villages, congregate housing, multifamily homes	• Opportunity to provide impactful education • Advocate for continued free (insurance covered) vaccinations
Overwhelming noncommunicable diseases (cancer, heart disease) as leading causes of death	• Death • Quality of life is degraded • Can cause mental health issues on top of medical ones	• Opportunity to address root causes such as ACEs
Healthcare workforce and other sectors not sufficient to meet community needs, not sustainable	• Health care lacking for those who need it • Creates barrier to healthcare access in a timely way	• The opportunity to prioritize growth in training and workforce in these sectors. • Increase/maintain telehealth services

NOTE: The data and narrative presented are based on this unique data source, which may or may not represent a sample size that is representative of the SKP service area, and the narrative may not be inclusive of all available data points. Please refer to Data Limitations on page 7 for additional information.