



Hoopa Valley Tribe

TRIBAL MEMBER COMMUNITY NEEDS ASSESSMENT

2022



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Executive Summary

Introduction

The Hoopa Valley Tribe retained Blue Stone Strategy Partners to conduct a ***Hoopa Valley Tribal Member Community Needs Assessment***. The community needs assessment was administered from September 24th through October 28th, 2022 through paper and web-based surveys. Totalling at 48 questions, the assessment was separated into seven sections in the areas of: housing needs, healthcare needs and services, supportive and community services, food insecurity, and open response for additional community needs. The full community needs assessment is available to reference in Appendix A of this report. A total of **343 people** participated in the survey, and the results from the information gathered are presented in the body of this report.

Purpose

The purpose of the community needs assessment is more than just gathering and analyzing data; it is the basis for creating change through direct relevant community input. It is meant to support the Tribe in addressing community and family needs by providing a snapshot of the service areas and the characteristics of the Hoopa Valley Tribal Community including the economic well-being, educational status, health, and welfare. The survey is meant to help define gaps in community services, allowing the Tribe to focus and direct additional resources to support the most relevant and critical community needs. The information will provide an ongoing foundation for strategic and operational planning, assessing the Tribe's impact on meeting the needs of the community, determining what programs or strategies to focus on, and deciding what strategies may provide new opportunities for the Tribe.

The community needs assessment will assist the Hoopa Valley Tribe by:

- Informing Tribal Leadership of current and future community needs, and gaps in services provided
- Guiding future decision-making through quality data and analysis
- Supporting communication to Tribal Membership
- Supporting the Tribe with the necessary information to increase the specificity and competitiveness of grant applications to increase funding available for the Tribe

Process

The survey development included: compiling available previous community surveys to inform the assessment including planning sessions, discussions with the Tribe's COO and Planning Department staff members, feedback gathering from Tribal Leadership and Department managers regarding survey content, and final development of the community needs assessment survey including both paper and online versions. Additionally, there were supplemental materials prepared including a survey announcement and flyer to support outreach and inform the community members of the survey and a planning overview focused on specific data that could be used to support grant applications. The survey announcement and flyer are included in Appendices B and C and the programmatic planning overview by select community needs assessment data in Appendix D at the end of this report. This Community Needs Assessment report, with key findings from Tribal Membership data gathered through the needs assessment survey, was the final step of the process.

Section 1: Demographics

Background Information

Most people who participated in the needs assessment survey were employed outside the Tribe, ages 25-54 years old (Age information included in Chart 1), and had a high school diploma or some college education (Education levels included in Chart 2). The most frequently listed annual income was under \$20,000 (Income information included in Chart 3). Approximately one-tenth of individuals reported having special needs, developmental, or other disabilities (Special needs included in Chart 4), and 3% of participants were veterans (Shown in Chart 5). The demographics presented here, particularly those of age and income, support the development of workforce training programs (TERO) and affordable housing for Tribal Members (Student Housing, Down Payment Assistance Fund; See Appendix D). This is because most who completed the assessment are of working age but frequently have lower income levels. Additionally, given the health disparities that affect individuals with lower levels of education or income, or who have disabilities, priority should be placed on education and health and wellness at earlier ages to prevent later onset of health concerns (K-12 Educational Programming Facility, K'ima:w Medical Clinic Expansion See Appendix D). For those who are already of an older age, supports should be put in place to ensure adequate access to housing and health care (Assisted Care Facility, Elder Housing Rehabilitation, Natinixwe Elder Village; See Appendix D)

Chart 1: Community Needs Assessment Survey- Respondent Ages

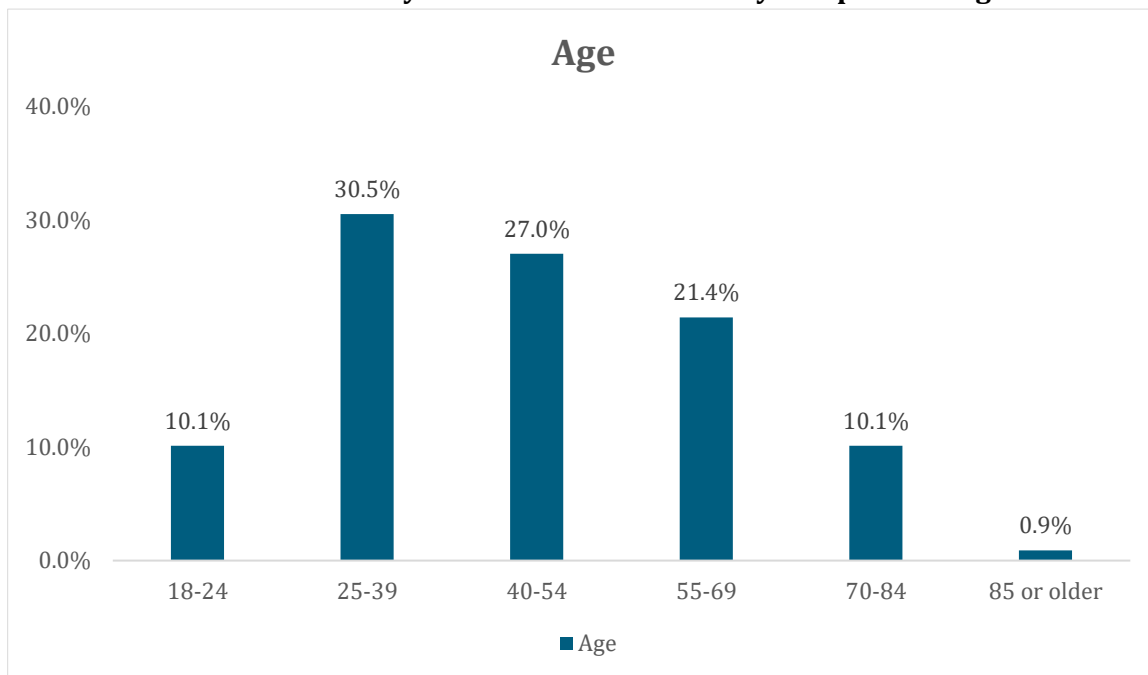




Chart 2: Community Needs Assessment Survey- Respondent Education Levels

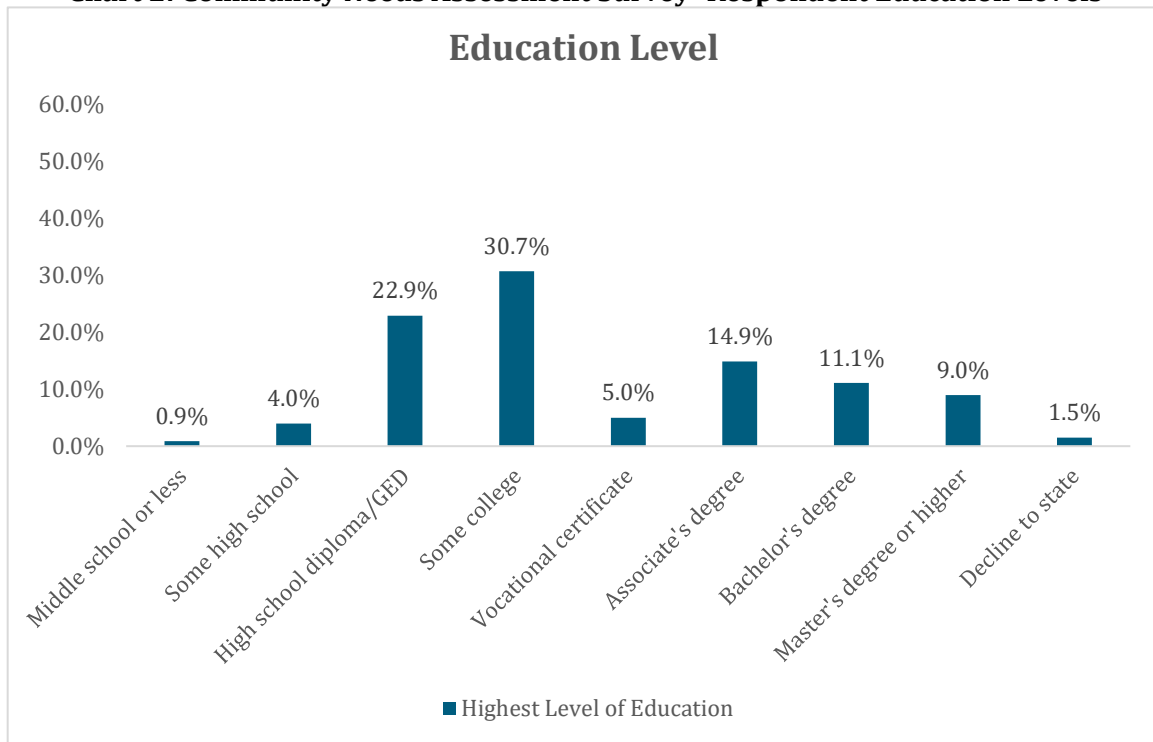


Chart 3: Community Needs Assessment Survey- Respondent Annual Household Income

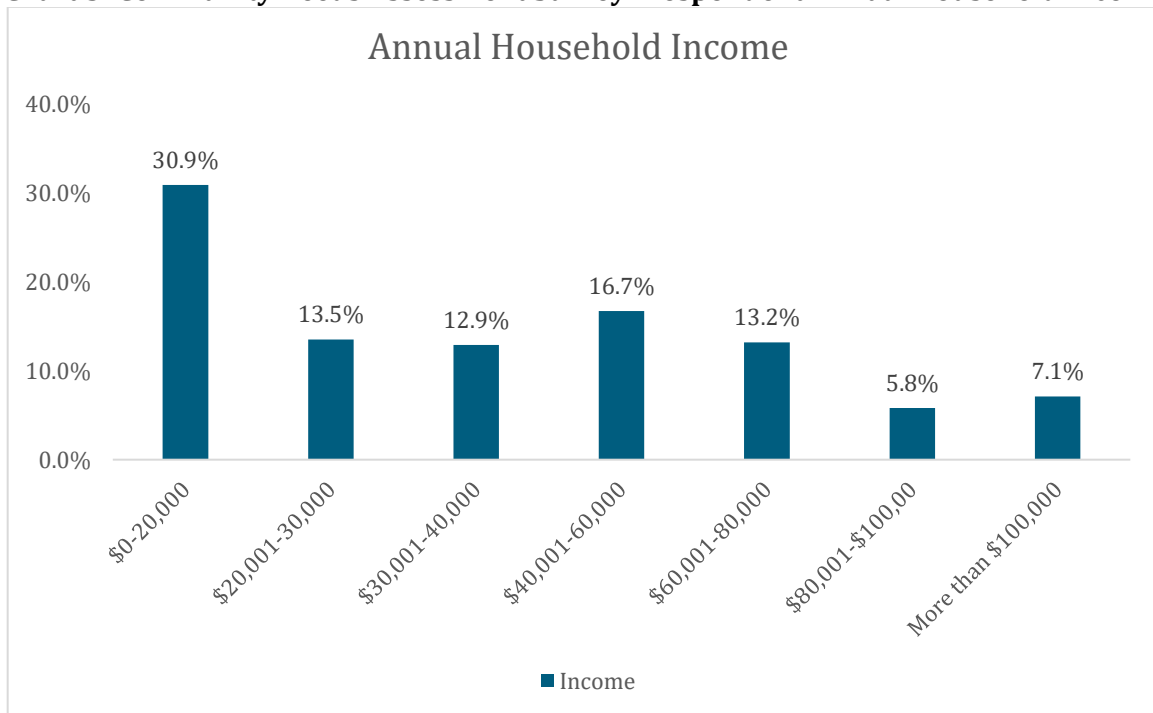
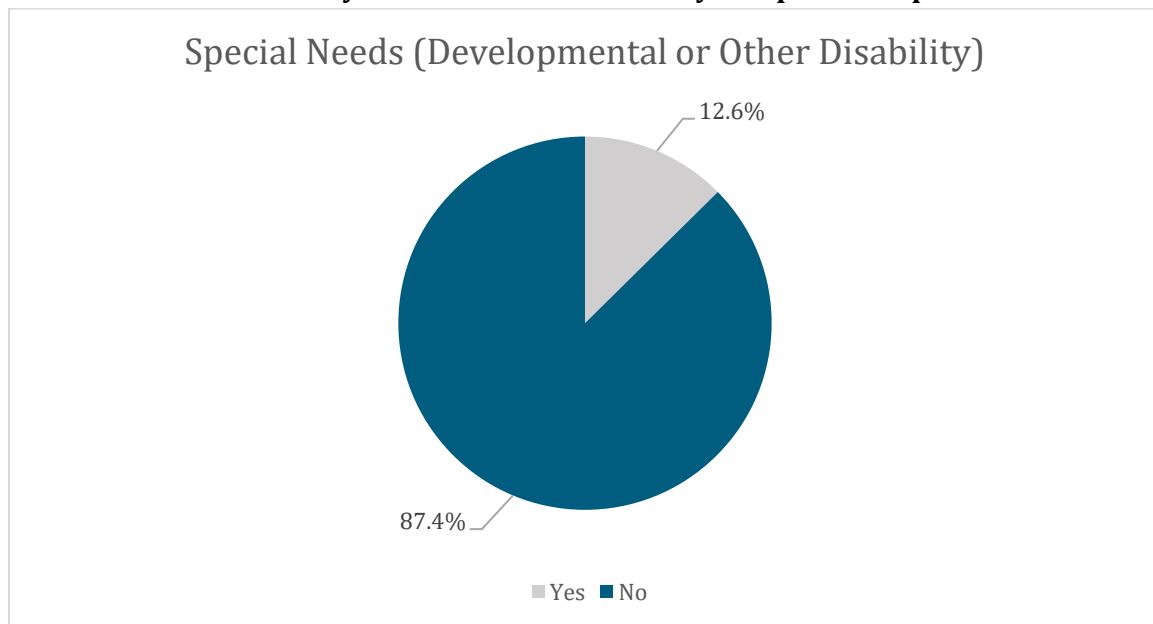


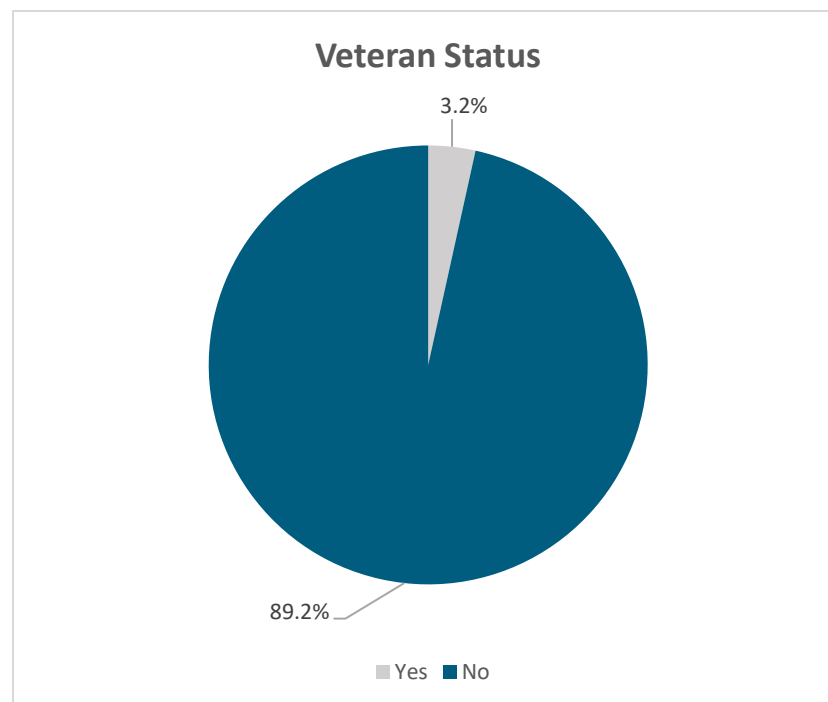


Chart 4: Community Needs Assessment Survey- Respondent Special Needs



When asked to identify their special needs, the following responses were provided across participants in the survey: Wheelchair, ADHD, back injury, autistic, cognitive defects, COPD with oxygen use, deaf, dyslexic, learning disability, mental health disabilities (including PTSD, borderline personality disorder, anxiety, depression, anorexia, bipolar disorders), drug and alcohol problems, chronic pain, airway dysfunction, speech impairment, heart issues, hypertension, and arthritis.

Chart 5: Community Needs Assessment Survey- Respondent Veteran Status





Section 2: Tribal Community Housing Profile

Information collected in this section was meant to help the Tribe understand the current housing status of the community to support future planning and development of Tribal Member housing. This section was focused on capturing the basic housing information for the Hoopa Valley Tribal Community to create a housing profile focused on the following areas:

- Location and Composition of Household
- Condition and Satisfaction with Current Housing
- Housing Costs
- Problems with Current Residence
- Future Housing Needs

Individuals provided information about both their current and future housing status and needs. In terms of current housing, the majority of people reported living on the Hoopa Valley Reservation (Location of residence shown in Chart 6) as a single family with school-aged children (Composition shown in Chart 7). Findings highlighted a need for additional housing options, assistance with paying for housing, and the need for updated housing with improved utility and infrastructure. These support the Tribe's projects aimed at housing expansion and rehabilitation (Natinixwe Elder Village, Elder Housing Rehabilitation, Student Housing, Campbell Field; See Appendix D), as well as fiscal and housing infrastructure support (Down Payment Assistance, Microgrid Development, Clean Drinking Water; See Appendix D)

Additional Comments: Current Housing Situation

Additional comments about the current housing situation captured through open questions at the end of this section included:

- "I live in a two-story house. I would like a single story, maybe on the Reservation."
- "My home is 22 years old. Time to start remodeling or buy new."
- "My rent is too high."
- "[Put] Tesla batteries for every Tribal home on the Reservation and solar and wind combination."
- "We need solar and alternative power options."



Chart 6: Community Needs Assessment Survey- Respondent Location of Residence

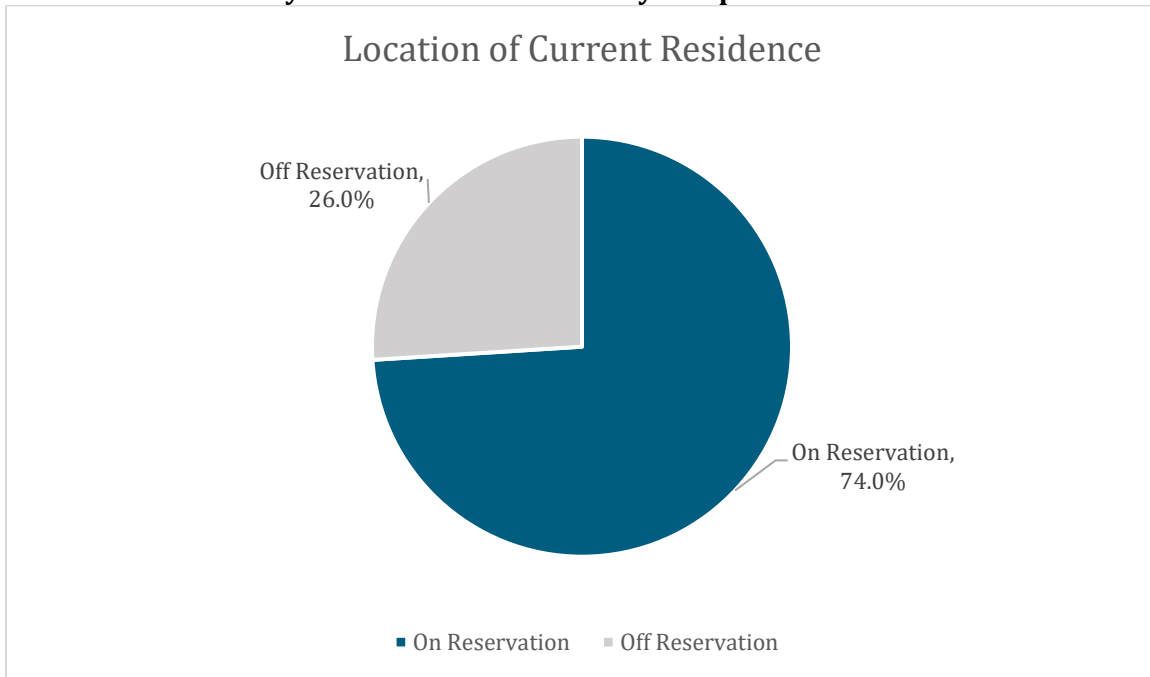
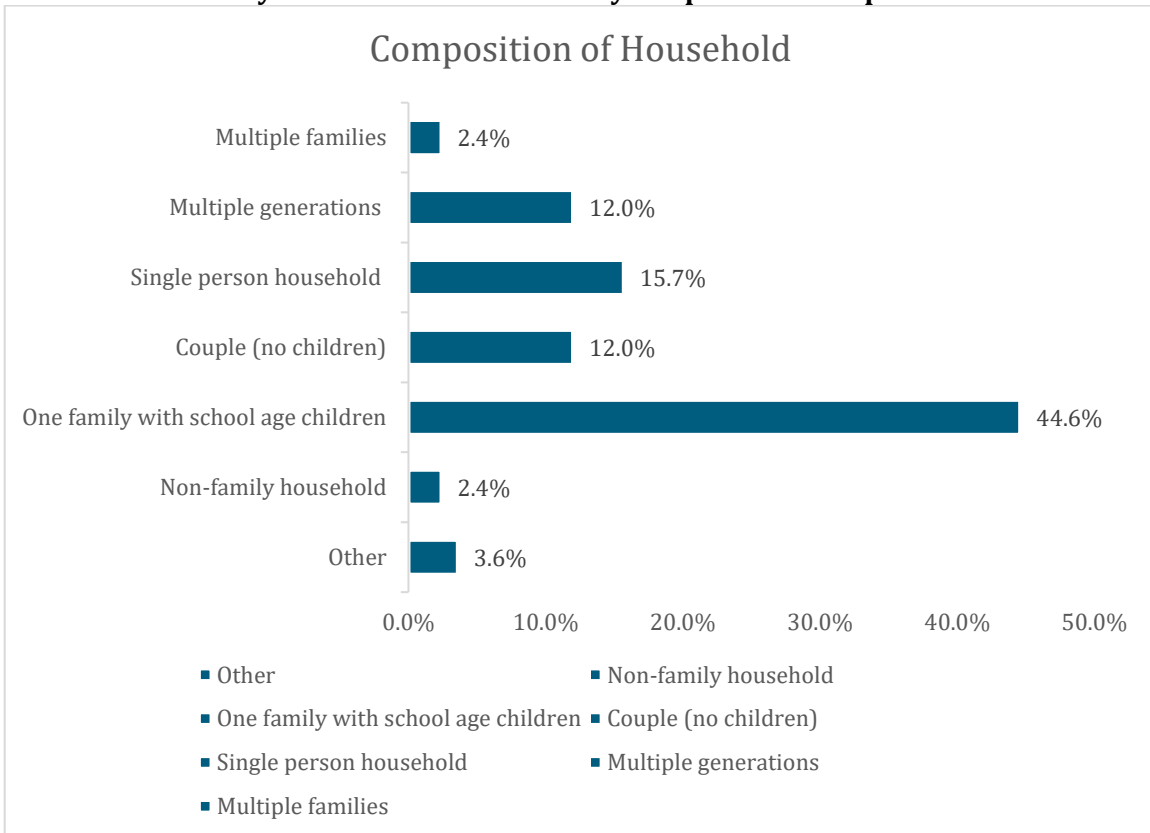


Chart 7: Community Needs Assessment Survey-Respondent Composition of Household



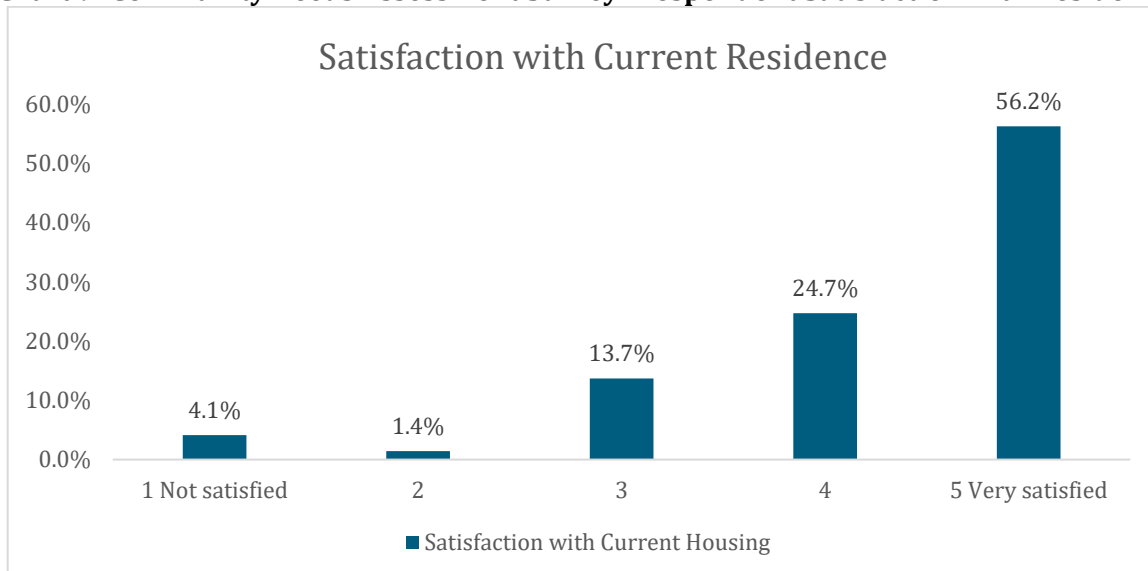
Condition and Satisfaction with Current Housing

Participants of the needs assessment were asked to rate the condition of their current housing and their satisfaction with their housing situation(s). Approximately 84% of individuals rated the condition of housing as 'good' or 'excellent,' but 16% rated it as 'adequate' or 'poor' (Housing condition information shown in Chart 8). Just over half of the participants were 'very satisfied' with their housing (Housing satisfaction shown in Chart 9). For those with less ideal housing situations, projects should be aimed at supporting renovation/rehabilitation and expanding access to housing options (Natinixwe Elder Village, Elder Housing Rehabilitation, Student Housing, Campbell Field; See Appendix D).

Chart 8: Community Needs Assessment Survey- Respondent Condition of Residence



Chart 9: Community Needs Assessment Survey- Respondent Satisfaction with Residence





Housing Costs

The survey indicated that 57.8% of individuals within the community currently pay mortgage or rent (Mortgage and rent data included in Chart 10), with average monthly housing payments totaling about \$1,000 or more (Average monthly housing payment data included in Chart 11).

Chart 10: Community Needs Assessment Survey- Respondent Monthly Mortgage/ Rent Payment

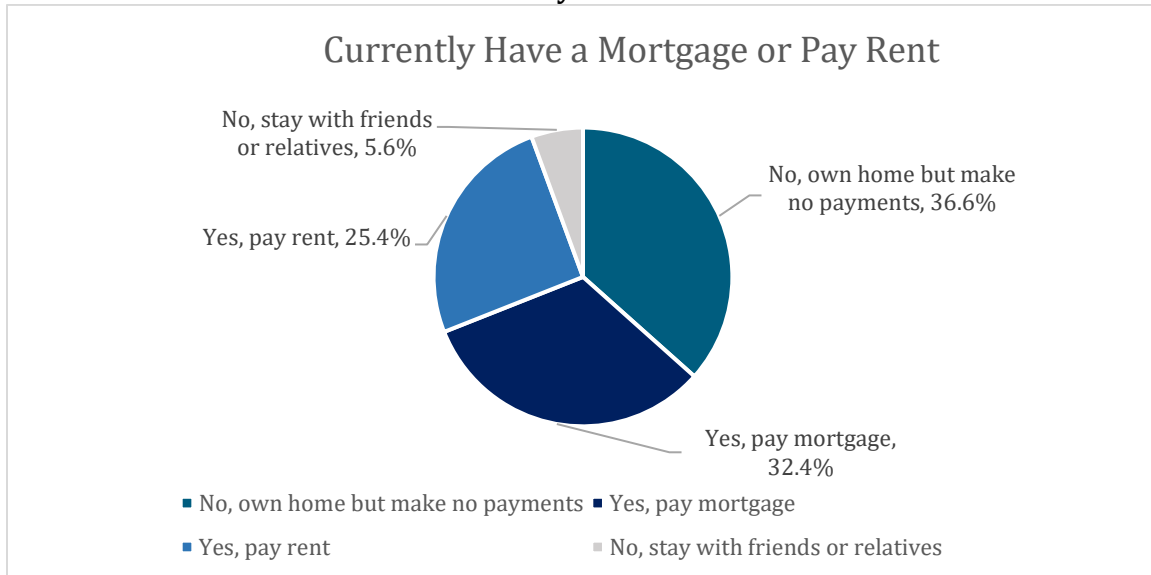
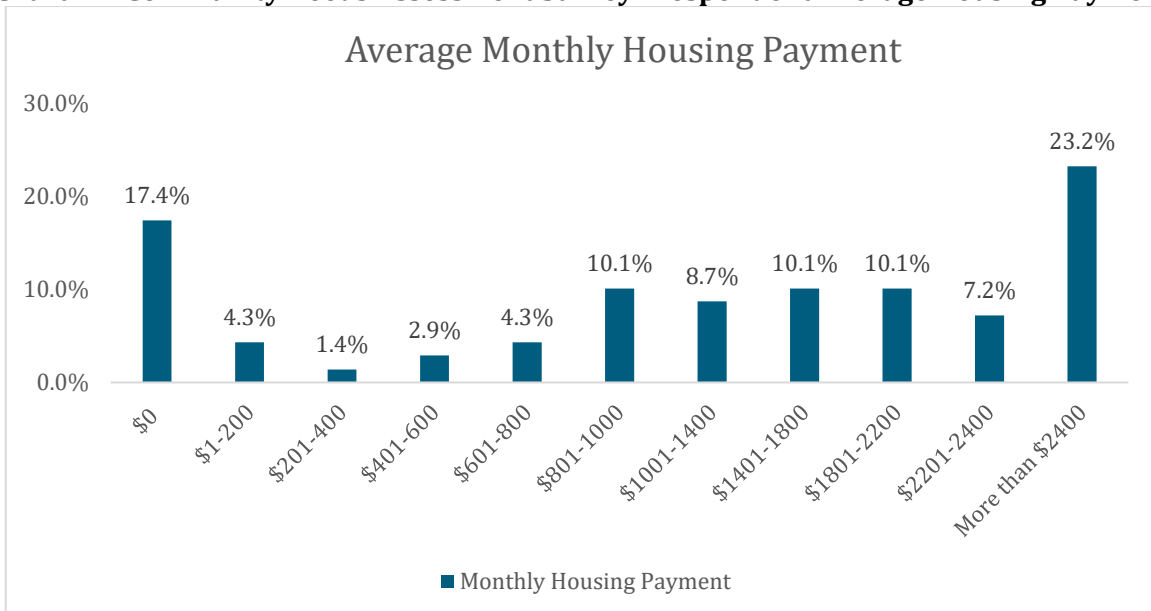


Chart 11: Community Needs Assessment Survey- Respondent Average Housing Payment



Problems with Current Residence

Approximately 30% of individuals would like to remodel or make repairs to their current residence, and nearly 15% would like better energy efficiency. A total of 25% of individuals reported no problems with their current residence (Full response information included in Table 1). For those with less ideal housing situations, projects should be aimed at supporting renovation/rehabilitation and expanding access to housing options (Natinixwe Elder Village, Elder Housing Rehabilitation, Student Housing, Campbell Field; See Appendix D). The implementation of the Tribal Microgrid may support better energy efficiency (See Appendix D).

Table 1: Community Needs Assessment Survey- Respondent Problems with Residence

Problem	Respondents (%)
Need to make repairs	25.3%
Need to remodel	28.9%
Add on to current residence	15.7%
Need to modify home for a disabled person	9.6%
Need to modify home to meet needs of elderly person	4.8%
Build home but on same lot	4.8%
Need better energy efficiency	14.5%
Other	2.4%
No problems	25.3%

Other/additional problems with current housing were, “rent is too high” and “want my own place.”

Future Housing Needs

This section focused on understanding the housing needs of the Hoopa Valley Tribal Community. In regards to current housing needs, a majority of community members did not want to change their current living situation, and just over 20% of individuals hoped to move to a larger home (Full data shown in Chart 12).

When assessing the future housing size needs, the majority of the community felt 3- to more than 6-bedroom houses were needed, with a focus on 3-bedroom (23%) and 5-bedroom (25.7%) houses. However, about 50% of respondents reported no changes were needed or desired in their current living situation (Complete overview of housing size needs data is included in Chart 13 below).

When looking at the types of housing needed within the community, 27.4% of all responses preferred single-family housing, including single-family detached and manufactured housing. However, a majority of the community (61.6%) felt there was no significant need for different types of housing than what was already in place (full data shown in Chart 14).

The community was also asked to provide the monthly amount they would be willing to pay for housing in the future. The highest two responses were \$1,401-\$1,800 (15.5%), and \$1,801-\$2,200(16.9%) per month, and the third highest response was \$2,201-2,400 (9.9%) per month. Most (42.3%) of the respondents would pay between \$1,401-\$2,200 per month for housing (Complete community input is shown in Chart 15). **Please note: 29.6% of respondents marked non applicable in their responses in this section.**



The majority of participants did not think improved housing options were a priority, which means community feedback indicates the need for some but not extensive housing expansion projects. Tribal expansion projects should be responsive to those who are not satisfied with housing options and increase the availability of single-family housing with a slightly increased monthly payment. These projects include Natinixwe Elder Village, Elder Housing Rehabilitation, Student Housing, Campbell Field (See Appendix D), or other areas the Tribe may expand housing options in the future. It will also be important to support Down Payment Assistance for those who would like to own a home rather than rent.

Chart 12: Community Needs Assessment Survey- Respondent Changes to Living Situation

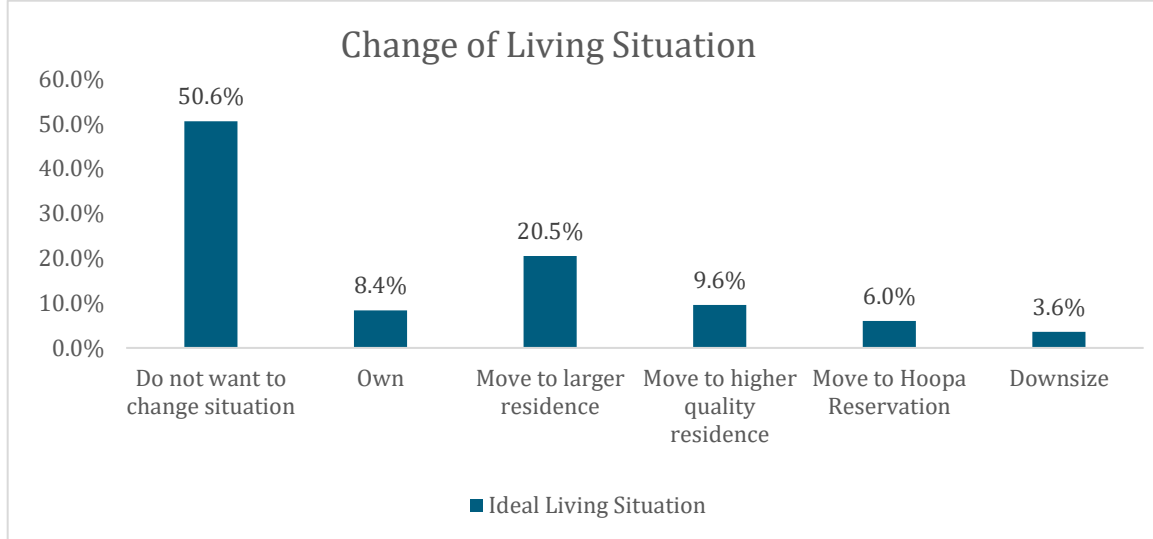


Chart 13: Community Needs Assessment Survey- Respondent Future Housing Size Needs

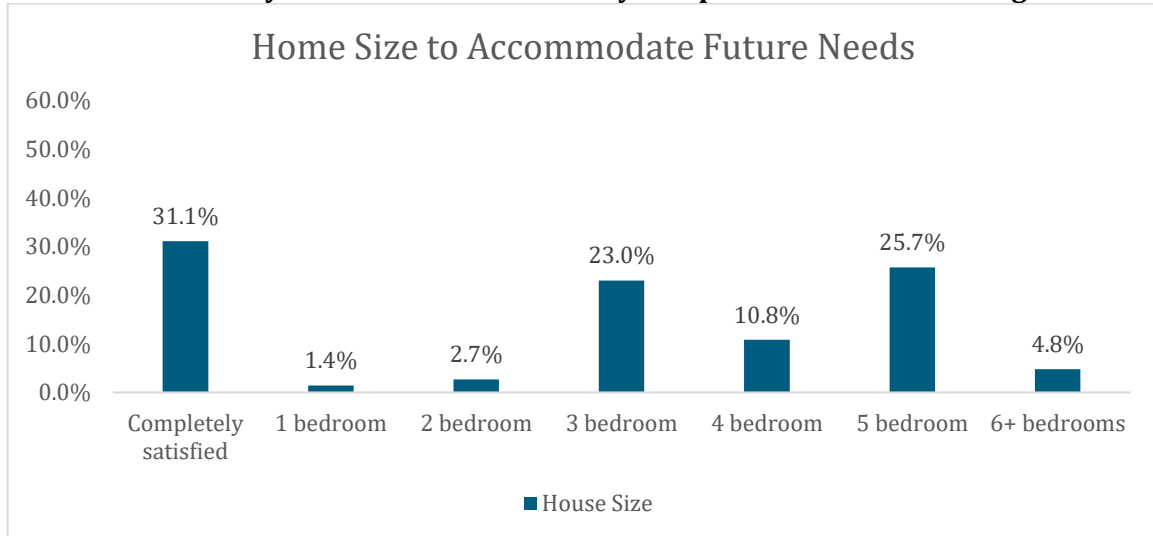
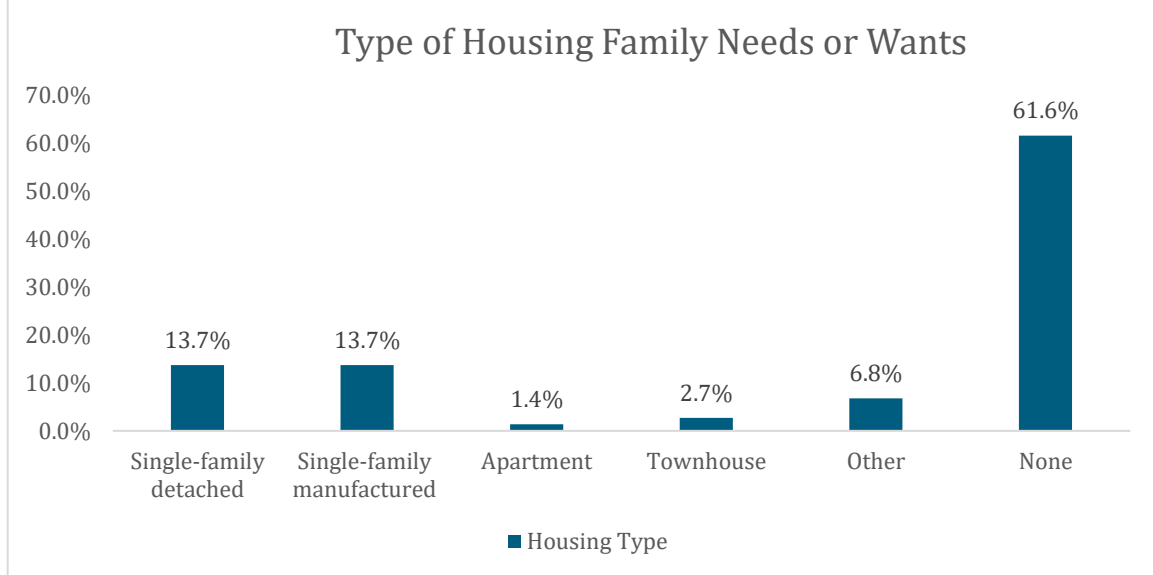


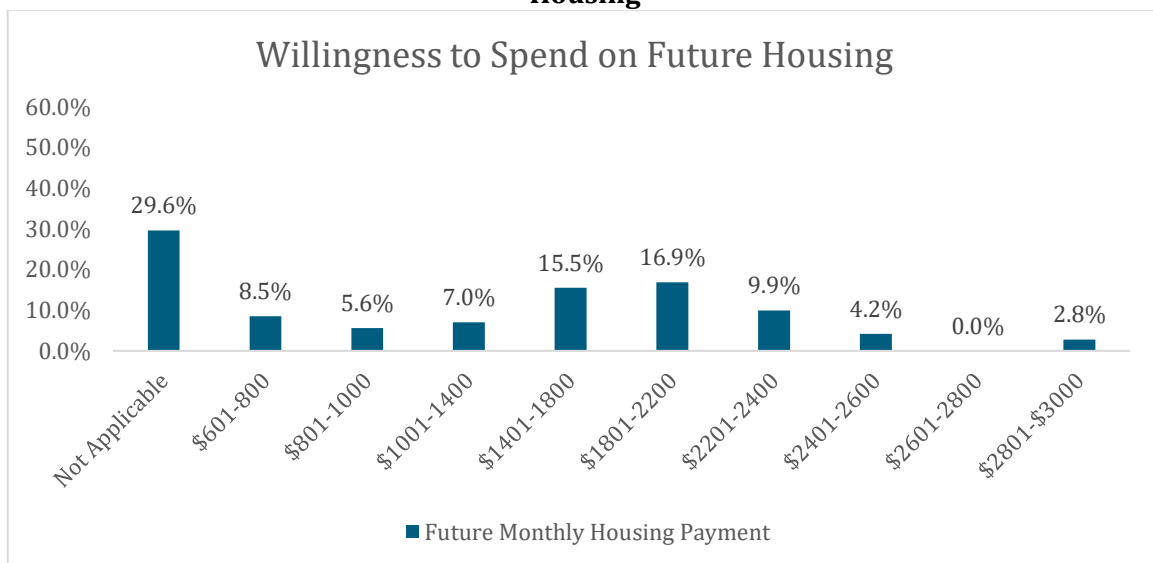


Chart 14: Community Needs Assessment Survey- Respondent Future Housing Type Needs



Other/additional types of desired housing were upgraded homes or self-build homes.

Chart 15: Community Needs Assessment Survey- Respondent Willingness to Spend on Future Housing



Section 3: Support for Hoopa Valley Housing Projects

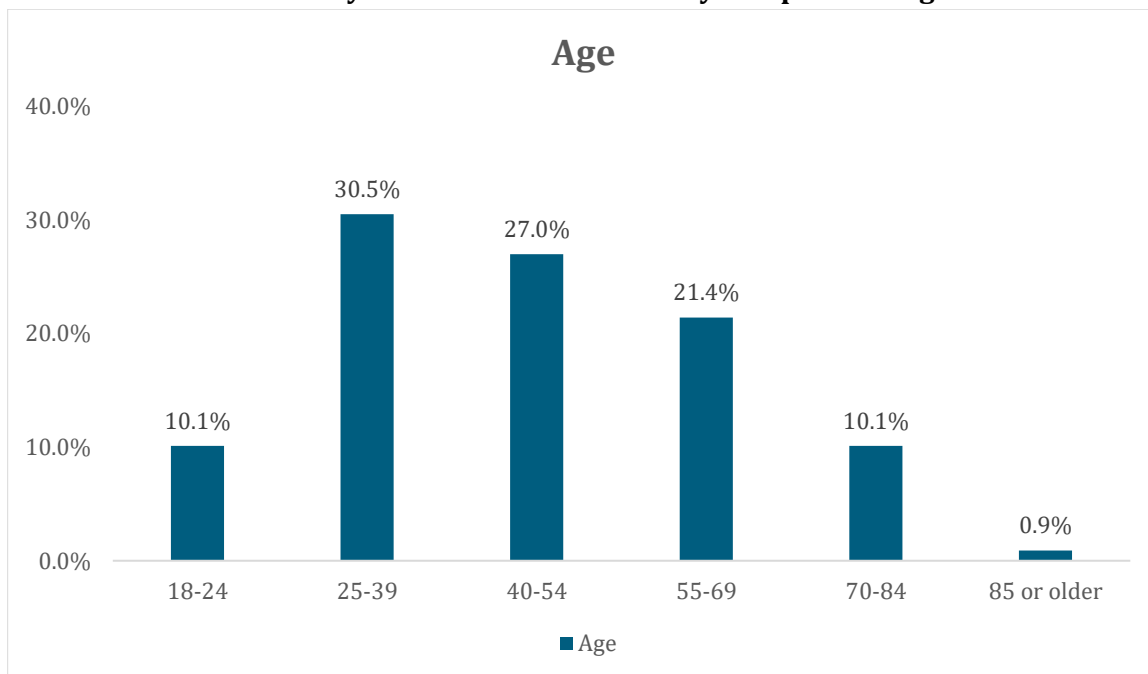
Information in this section comes from the multiple sections throughout the community needs assessment survey and provides support for specific Hoopa Valley housing projects. Findings highlight a need for additional housing options, assistance with paying for housing, and the need for updated housing with improved utility and infrastructure. These support the Tribe's projects aimed at housing expansion and rehabilitation, as well as fiscal and housing infrastructure support. A summary of each project with its corresponding data are provided below.

Note: Charts and tables in this section come from other sections throughout this document and may be referenced multiple times because of relevance to specific project plan narratives. The charts and tables in this section are not numbered to reduce confusion and support easier utilization of project narratives.

Natinixwe Elder Village

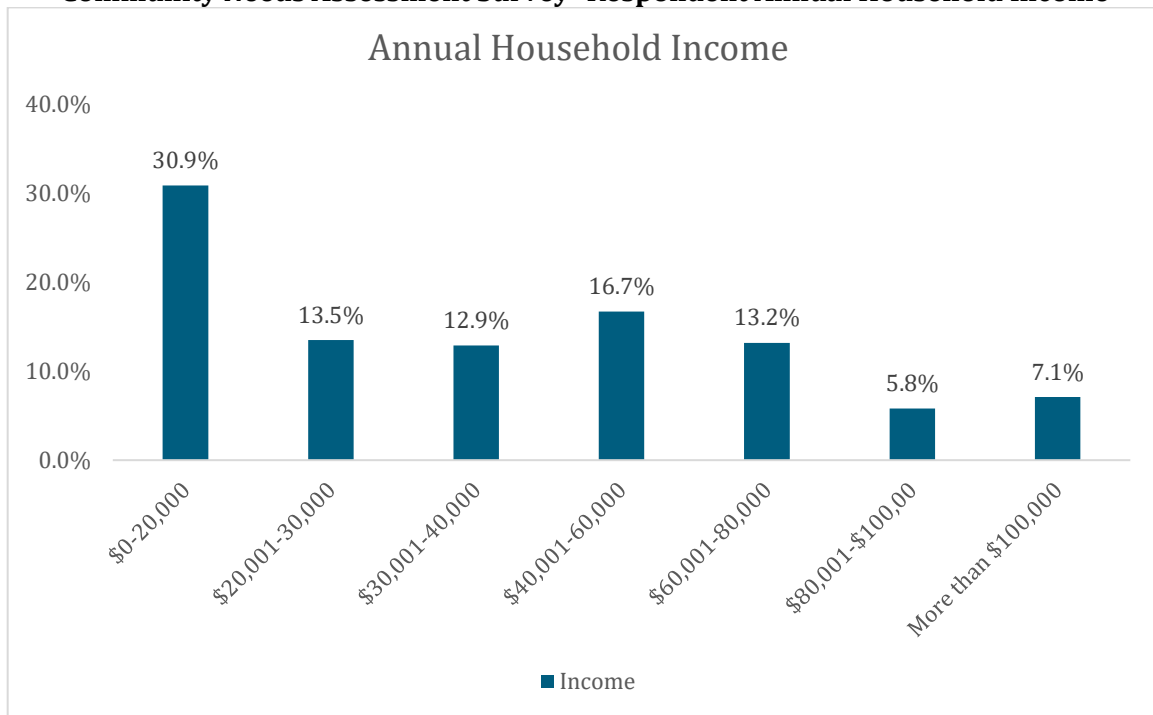
The community needs assessment surveyed individuals aged 18 and above on housing needs, and 30% of the participants in the assessment were aged 55 and older. Among participants who completed the community needs assessment, the most frequently reported household income level was less than \$20,000, and almost 50% of annual household incomes fell below \$40,000.

Community Needs Assessment Survey- Respondent Ages



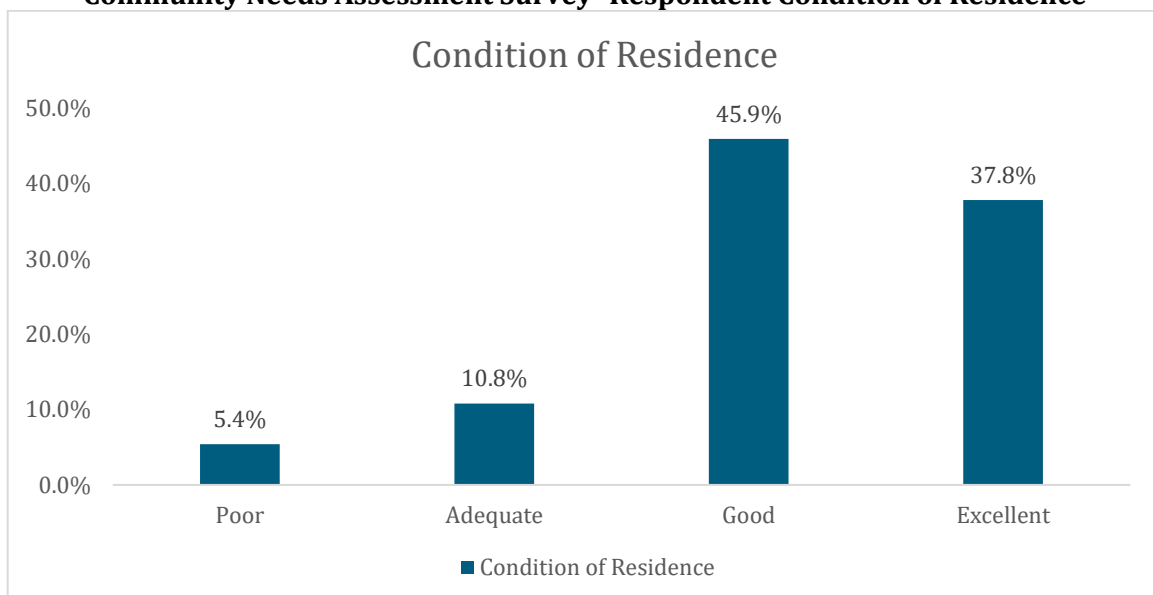


Community Needs Assessment Survey- Respondent Annual Household Income



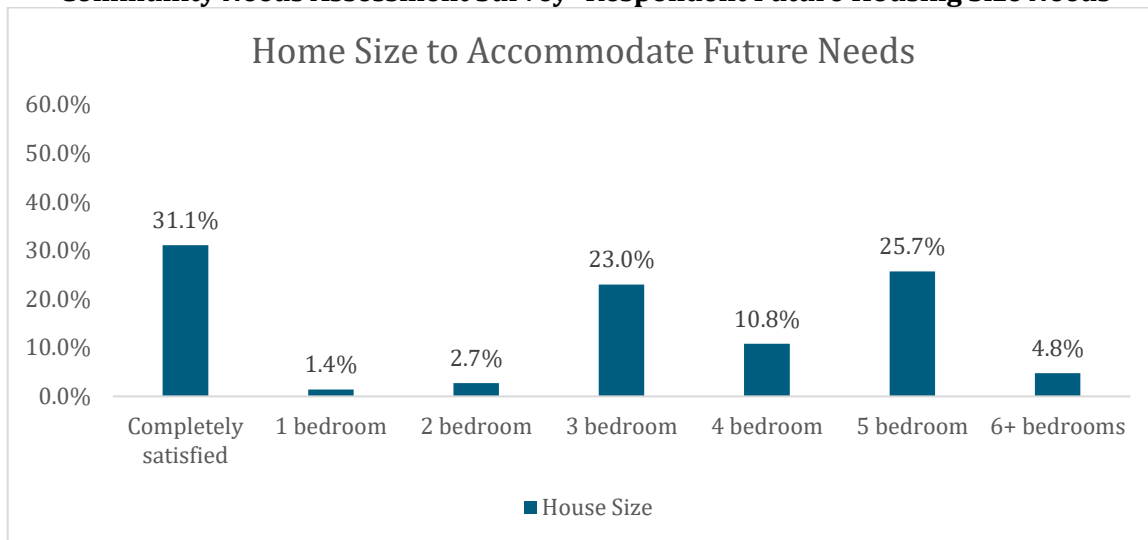
Low-income rental housing for individuals aged 55 and older would provide support to elders in the community who cannot afford a higher monthly rent or mortgage payment but have additional housing needs. Approximately 85% of individuals who took the community needs assessment survey are satisfied with the condition of their housing, but there are about 15% who report the condition to be “adequate” or “poor.”

Community Needs Assessment Survey- Respondent Condition of Residence

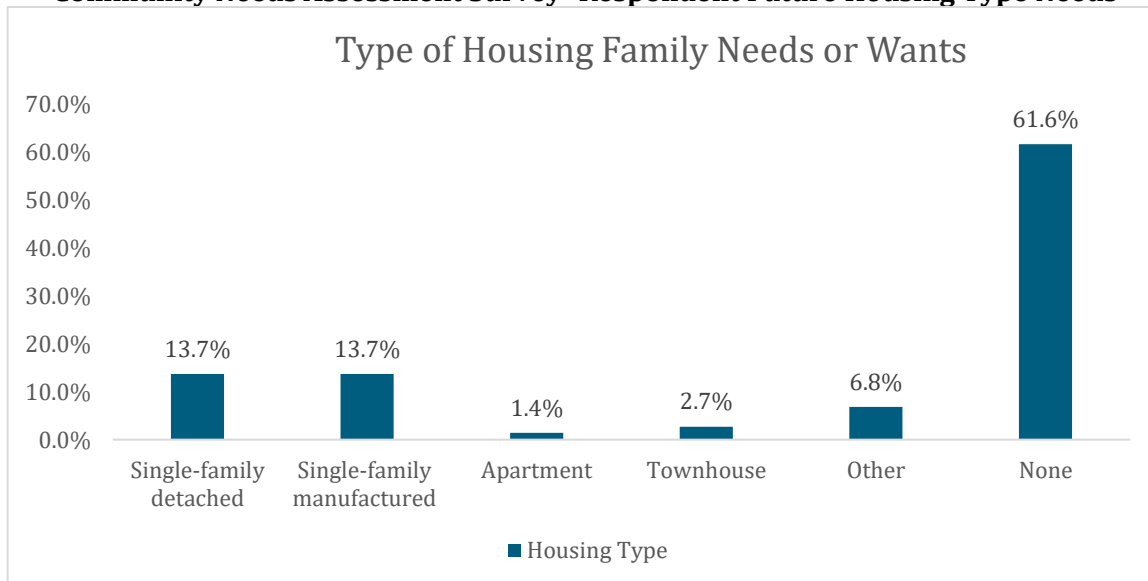


Over a quarter of individuals who participated in the needs assessment (27.4%) would like a single-family home if they changed to a new housing location (rather than an apartment or townhome). A total of 23.0% of Tribal Members would like a 3-bedroom home to accommodate future needs, while 10.8% would like 4 bedrooms, and 25.7% would like 5 bedrooms. These data can aid in the development of floor plans for current and future housing expansions.

Community Needs Assessment Survey- Respondent Future Housing Size Needs



Community Needs Assessment Survey- Respondent Future Housing Type Needs

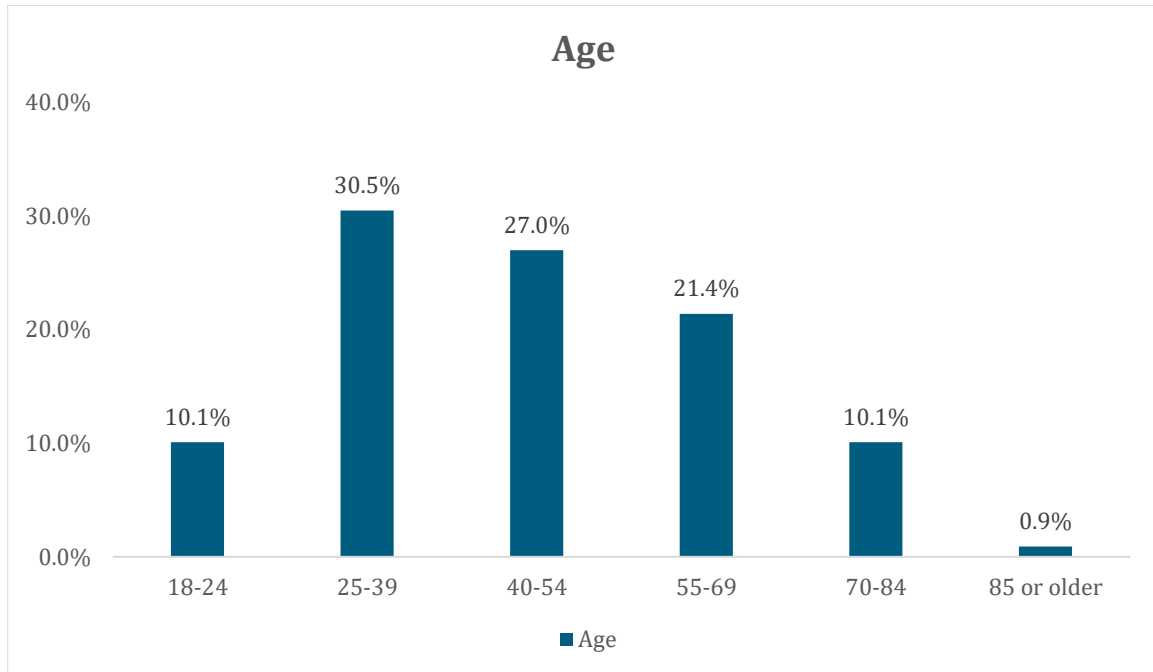


Elder Housing Rehabilitation

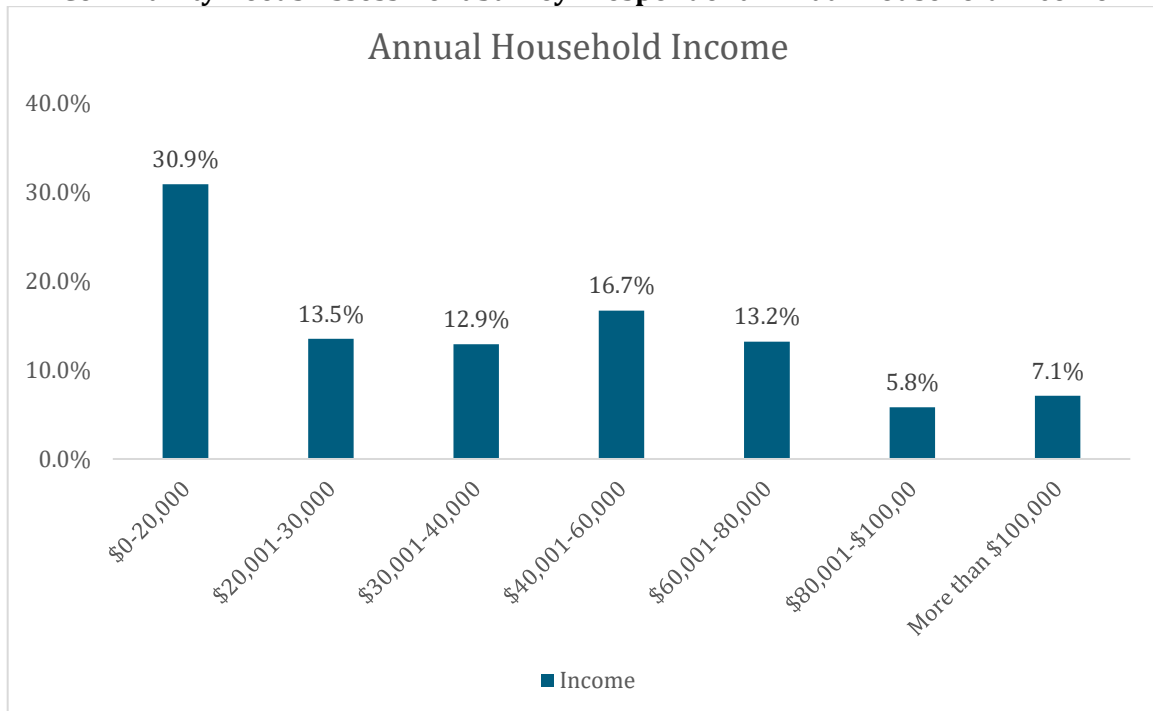
The community needs assessment surveyed individuals aged 18 and above on housing needs, and 30% of the participants in the assessment were aged 55 and older. Among participants who completed the community needs assessment, the most frequently reported household income level

was less than \$20,000, and almost 50% of annual household incomes fell below \$40,000.

Community Needs Assessment Survey- Respondent Ages



Community Needs Assessment Survey- Respondent Annual Household Income



Assistance with rehabilitation of existing homes would be beneficial to many in the community. Approximately 85% of individuals who took the community needs assessment are satisfied with the



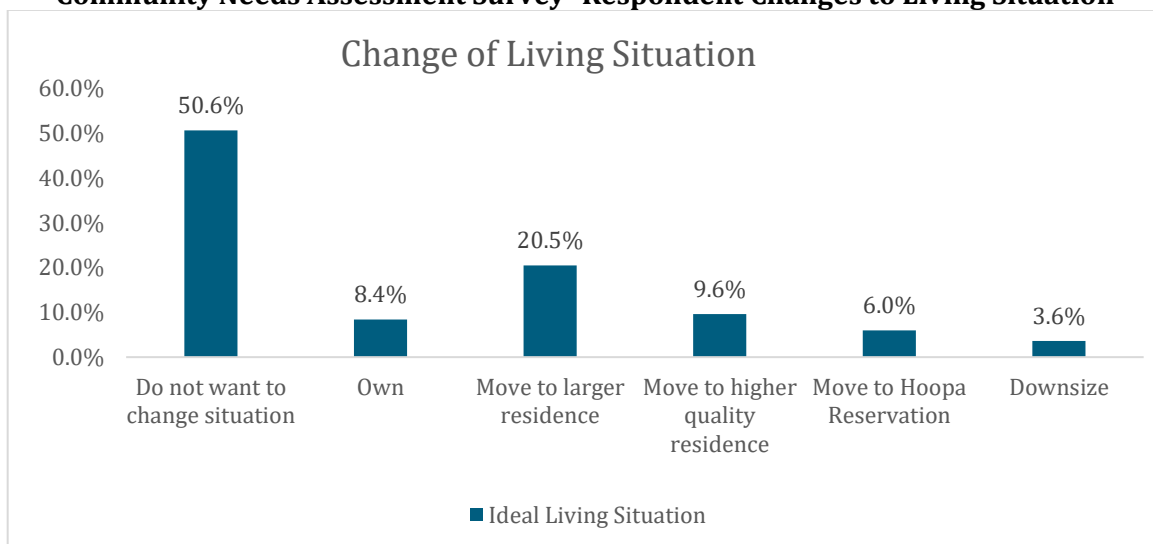
condition of their housing, but there are 15% who report the condition to be “adequate” or “poor.”

Community Needs Assessment Survey- Respondent Condition of Residence



A total of 50.6% of community members did not want to change their current living situation/location, but there were problems with Tribal Members’ current housing, which were reported to be the: need to make repairs (25.3%), need to remodel (28.9%), need to modify home for disabled person (9.6%), and need to modify home to meet needs of an elderly person (4.8%).

Community Needs Assessment Survey- Respondent Changes to Living Situation





Community Needs Assessment Survey- Respondent Problems with Residence

Problem	Respondents (%)
Need to make repairs	25.3%
Need to remodel	28.9%
Add on to current residence	15.7%
Need to modify home for a disabled person	9.6%
Need to modify home to meet needs of elderly person	4.8%
Build home but on same lot	4.8%
Need better energy efficiency	14.5%
Other	2.4%
No problems	25.3%

Other/additional problems with current housing were, "rent is too high" and "want my own place."

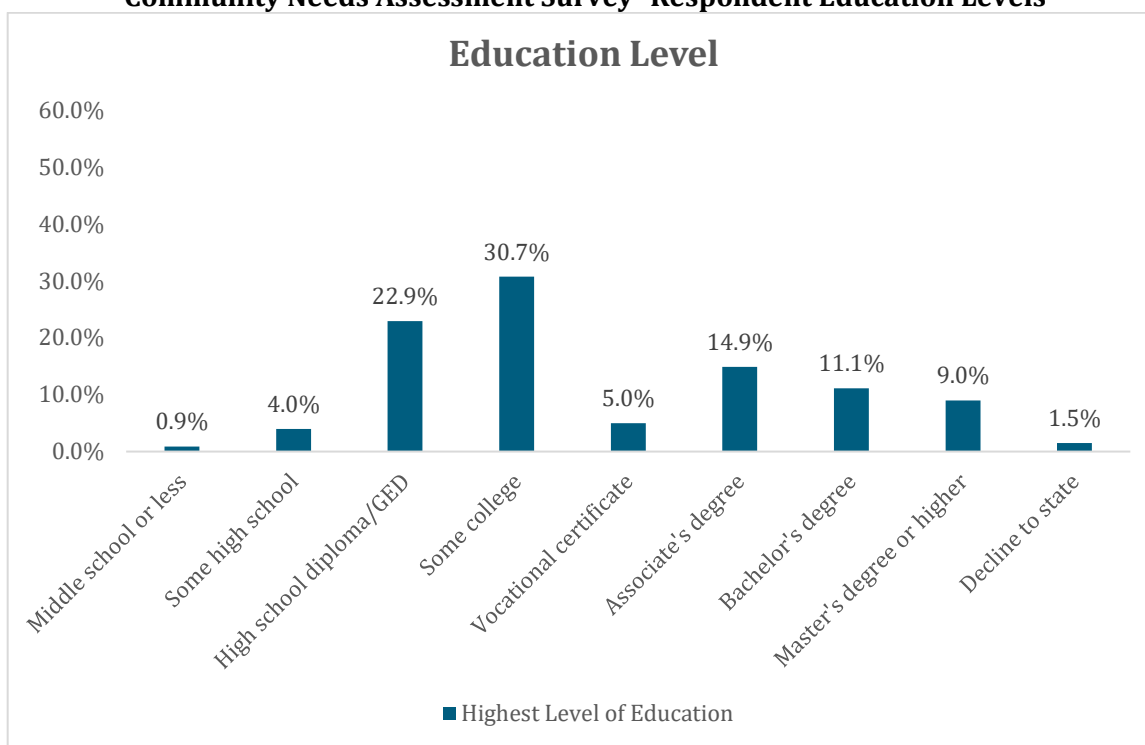
The following quote from the community needs assessment concisely summarized the need for repairs, "My home is 22 years old. Time to start remodeling or buy new."

Student Housing

Qualitative data from the community needs assessment said the Tribe should be "supporting off-reservation" members through funding, access to services, and other supports, such as housing.

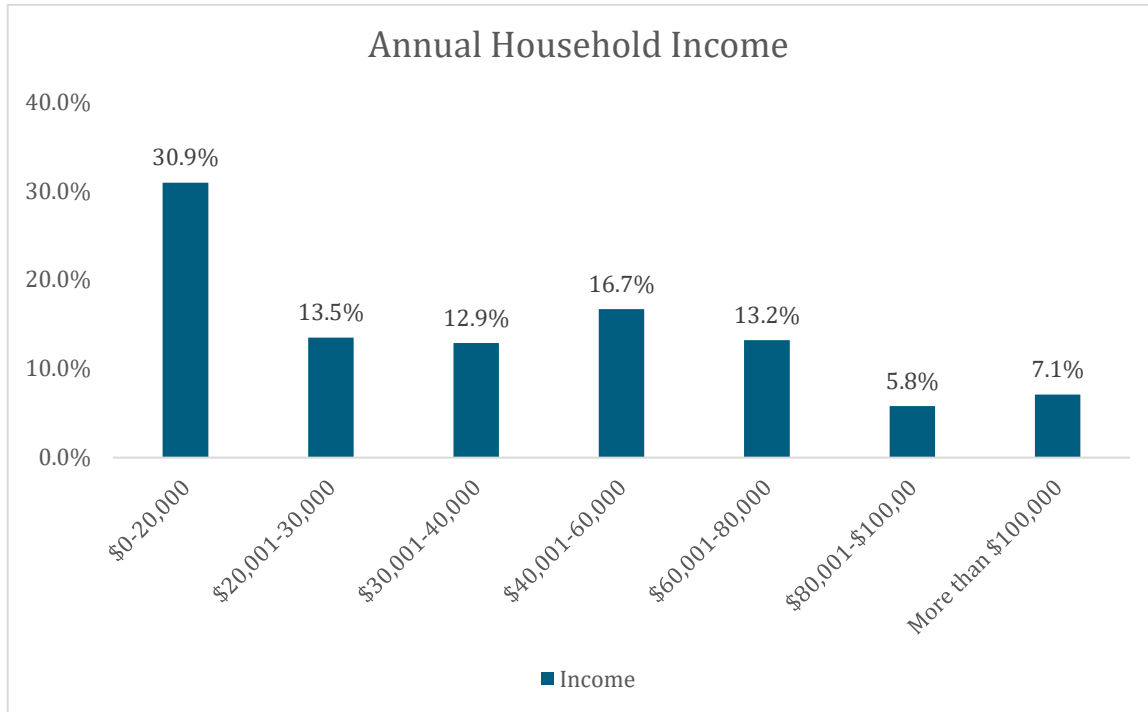
According to the community needs assessment, a total of 65% of Hoopa Valley Tribal Members do not have a college degree, although 30% of that group started college but did not finish. Support for Tribal students attending college may reduce this gap in educational achievement.

Community Needs Assessment Survey- Respondent Education Levels



Findings from the community needs assessment provides support for the student housing in other ways as well. Demographic data indicate that almost 50% of annual household incomes fell below \$40,000, which suggests paying for one household's housing may be a challenge let alone for college student housing.

Community Needs Assessment Survey- Respondent Annual Household Income

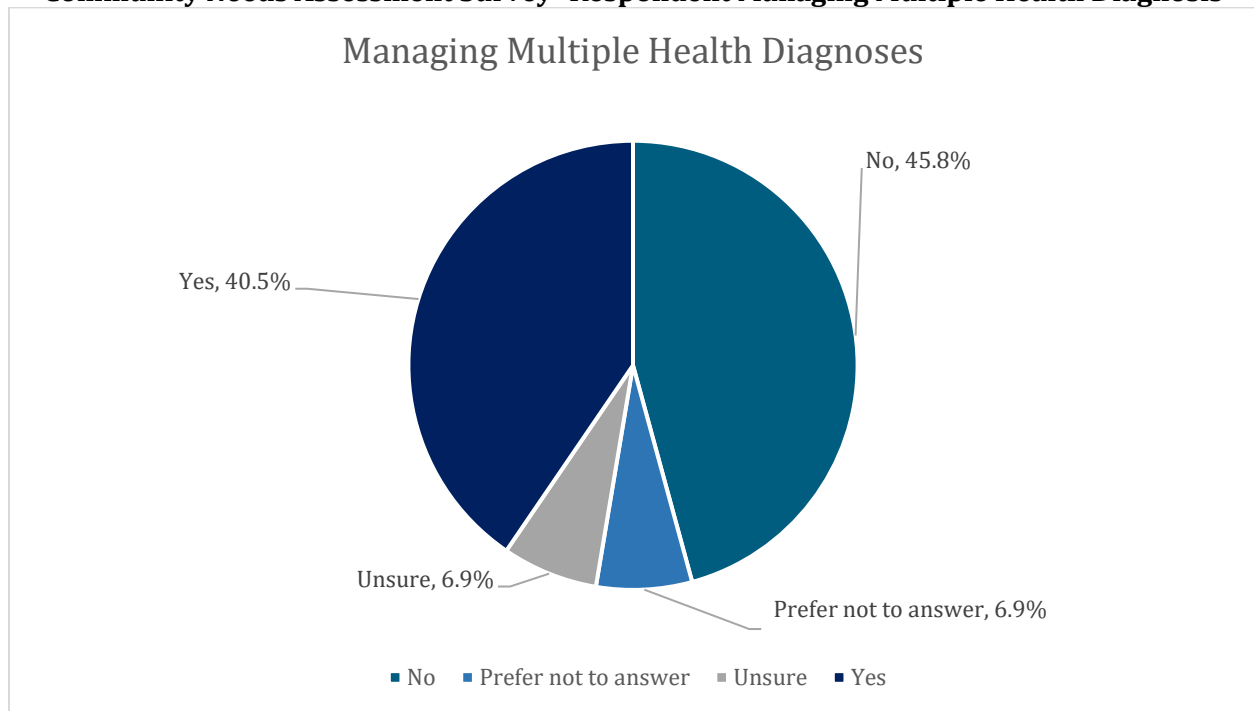


Given the health disparities that affect those from lower income backgrounds or levels of education, the investment in student housing to improve educational outcomes will positively impact the community's health and mental health (Citation: <https://health.gov/healthypeople/priority-areas/social-determinants-health>, n.d.).

Furthermore, findings from the community needs assessment also indicate that over 40% of community members are managing multiple health diagnoses, and the most frequent health concerns are diabetes, weight, high blood pressure, anxiety, depression, and eye health. Investments in student achievement in post-secondary education reduce negative chronic, infectious, mental health, and quality of life outcomes among Tribal Members (Citation: <https://health.gov/healthypeople/priority-areas/social-determinants-health>).



Community Needs Assessment Survey- Respondent Managing Multiple Health Diagnosis



Community Needs Assessment Survey- Respondent Health Care Concerns for Self & Household

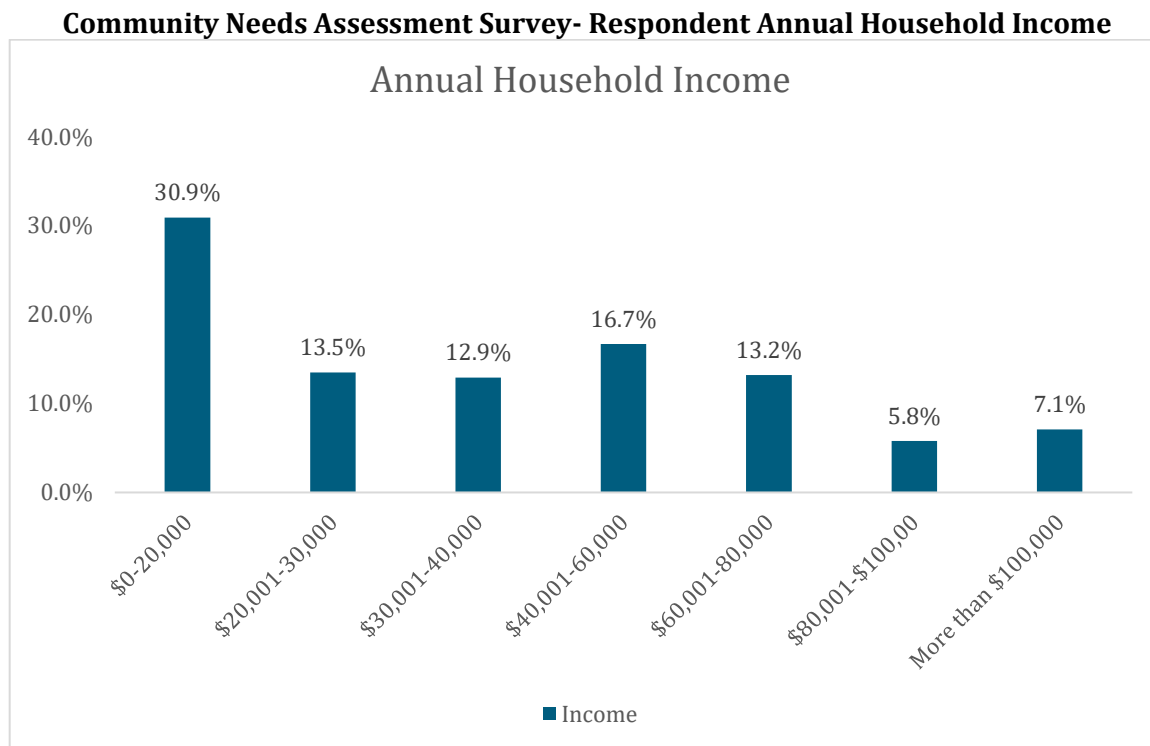
Health Care Concerns for Self or Household	Respondents (%)
Anger	9.6%
Anxiety	36.2%
Asthma	11.4%
Alcohol use	5.2%
Cancer	5.8%
Dental health	23.0%
Depression	25.9%
Diabetes	23.9%
Drug use	4.7%
Elder care/health	8.7%
Elder abuse	0.3%
Eye health	23.9%
Family conflict	5.5%
Grief	17.5%
Headaches	17.5%
Heart disease	7.9%
Hepatitis	1.2%
High blood pressure	26.5%
High cholesterol	14.3%
HIV/AIDS	0.3%
Sexual transmitted diseases	0.6%
Stroke	4.4%
Tobacco use	11.1%
Trauma/PTSD	16.0%
Vaccinations	5.0%
Violence	1.2%
Weight	26.8%
Other (Describe)	11.7% (ADHD, autoimmune disease, arthritis, dementia, COPD, endometriosis, hernia, bone spurs, allergies, PCOS, nerve and spine pain, low vitamin D, long COVID-19, violence, hormone issues, migraines, seizures, tremors, sleep apnea, stress, thyroid, bladder issues, and environmental concerns (smoke, traffic noise/speed, pollution))
None	14.3%

Transitional Housing (Off Reservation)

Qualitative data from the community needs assessment said the Tribe should be "supporting off-reservation" members through funding, access to services, and other supports, such as housing.

Demographic data indicate that almost 50% of annual household incomes fell below \$40,000, which

suggests many individuals are housing insecure. Low-income levels and housing insecurity are risk factors for homelessness, substance abuse, and poor mental health outcomes (Citation: <https://health.gov/healthypeople/priority-areas/social-determinants-health/literature-summaries/housing-instability>). Funding for transitional housing will support Tribal efforts to mediate the impacts of housing insecurity on health.



The community needs assessment indicated that two of the most frequent health concerns are anxiety and depression, with 36.2% of the community being concerned with anxiety and 25.9% with depression. Approximately 35% of Tribal Members have sometimes, often, or always not had enough food to eat or money to buy food for their family, and 25% have had power or water shut off due to an inability to pay. Transitional housing will provide supportive services for individuals who are homeless, use substances, or experience poor mental health due to depression, anxiety, or finance-related recent life stressors.

Community Needs Assessment Survey- Respondent Health Care Concerns for Self & Household

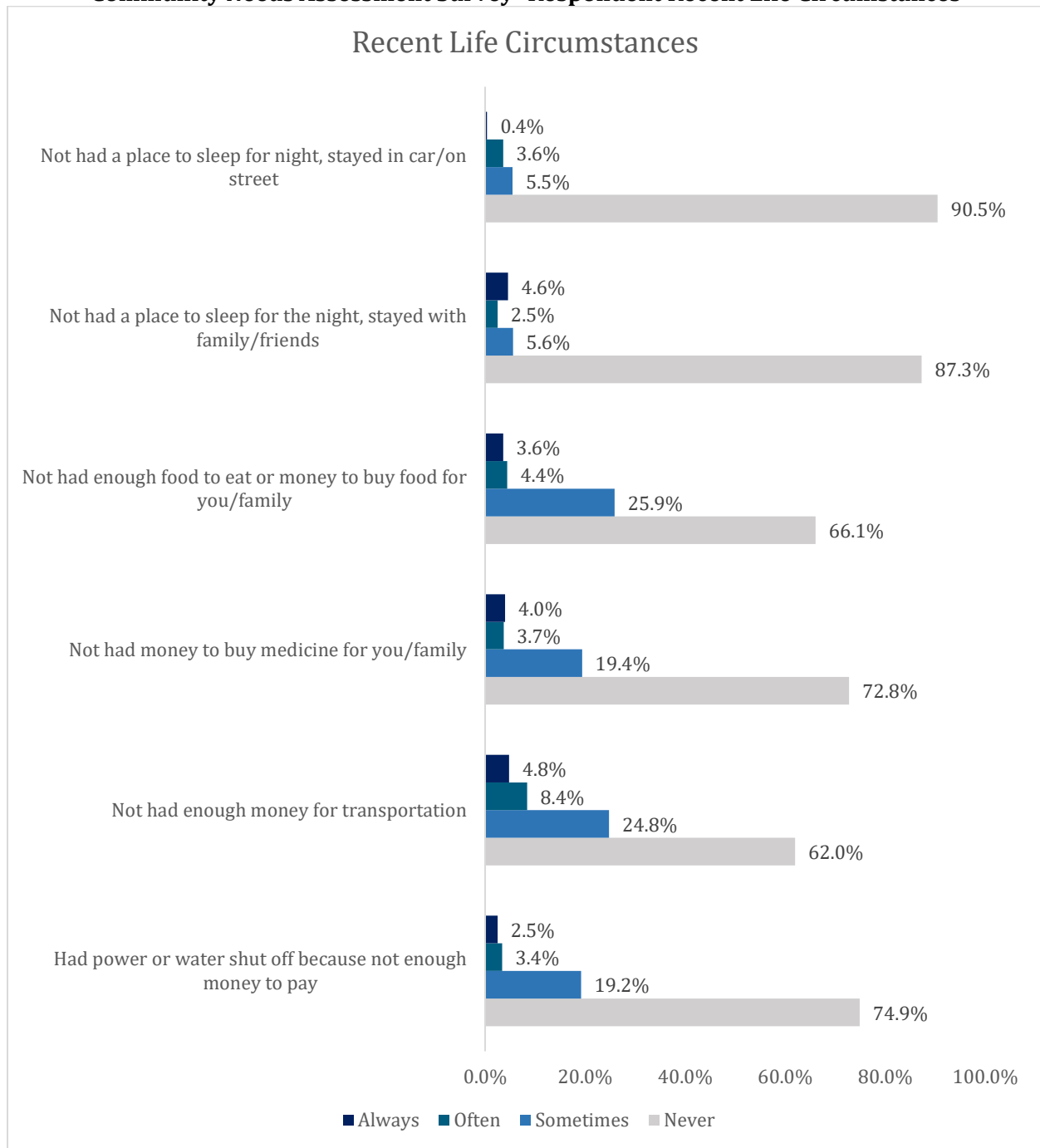
Health Care Concerns for Self or Household	Respondents (%)
Anger	9.6%
Anxiety	36.2%
Asthma	11.4%
Alcohol use	5.2%
Cancer	5.8%
Dental health	23.0%
Depression	25.9%
Diabetes	23.9%



Drug use	4.7%
Elder care/health	8.7%
Elder abuse	0.3%
Eye health	23.9%
Family conflict	5.5%
Grief	17.5%
Headaches	17.5%
Heart disease	7.9%
Hepatitis	1.2%
High blood pressure	26.5%
High cholesterol	14.3%
HIV/AIDS	0.3%
Sexual transmitted diseases	0.6%
Stroke	4.4%
Tobacco use	11.1%
Trauma/PTSD	16.0%
Vaccinations	5.0%
Violence	1.2%
Weight	26.8%
Other (Describe)	11.7% (ADHD, autoimmune disease, arthritis, dementia, COPD, endometriosis, hernia, bone spurs, allergies, PCOS, nerve and spine pain, low vitamin D, long COVID-19, violence, hormone issues, migraines, seizures, tremors, sleep apnea, stress, thyroid, bladder issues, and environmental concerns (smoke, traffic noise/speed, pollution))
None	14.3%



Community Needs Assessment Survey- Respondent Recent Life Circumstances

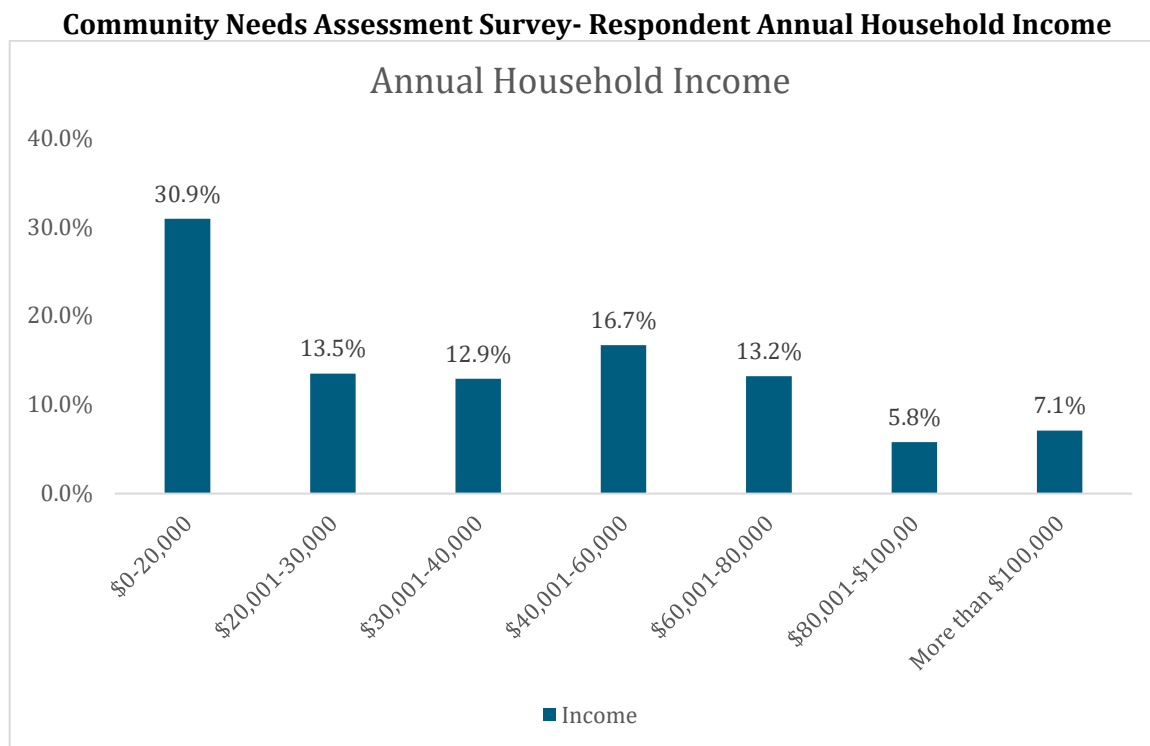


Macintosh Property

Data from the community needs assessment supported the development of laundry facilities, which is a priority project for Hoopa Valley. Specific write-in comments about community needs included the following need: "laundry services for the community."

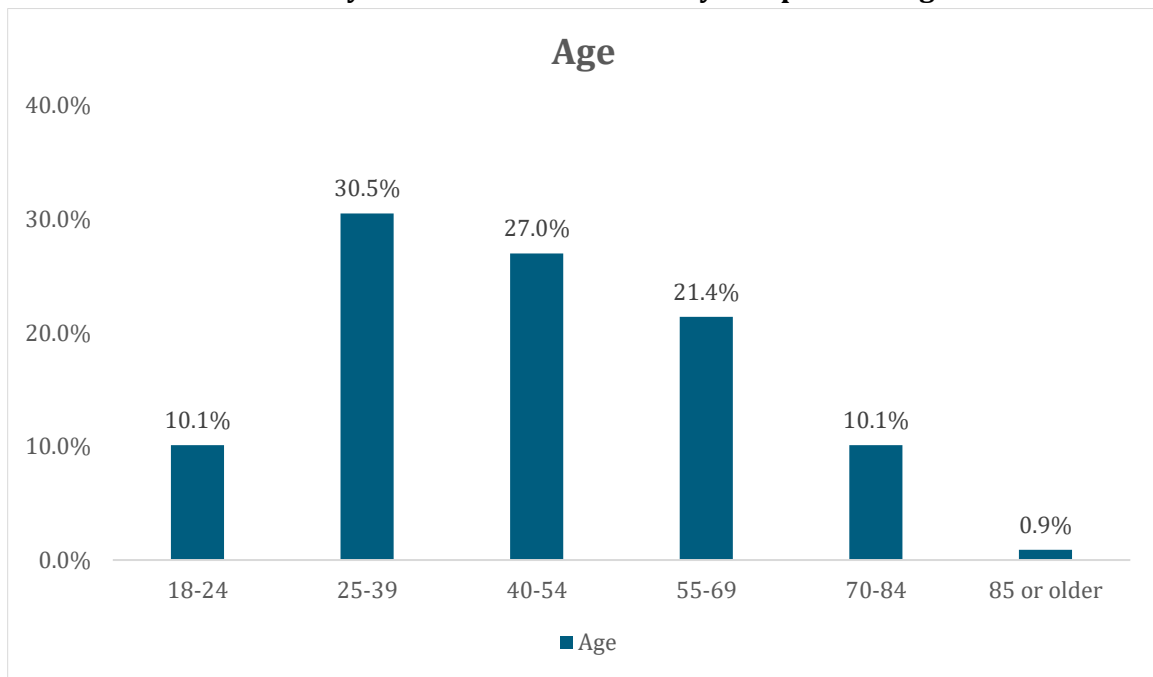
Additionally, demographic data indicate that almost 50% of annual household incomes fell below \$40,000. In-home appliances such as washers and dryers are not as frequently owned by individuals from low-income households, which is why this facility will be important to many families in the community (Citation, Figure 11:

<https://www.eia.gov/consumption/residential/data/2001/appliances/appliances.php>).

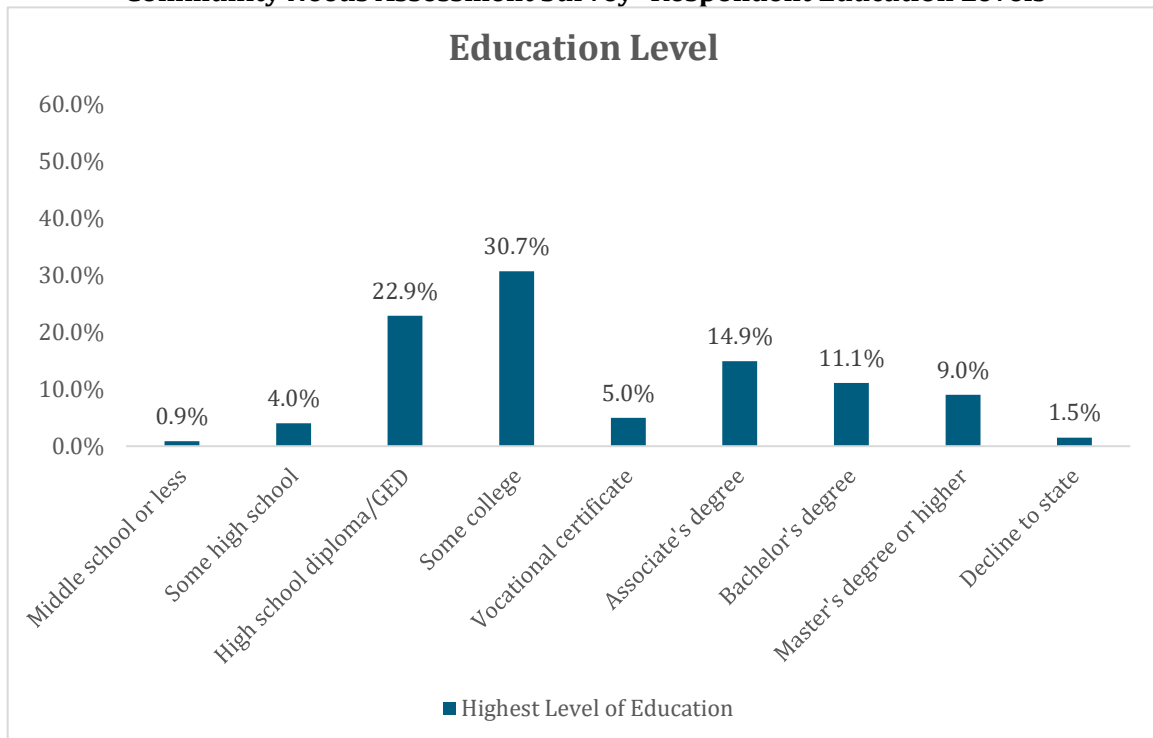


A laundry facility would also support the Tribal workforce; although 70% of individuals who participated in the community needs assessment were of working age, only 36% have a college degree or higher, and entry-level positions such as those within a laundry facility will support job creation for these individuals.

Community Needs Assessment Survey- Respondent Ages



Community Needs Assessment Survey- Respondent Education Levels

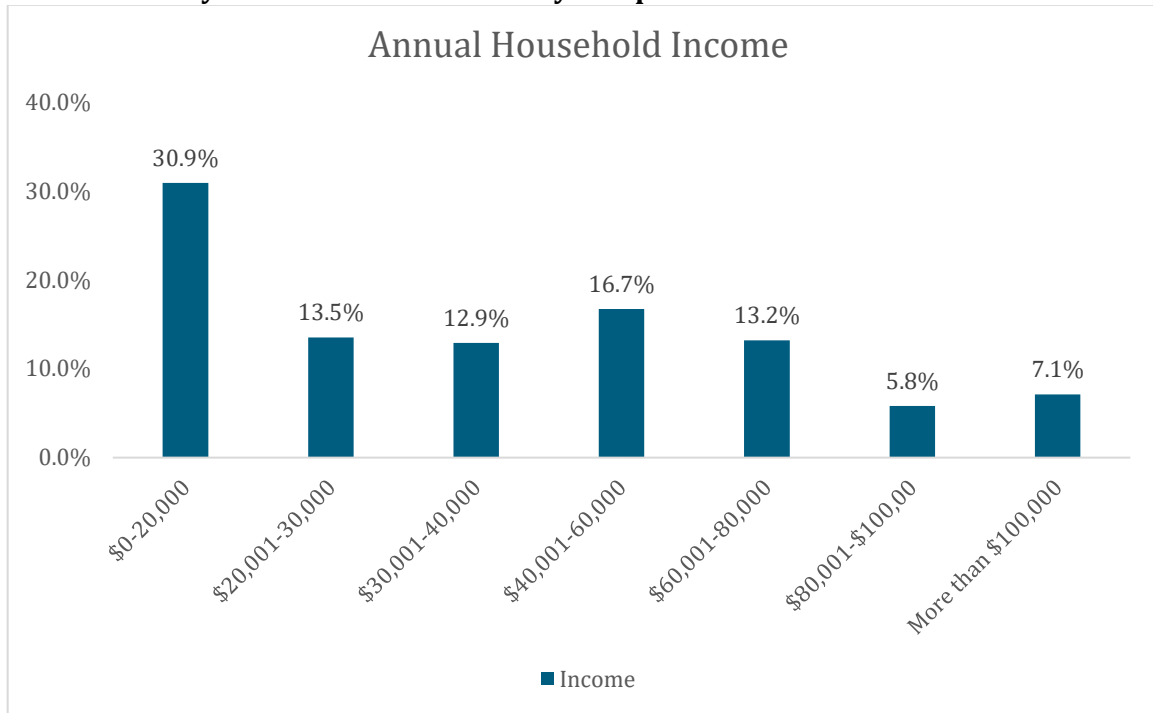


Down Payment Assistance Fund

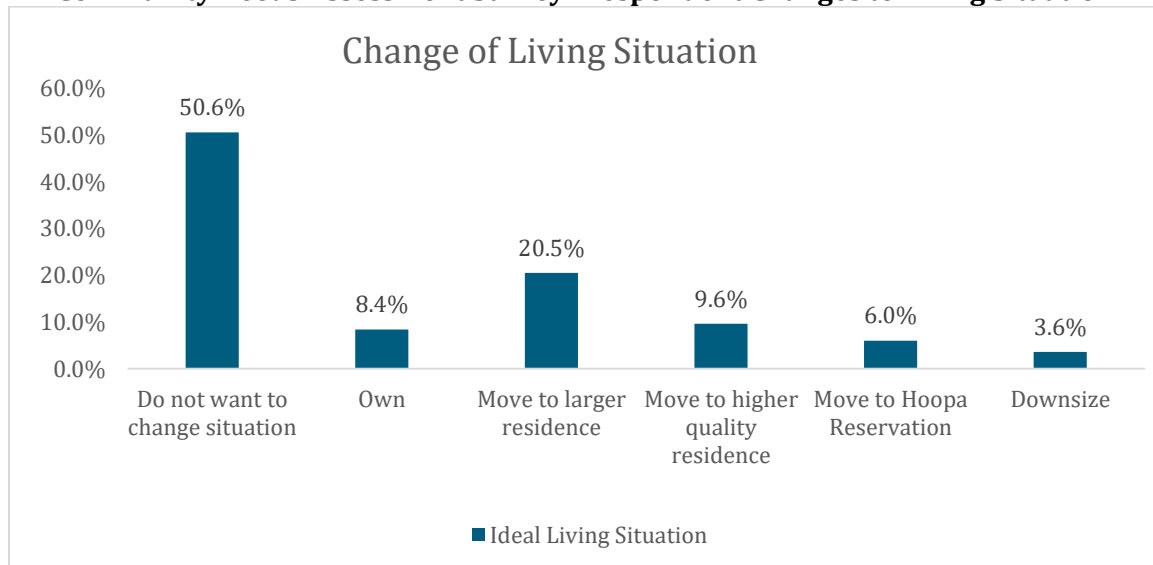
The community needs assessment surveyed individuals aged 18 and above on housing needs, and

the most frequently reported household income level was less than \$20,000, with 50% of annual household incomes below \$40,000. Down payment assistance would provide support to individuals who would like to own their own home, including the 8.4% of individuals who participated in the needs assessment who said they would like to own their own home.

Community Needs Assessment Survey- Respondent Annual Household Income

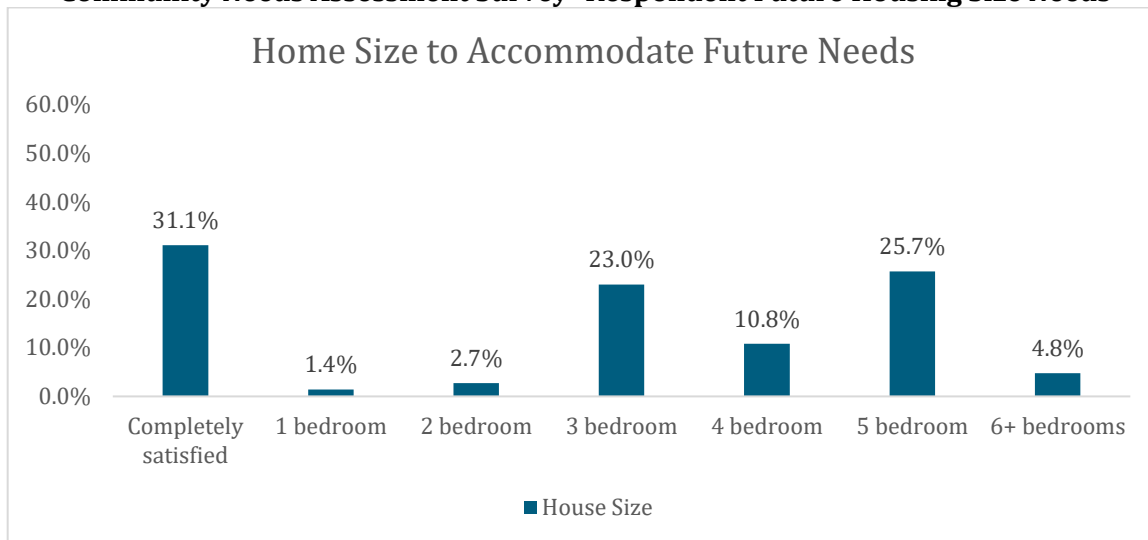


Community Needs Assessment Survey- Respondent Changes to Living Situation

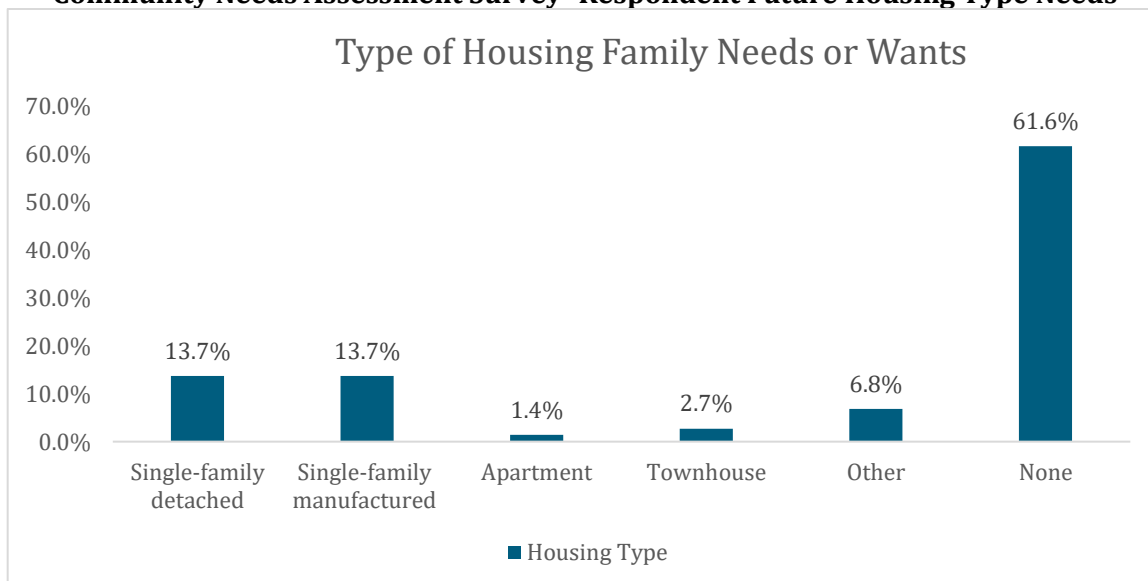


Over a quarter of individuals who participated in the needs assessment (27.4%) would like a single-family home if they changed to a new housing location (rather than an apartment or townhome). A total of 23.0% of Tribal Members would like a 3-bedroom home to accommodate future needs, while 10.8% would like 4 bedrooms, and 25.7% would like 5 bedrooms. Down payment assistance funding would help Tribal Members purchase homes that meet their family's current and future needs.

Community Needs Assessment Survey- Respondent Future Housing Size Needs



Community Needs Assessment Survey- Respondent Future Housing Type Needs



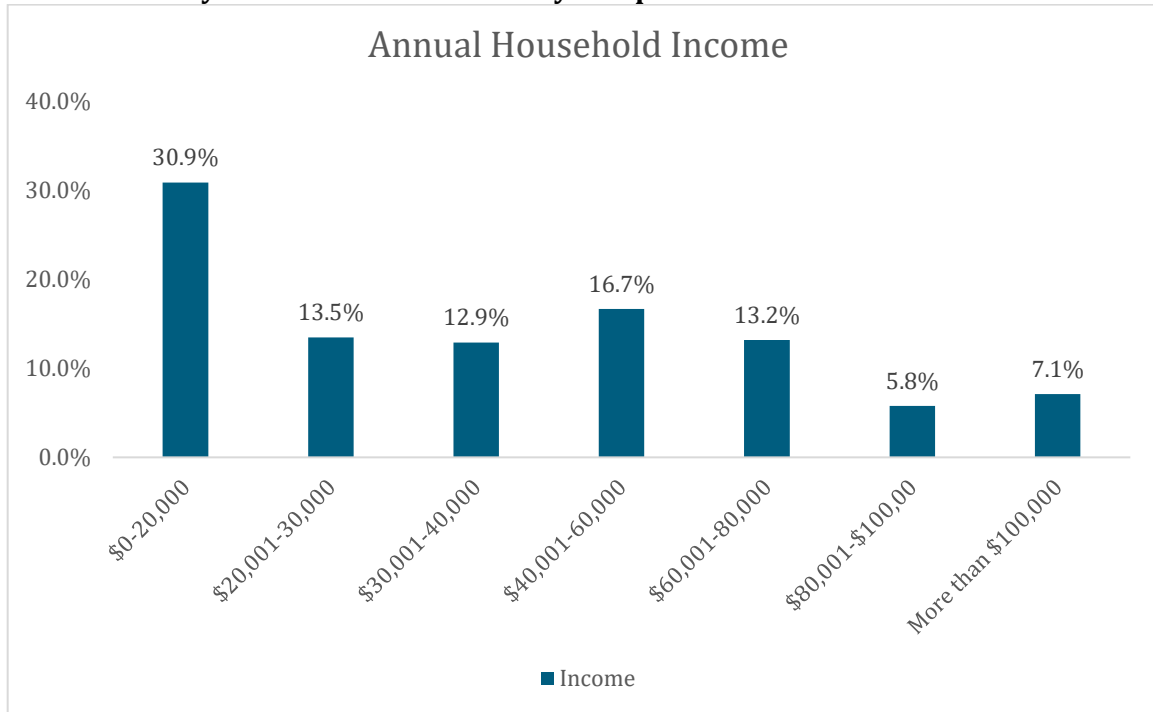
Campbell Field (12 Housing Units)

The community needs assessment surveyed individuals aged 18 and above on housing needs, and the most frequently reported household income level was less than \$20,000, with 50% of annual household incomes below \$40,000. Down payment assistance would provide support to individuals

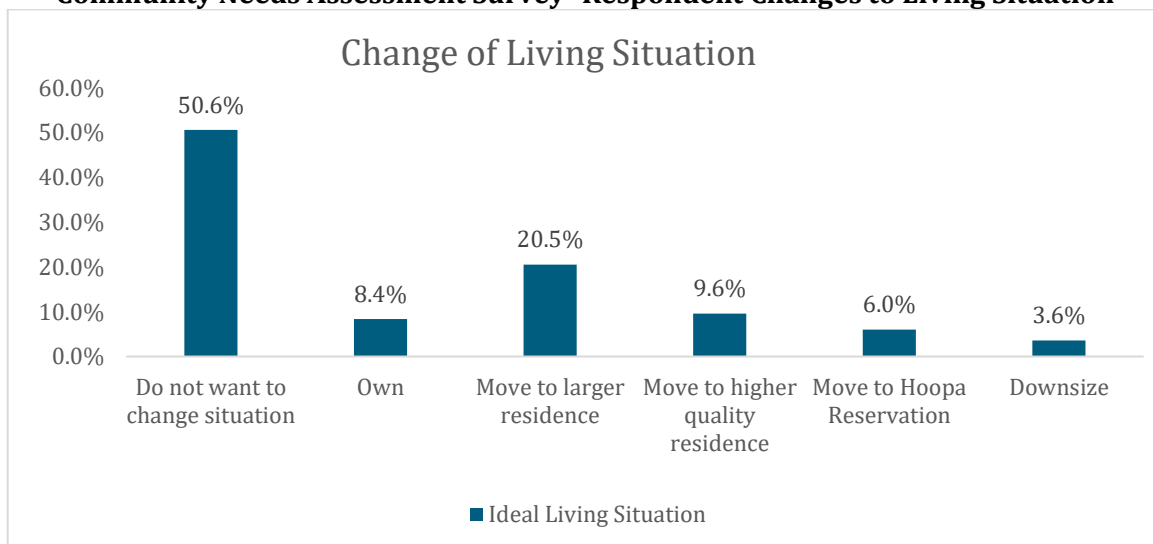


who would like to own their own home, including the 9.6% of individuals who participated in the needs assessment who said they would like to move to a higher quality location. Establishing 12 housing units at the Campbell Field location would add needed housing for these individuals.

Community Needs Assessment Survey- Respondent Annual Household Income



Community Needs Assessment Survey- Respondent Changes to Living Situation



Approximately 85% of individuals who took the community needs assessment are satisfied with the condition of their housing, but there are 15% who report the condition to be “adequate” or “poor.”

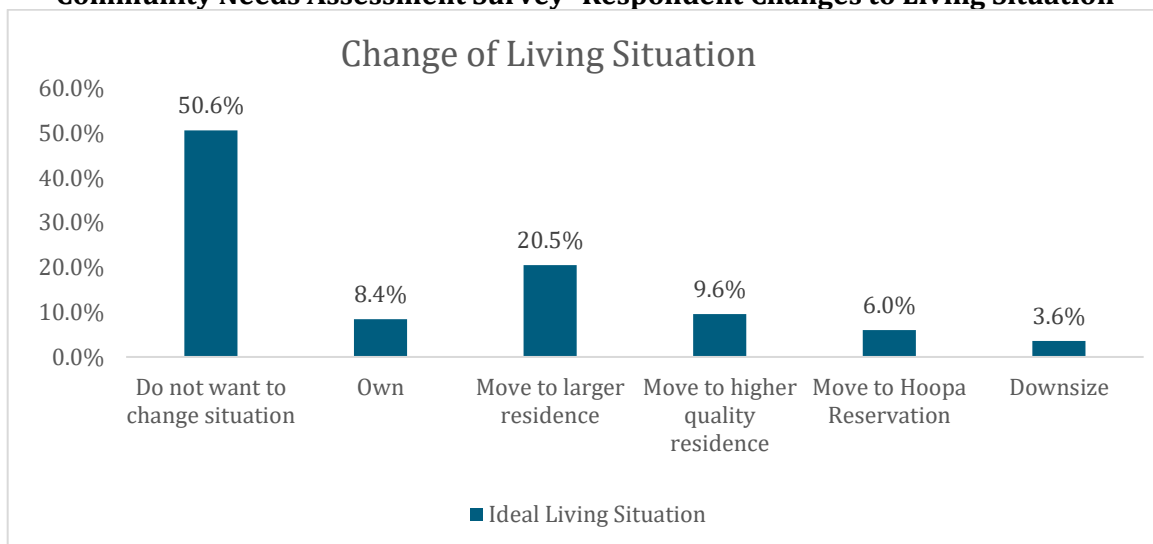


Community Needs Assessment Survey- Respondent Condition of Residence



A total of 50.6% of community members did not want to change their current living situation/location, but there were problems with Tribal Members' current housing, which were reported to be the: need to make repairs (25.3%), need to remodel (28.9%), need to modify home for disabled person (9.6%), and need to modify home to meet needs of an elderly person (4.8%). Down payment assistance funding would help Tribal Members purchase homes that meet their family's current and future needs. The Campbell Field location would add needed housing for these individuals.

Community Needs Assessment Survey- Respondent Changes to Living Situation



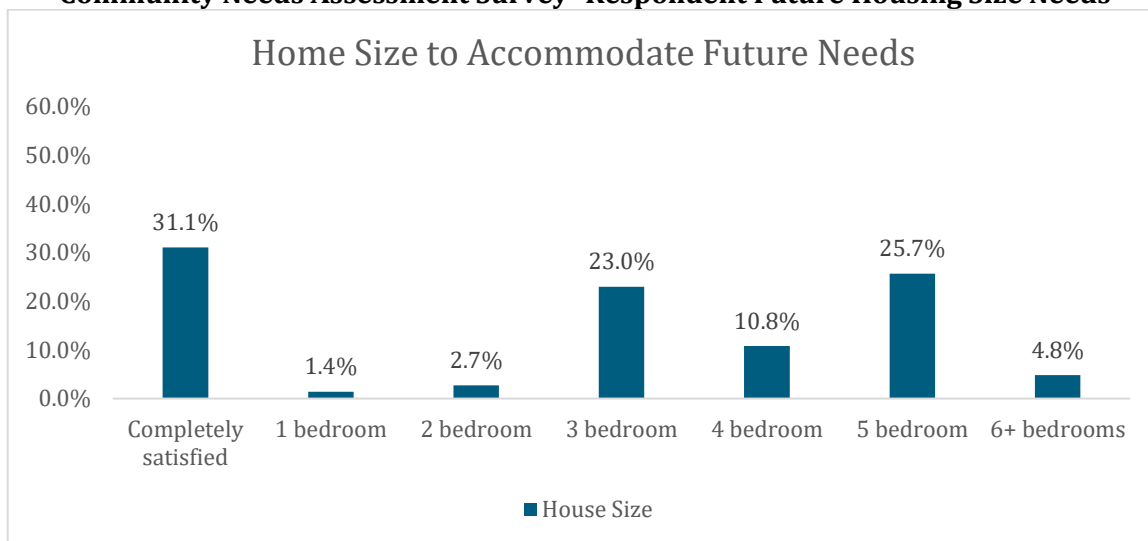


Community Needs Assessment Survey- Respondent Problems with Residence

Problem	Respondents (%)
Need to make repairs	25.3%
Need to remodel	28.9%
Add on to current residence	15.7%
Need to modify home for a disabled person	9.6%
Need to modify home to meet needs of elderly person	4.8%
Build home but on same lot	4.8%
Need better energy efficiency	14.5%
Other	2.4%
No problems	25.3%

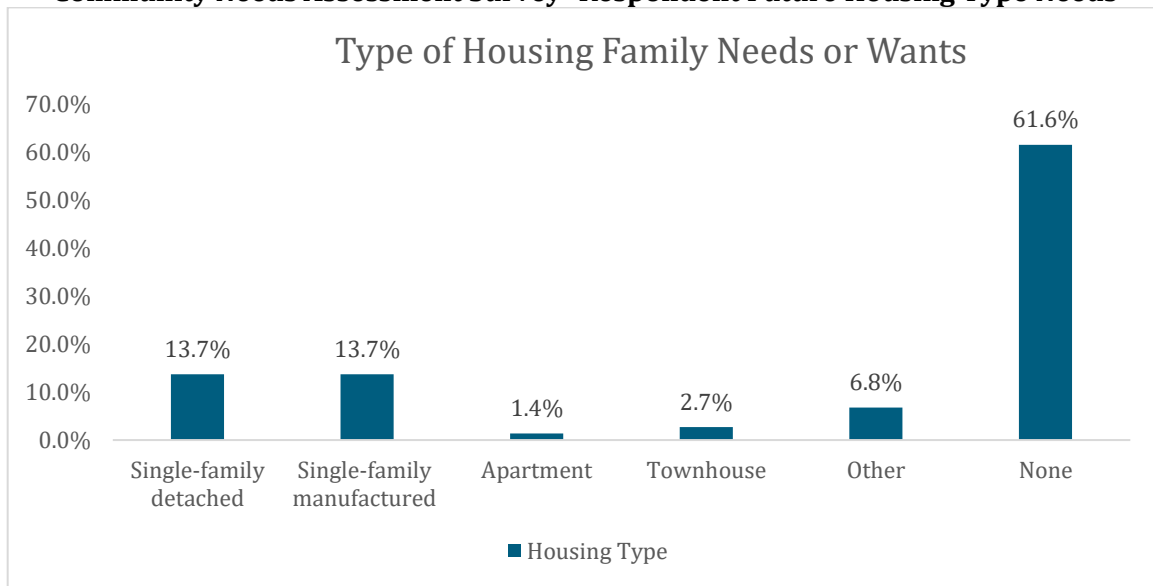
Over a quarter of individuals who participated in the needs assessment (27.4%) would like a single-family home if they changed to a new housing location (rather than an apartment or townhome). A total of 23.0% of Tribal Members would like a 3-bedroom home to accommodate future needs, while 10.8% would like 4 bedrooms, and 25.7% would like 5 bedrooms. These data can aid in the development of floor plans for current and future housing expansions.

Community Needs Assessment Survey- Respondent Future Housing Size Needs





Community Needs Assessment Survey- Respondent Future Housing Type Needs





Section 4: Hoopa Valley Health and Health Needs

This section is focused on the health information collected regarding the community's health challenges and needs. The gathered information was meant to support prioritization and resource allocation that will improve health and support the Tribal community's health needs. Key uses of this section include:

- A public health tool to provide evidence about the Tribal population on which to plan services and address health inequalities identified through direct community input
- Opportunity to understand which specific populations to engage with and enable them to contribute to targeted service planning and resource allocation
- Creates an opportunity for cross-departmental partnership, working and developing creative and effective solutions to address the community's health needs

The health needs assessments within this section included:

- Current Health Diagnosis
- Recent Life Circumstances
- Health Care Services
- Use of Tribal Clinic for Care

Current Health Diagnosis

Health and health needs were assessed with questions about health status and behaviors. Chart 16 shows that about 40% of survey respondents were managing multiple health diagnoses, with the most frequent health concerns being diabetes, weight, high blood pressure, anxiety, depression, and eye health; these concerns are very common across Indian Country. These health concerns highlight the need for early prevention and intervention for those at younger ages and/or health care support for those who have already developed these concerns. Projects supporting increased health care access and utilization include the K'ima:w Medical Clinic Expansion and K'ima:w Assisted Care Facility (See Appendix D). Those with anxiety and depression are at heightened risk of drug use and addiction, which may reflect a need for improved mental health supports and Medication Assisted Treatment (MAT) programs (Full health concerns response is shown in Table 2).



Chart 16: Community Needs Assessment Survey- Respondent Managing Multiple Health Diagnosis

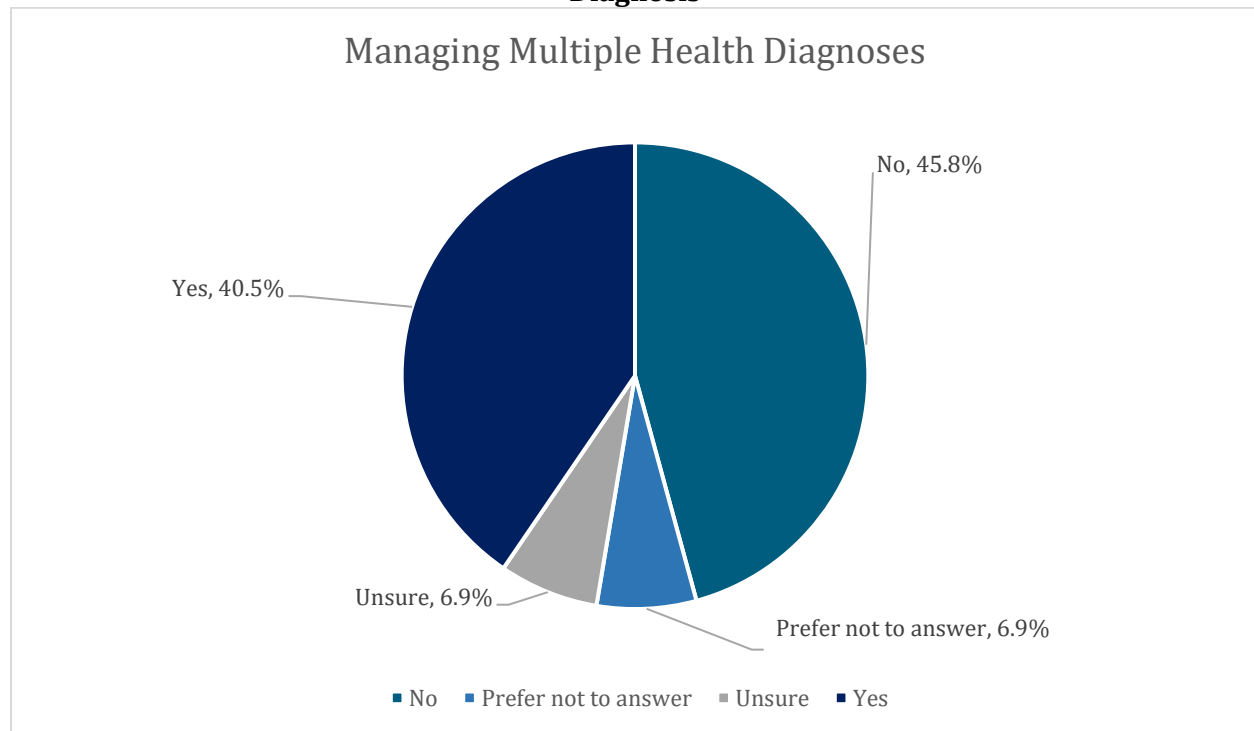


Table 2: Community Needs Assessment Survey- Respondent Health Care Concerns for Self & Household

Health Care Concerns for Self or Household	Respondents (%)
Anger	9.6%
Anxiety	36.2%
Asthma	11.4%
Alcohol use	5.2%
Cancer	5.8%
Dental health	23.0%
Depression	25.9%
Diabetes	23.9%
Drug use	4.7%
Elder care/health	8.7%
Elder abuse	0.3%
Eye health	23.9%
Family conflict	5.5%
Grief	17.5%
Headaches	17.5%
Heart disease	7.9%
Hepatitis	1.2%
High blood pressure	26.5%
High cholesterol	14.3%
HIV/AIDS	0.3%
Sexual transmitted diseases	0.6%
Stroke	4.4%
Tobacco use	11.1%
Trauma/PTSD	16.0%
Vaccinations	5.0%
Violence	1.2%
Weight	26.8%
Other (Describe)	11.7% (ADHD, autoimmune disease, arthritis, dementia, COPD, endometriosis, hernia, bone spurs, allergies, PCOS, nerve and spine pain, low vitamin D, long COVID-19, violence, hormone issues, migraines, seizures, tremors, sleep apnea, stress, thyroid, bladder issues, and environmental concerns (smoke, traffic noise/speed, pollution))
None	14.3%



Recent Life Circumstances

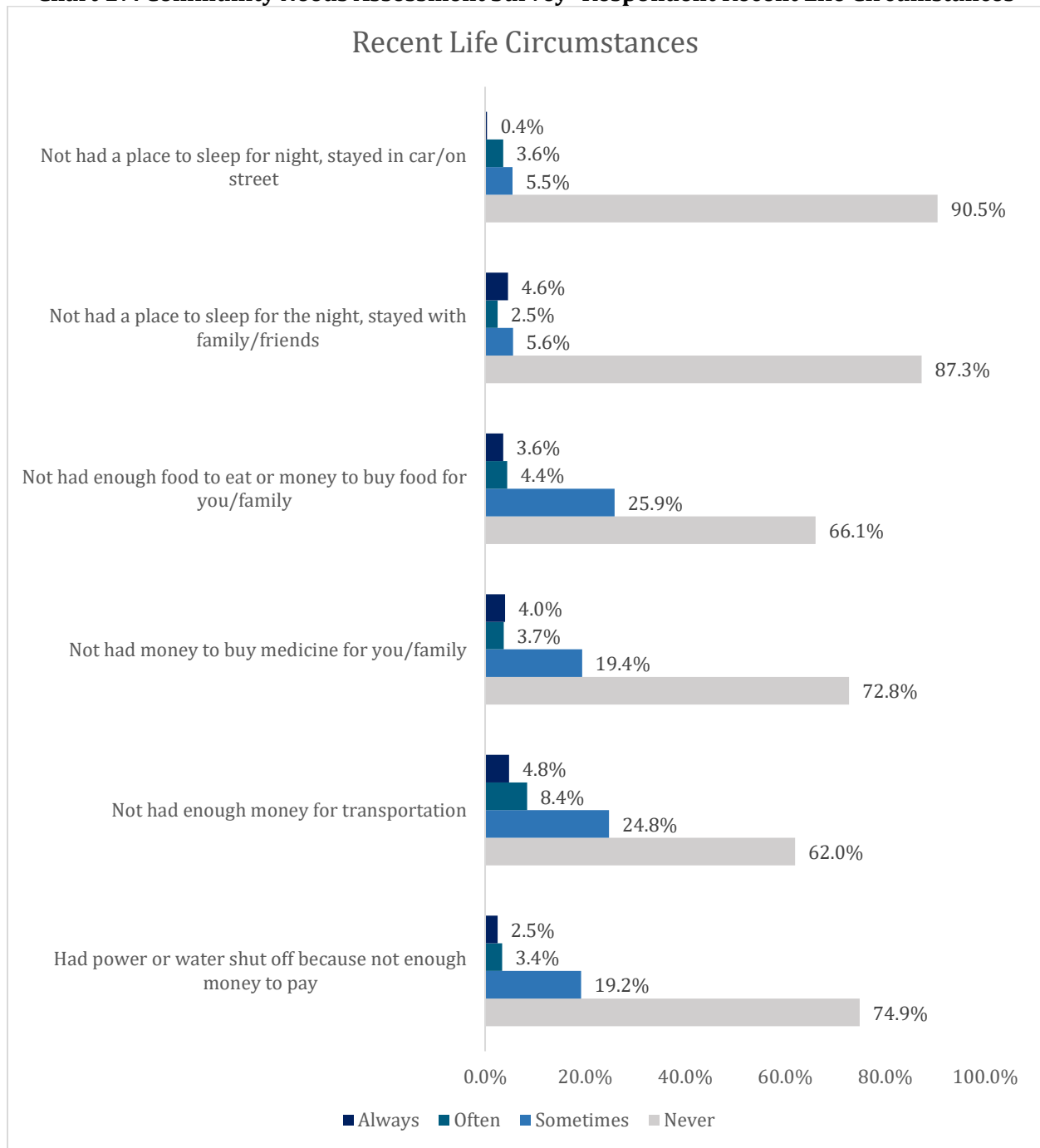
In the past 12 months, about 10-40% of the survey participants experienced at least one hardship such as not having a place to sleep or not having enough money for food, medicine, or transportation (Full respondent information is shown in Chart 17 below). Based on national data, the average need in each area was about 10%. The Hoopa Valley Tribal Community fell below these statistics in the four assessed areas, including the overall percent of need:

1. Not enough money to eat or buy food for self/family (33.9%)
2. Not enough money to buy medicine for self/family (27.2%)
3. Not enough money for transportation (38%)
4. Power/Water shut off because not enough money to pay (25.1%)

Because those with chronic or mental health conditions are at higher risk of disparities in access to housing or financial support for basic needs, programs should be implemented to improve access to prevention and intervention and housing and health supports for those with mental health or substance use concerns. Projects supporting increased health care access and utilization include the K'ima:w Medical Clinic Expansion and K'ima:w Assisted Care Facility (See Appendix D). Those with anxiety and depression are at heightened risk of drug use and addiction, which may reflect a need for improved mental health supports and Medication Assisted Treatment (MAT) programs, as well as Transitional Housing (See Appendix D).



Chart 17: Community Needs Assessment Survey- Respondent Recent Life Circumstances



Health Care Services

The majority of individuals in the Tribal community last reported having health care coverage this year (Full data shown in Chart 18). The surveyed community's most frequent health care provider(s) were reported as the Tribal Health Center/Clinic and the doctor's office (Full data shown in Chart 19).

About 40% of people reported visiting a doctor, nurse, or health care provider at least twice a year and 22.5% reported visiting 5 or more times a year (Full data shown in Chart 20). A smaller number, approximately 35%, reported visiting the dentist or dental hygienist at least two times per year and 51% reported once or less during the year. (Full data shown in Chart 21).

In regards to visits for medical care, approximately 40% of individuals reported going to the emergency room one or more times in the past 12 months (Full data shown in Chart 22).

The most commonly utilized supportive health care services reported by the community were Cal Fresh (EBT/Food Stamps), Food Boxes, and other supportive services such as SSI/disability, gas vouchers, and "Tribal giveaways" (Full data set shown in Table 3).

Prevention and early intervention are important for the exacerbation of health conditions later in life. For those who already have chronic or mental health concerns, frequent engagement in high quality health care improves quality of life and improves health care prognosis for community members. Projects supporting increased health care access and utilization include the K'ima:w Medical Clinic Expansion and K'ima:w Assisted Care Facility (See Appendix D). Those with anxiety and depression are at heightened risk of drug use and addiction, which may reflect a need for improved mental health supports and Medication Assisted Treatment (MAT) programs (See Appendix D).

Chart 18: Community Needs Assessment Survey- Respondent Possession of Health Insurance

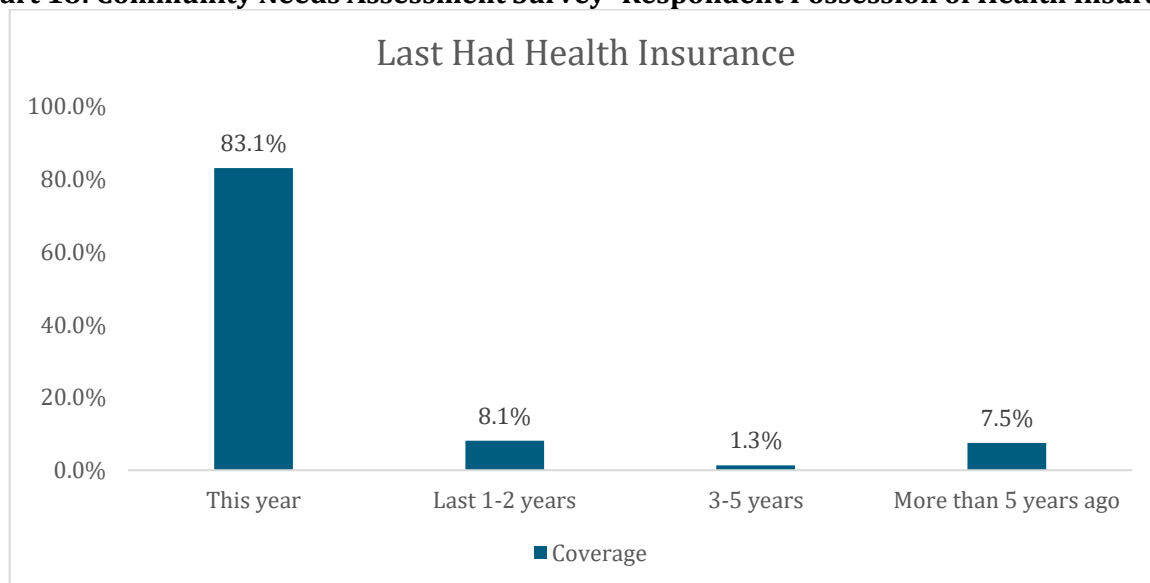
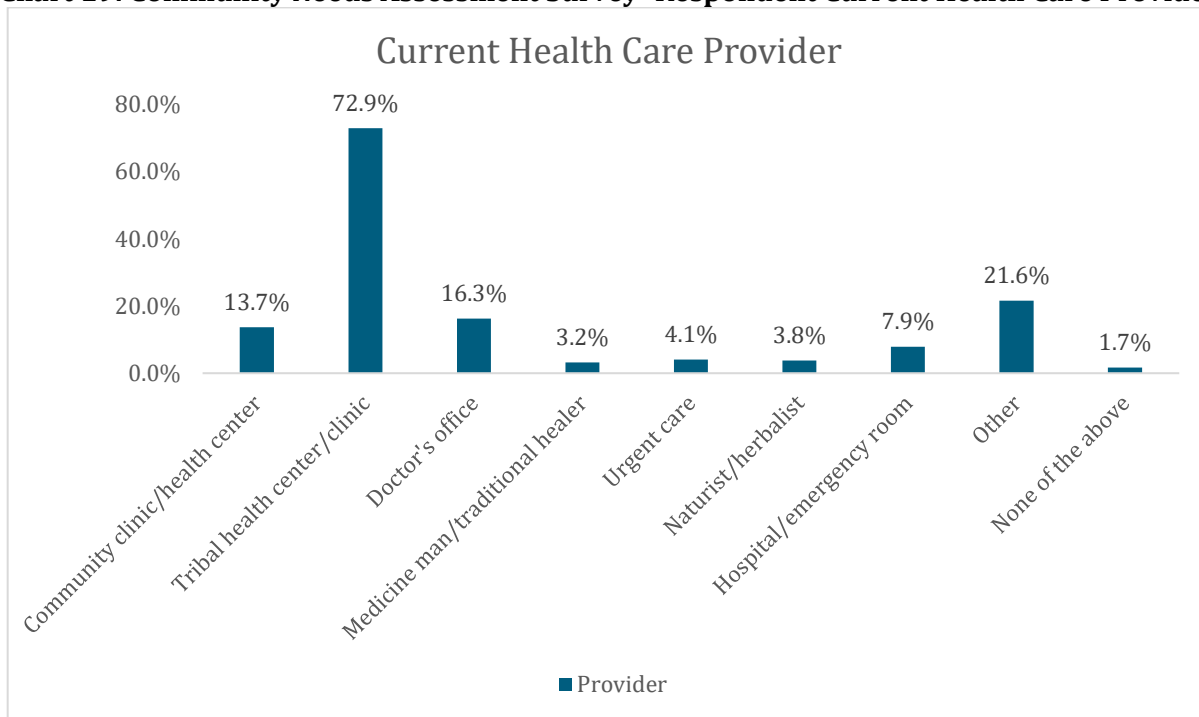


Chart 19: Community Needs Assessment Survey- Respondent Current Health Care Provider



Note: Responses total more than 100% because individuals were able to indicate more than one health care provider

Other providers were reported to be CCWF, family medicine, Kaiser, health clinics in different areas of the country (non-Hoopa), a combination of Tribal health centers, like UIHS and K'ima:w, the Veterans Administration, and specialist doctors for certain health conditions.

Chart 20: Community Needs Assessment Survey- Respondent Health Care Provider Visits

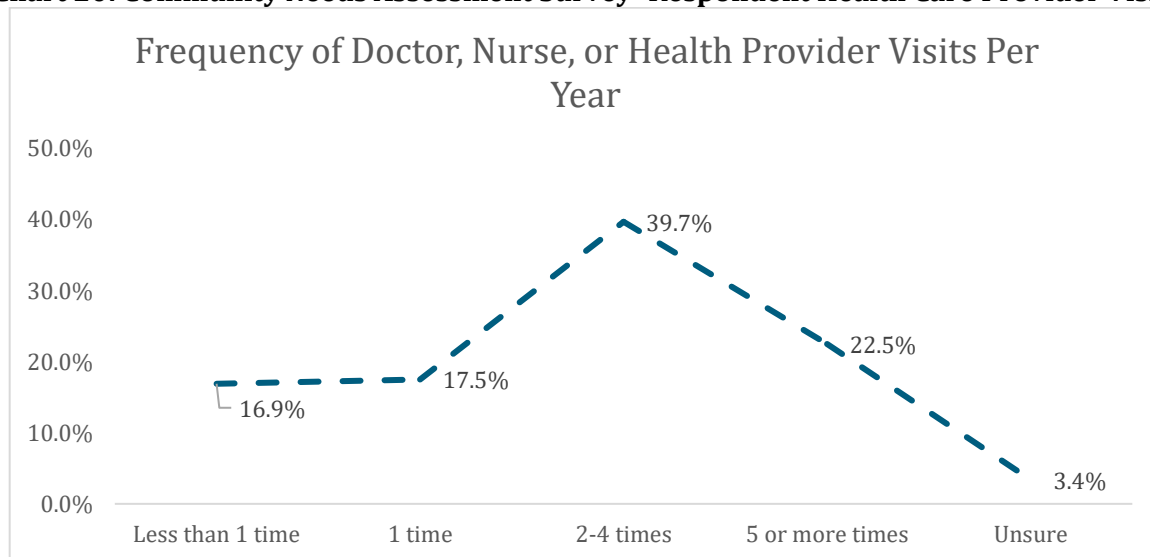




Chart 21: Community Needs Assessment Survey- Respondent Dental Care Provider Visits

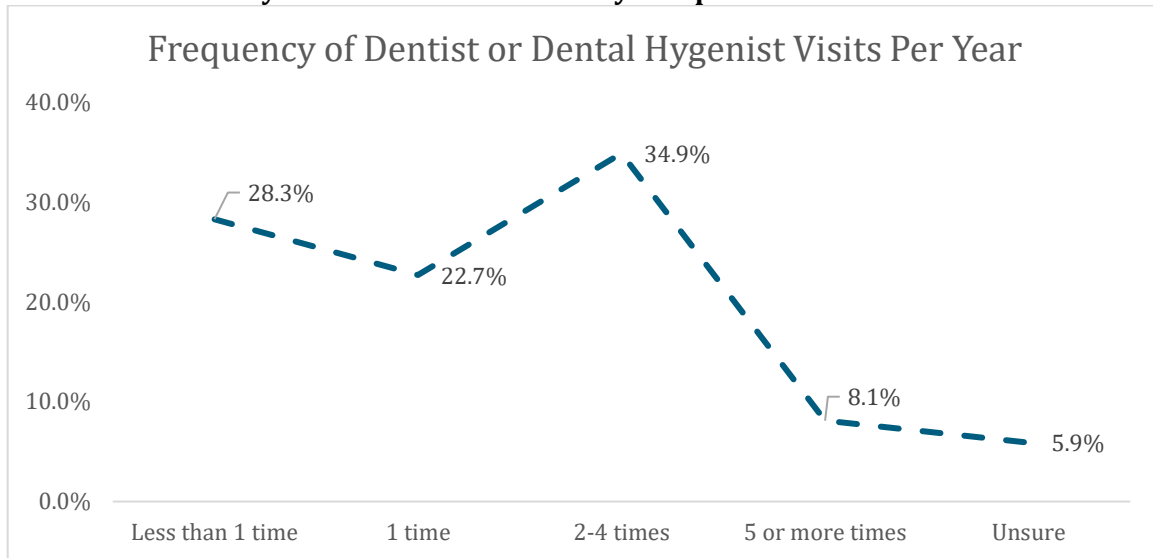


Chart 22: Community Needs Assessment Survey- Respondent Emergency Room Visits

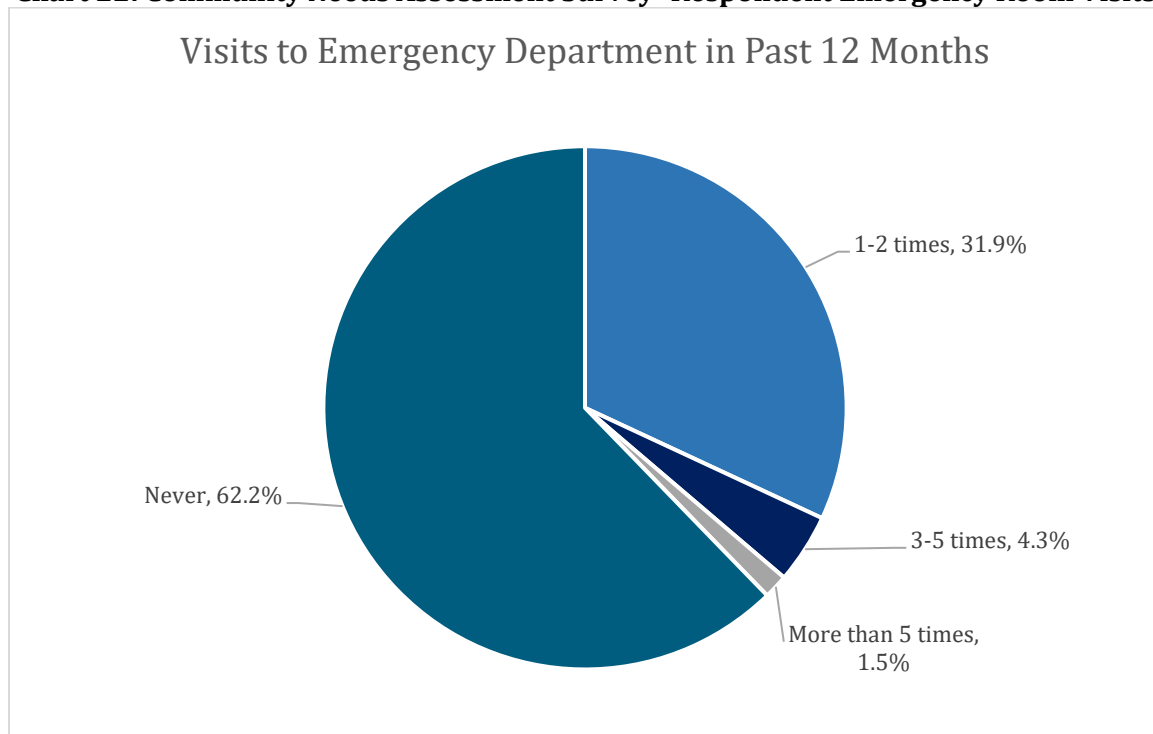




Table 3: Community Needs Assessment Survey- Respondent Utilization of Supportive Services

Utilization of Supportive Services	Respondents (%)
TANF	6.4%
WIC	7.0%
Ryan White	0.3%
Housing Voucher	2.6%
HUD Mutual Help	1.5%
Child Action	0.3%
EBT/Food Stamps (CalFresh)	25.1%
General Assistance	2.6%
Medicaid	10.8%
Elder Free Lunch Program (K'ima:w Elders)	8.5%
Food Boxes (TANF, Food for People, Other)	15.2%
Food Commodity Program (Tribal)	6.2%
Food Bank	5.5%
Transportation	4.4%
Other (Describe)	13.7% (Unemployment insurance, SSI/disability, Tribal giveaways, gas vouchers, elder support monthly payment)

Use of Tribal Health Clinic for Care

About 77% and 73% of individuals reported using the Tribal Health Clinic for medical or dental care, respectively (Full data shown in Chart 23). Reasons for not utilizing Tribal Health for each service are presented in Table 4. Frequent engagement in high quality health care improves quality of life and improves health care prognosis for community members. Projects supporting increased health care access and utilization include the K'ima:w Medical Clinic Expansion and K'ima:w Assisted Care Facility (See Appendix D). Those with anxiety and depression are at heightened risk of drug use and addiction, which may reflect a need for improved mental health supports and Medically Assisted Treatment (MAT) programs (See Appendix D). Other projects should be undertaken to address the concerns with the use of the Tribal Health Clinic for Medical and Dental care to ensure improved satisfaction by community members.

Chart 23: Community Needs Assessment Survey-Respondent Use of Tribal Health Clinic

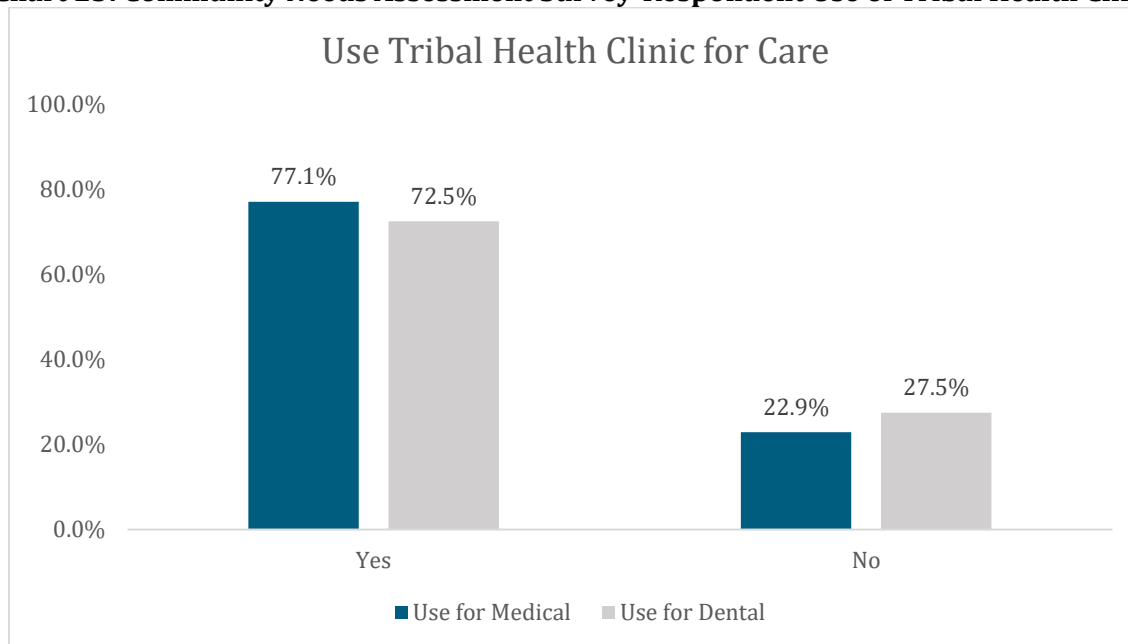


Table 4: Community Needs Assessment Survey- Respondent Avoidance of Medical and Dental Care

Why don't use for Medical Care	Why don't use for Dental Care
<ul style="list-style-type: none"> • Don't feel welcome • Concerns with confidentiality • Hard to get an appointment • Hard to get a referral • Do not live in-state or on Reservation • Refills need to wait for referrals, which is a barrier • Use another insurance provider • Concerns about quality of care • Have purchased and referred care • Medical bills not paid in a timely manner • Previous misdiagnoses (or missed diagnoses) • "Check ins (and phone check ins) ask questions I feel are not appropriate personal health questions" • "I'm treated like I am lying about pain" • "Unfriendly staff" 	<ul style="list-style-type: none"> • Don't feel welcome • Concerns with confidentiality • Hard to get appointment • Dental work never gets finished • Was closed during the pandemic • Limited number of providers • No dental hygienist • Do not live in-state or on Reservation • Have dentures • Don't trust infection control methods • Use another insurance provider • Transportation barriers • Appointments canceled by the clinic "and you don't know why" • "Referrals for specialty care or testing are not covered [benefits] and [it] costs too much"



Section 5: Access and Challenges in Healthcare Services

The critical aspects of this section were to understand health functioning, conditions, and factors that might have a significant impact on the health of the Tribal community. The gathering of community information regarding access to health care services was meant to highlight the challenges members face in receiving health care and the additional services that were most needed within the community. This will help to:

- Develop a profile of the community's issues
- Use this information to understand health priorities for the Tribe
- Support future community health care services to create:
 - *Impact*: Create significant impact in terms of services provided and the administration of the services to the Tribal community
 - *Changeability*: Create solutions that can have a lasting impact on the community's health

Access to Community Services

Most individuals who participated in the needs assessment survey used their personal vehicle(s) to attend medical appointments, with a fairly uniform spread among the remaining transportation methods (Full data shown in Chart 24). A common challenge to receiving health care included difficulties in finding a doctor/clinic, securing an appointment, and having enough time for the visit (Full data shown in Chart 25). For virtual health care services (Full data included in Chart 26), 50% of respondents want to start or continue virtual health care, which may address some of the challenges noted on Chart 25, including getting an appointment, lack of time, and finding a doctor or clinic. Projects supporting increased health care access and utilization include the K'ima:w Medical Clinic Expansion and K'ima:w Assisted Care Facility (See Appendix D). Those with anxiety and depression are at heightened risk of drug use and addiction, which may reflect a need for improved mental health supports and Medication Assisted Treatment (MAT) programs (See Appendix D). Engagement in virtual healthcare may be improved by the implementation of the Backhaul Capacity Expansion for Broadband Connectivity for Community Members (See Appendix D).

Chart 24: Community Needs Assessment Survey- Respondent Transportation Access

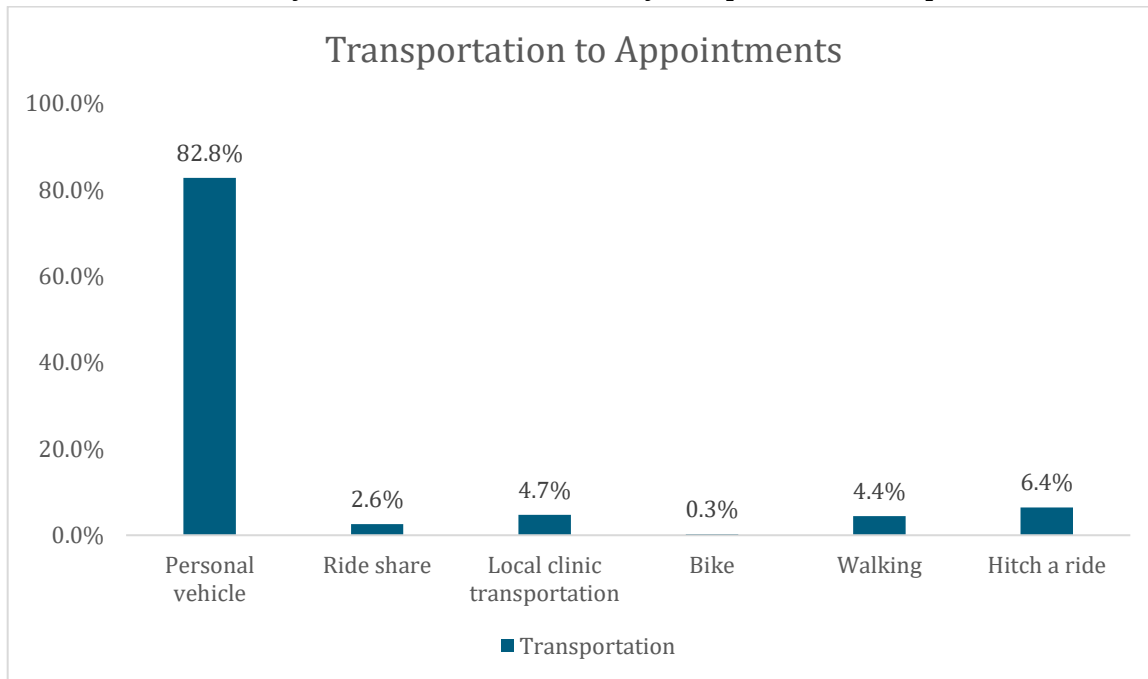
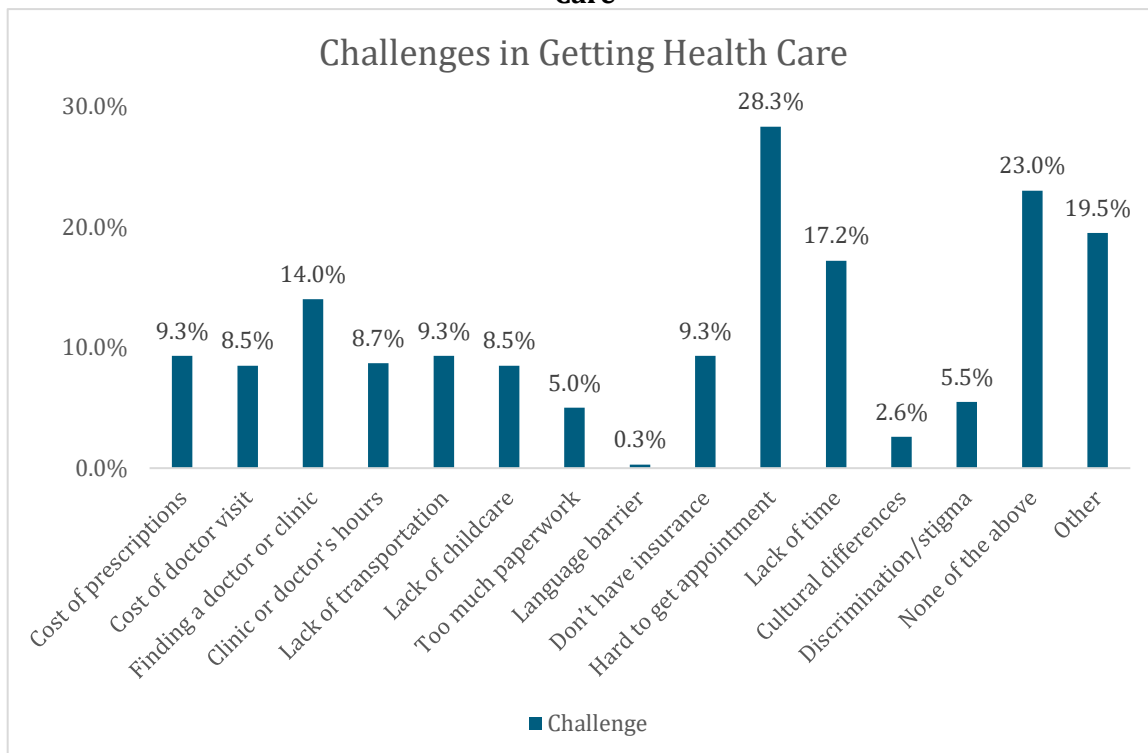


Chart 25: Community Needs Assessment Survey- Respondent Challenges in Getting Health Care

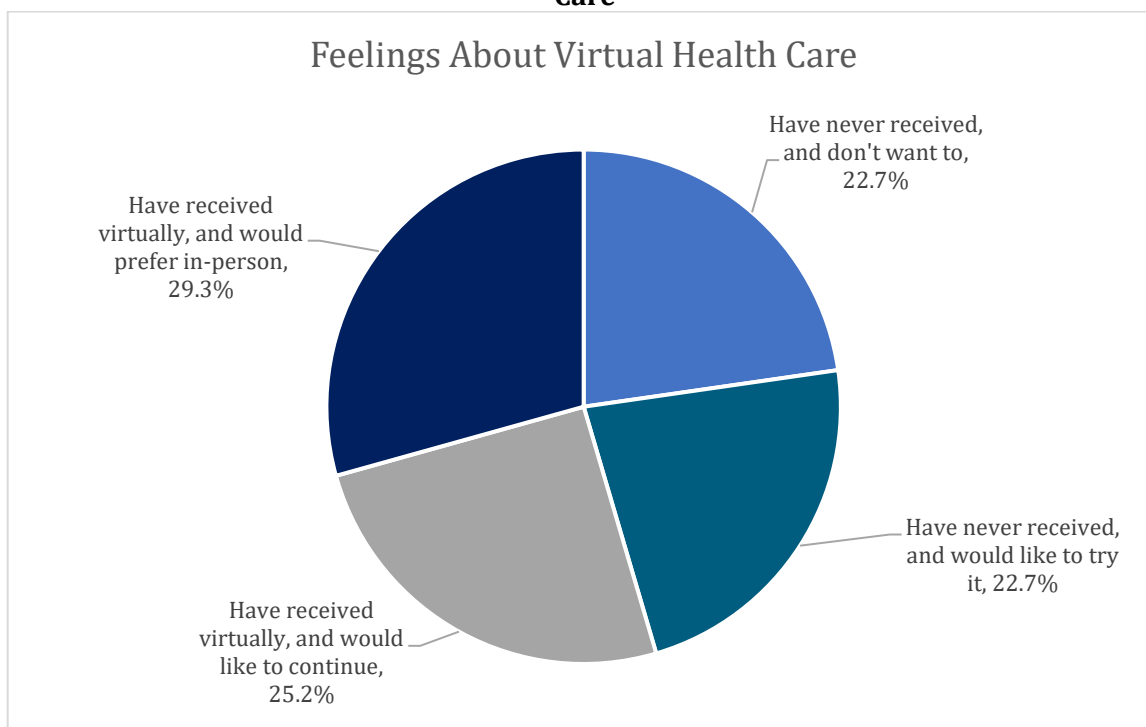


Other challenges in getting health care were: Gas prices, geographic distance, long wait times in waiting room, conflicts with doctors, provider turnover, lack of follow up from provider(s) after care is received,



limited staffing among providers at Tribal health clinic, provider not being a specialist in areas relevant to health, lack of confidence in providers, medical bills are “unpaid and it ruins credit,” not enough time off from work, and concerns with confidentiality (specifically that personal health information is shared with outside of health center).

Chart 26: Community Needs Assessment Survey- Respondent Feelings About Virtual Health Care



Additional Comments: Current Health Care Needs

Needs for specialty care were identified via write-in answers, and these included: hospice, alternative medicine, physical therapy, closer dialysis, trauma-informed care, vision/eye doctor, and more resources for caring for aging parents/grandparents.

Other additional comments were:

- “We need better care/case management and coordination of healthcare from KMC.”
- “We need to improve mental and behavioral health offerings [to the community].”
- “Would like to be able to afford to buy water. Our water does not taste good.”
- “We need more doctors that are qualified and willing to stay in this area including dentists.”
- “I would like to talk to Native American healthcare workers [when I go to the doctor].”
- “Make K’ima:w accountable for not going by policy and not having confidentiality.”



Section 6: Support for Hoopa Valley Health Care Projects

Information in this section comes from the multiple sections throughout the community needs assessment survey and provides support for specific Hoopa Valley health- and health care-related projects. Findings highlight a need for increased health care access, both as preventative and early intervention for those who have not developed health or behavioral health concerns, and integrated, evidence-based treatment for those who already have existing health conditions (Citation: <https://health.gov/healthypeople/objectives-and-data/browse-objectives/preventive-care>; <https://www.sciencedirect.com/science/article/pii/S0378512220302826>). Findings support all three projects below.

Note: Charts and tables in this section come from other sections throughout this document and may be referenced multiple times because of relevance to specific project plan narratives. The charts and tables in this section are not numbered to reduce confusion and support easier utilization of project narratives.

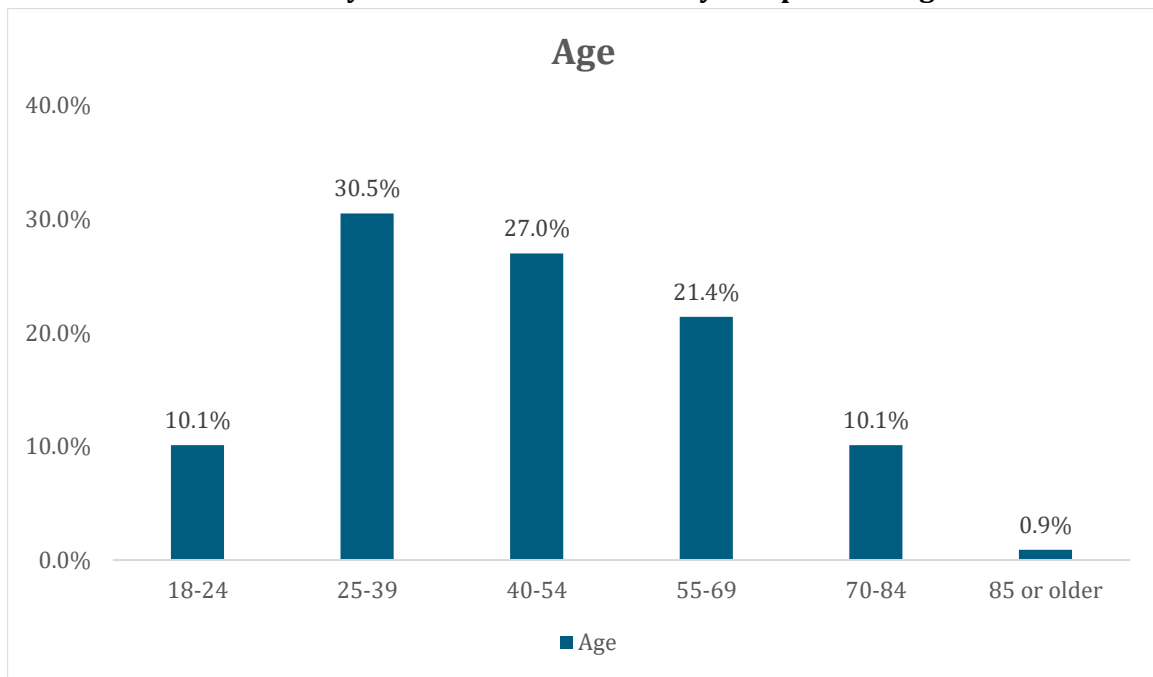
K'ima:w Medical Clinic Expansion

Data from the community needs assessment support increased access to care by Hoopa Valley Tribal Members. Prevention and early intervention are important for reducing the exacerbation of health conditions later in life. For those who already have chronic mental health concerns, frequent engagement in high-quality health care improves the quality of life and health prognosis (<https://health.gov/healthypeople/objectives-and-data/browse-objectives/preventive-care>; <https://www.sciencedirect.com/science/article/pii/S0378512220302826>).

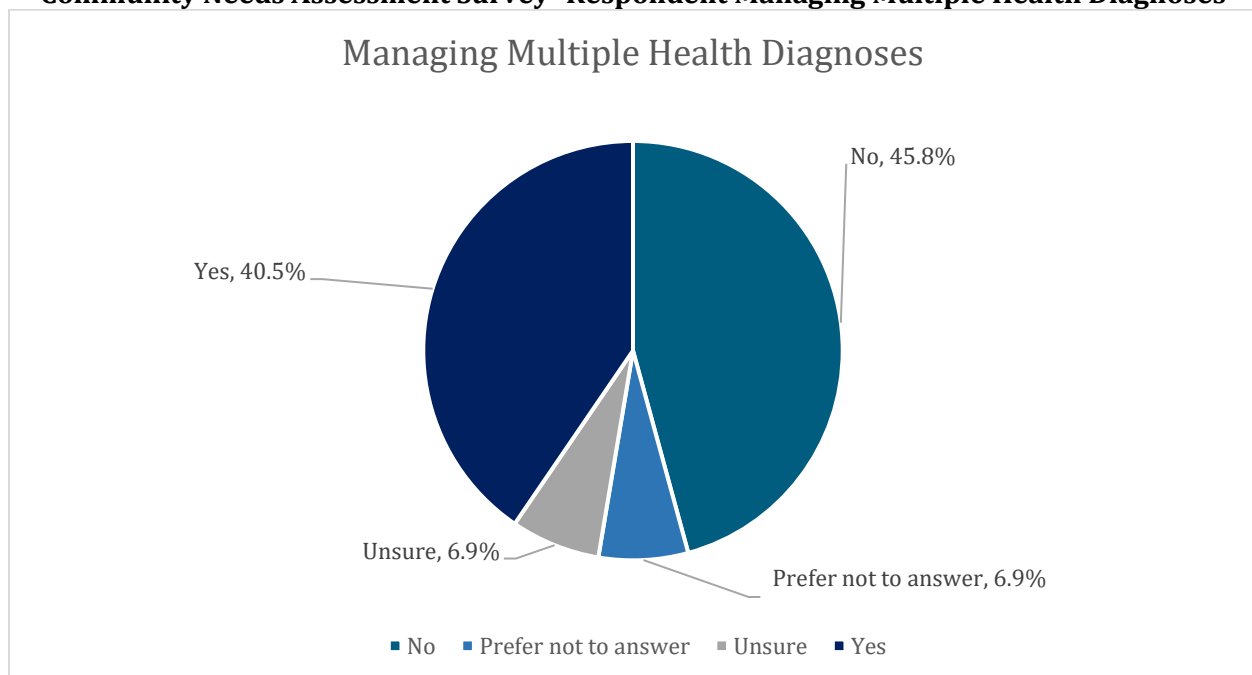
Approximately 30% of individuals that participated in the community needs assessment were aged 55 years or older, and the most frequent health concerns among Tribal Members were diabetes, weight, high blood pressure, anxiety, depression, and eye care. Additionally, 40% of participants reported managing two or more health conditions at the time of the assessment, but only 35% had gone to the doctor in the past year, and 3.4% were unsure of the last time they saw a doctor. This showcases a gap in health care provision that would be reduced by expanding clinic services.



Community Needs Assessment Survey- Respondent Ages



Community Needs Assessment Survey- Respondent Managing Multiple Health Diagnoses

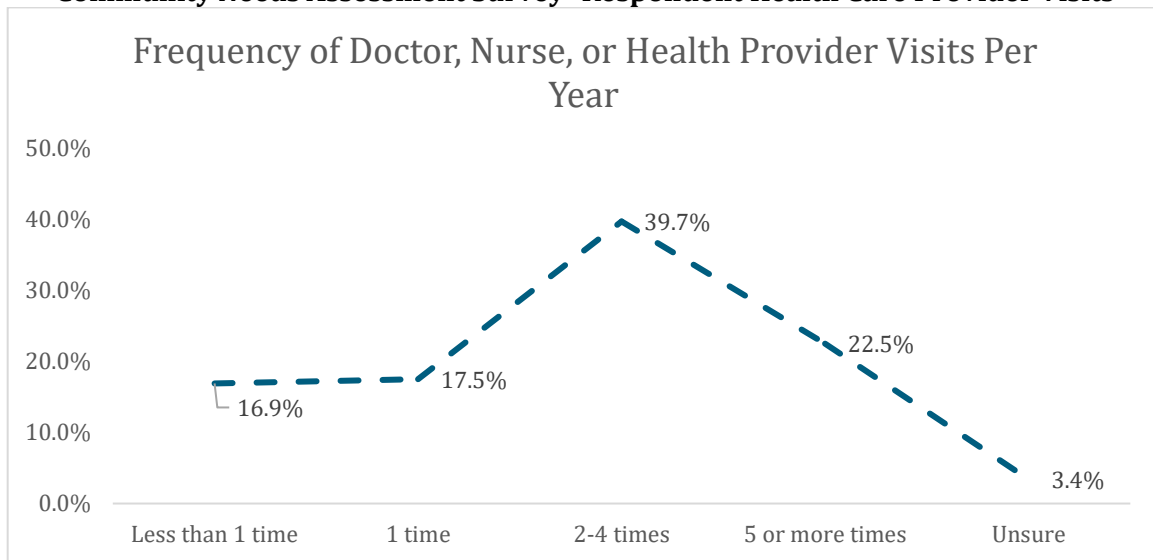


Community Needs Assessment Survey- Respondent Health Care Concerns for Self & Household

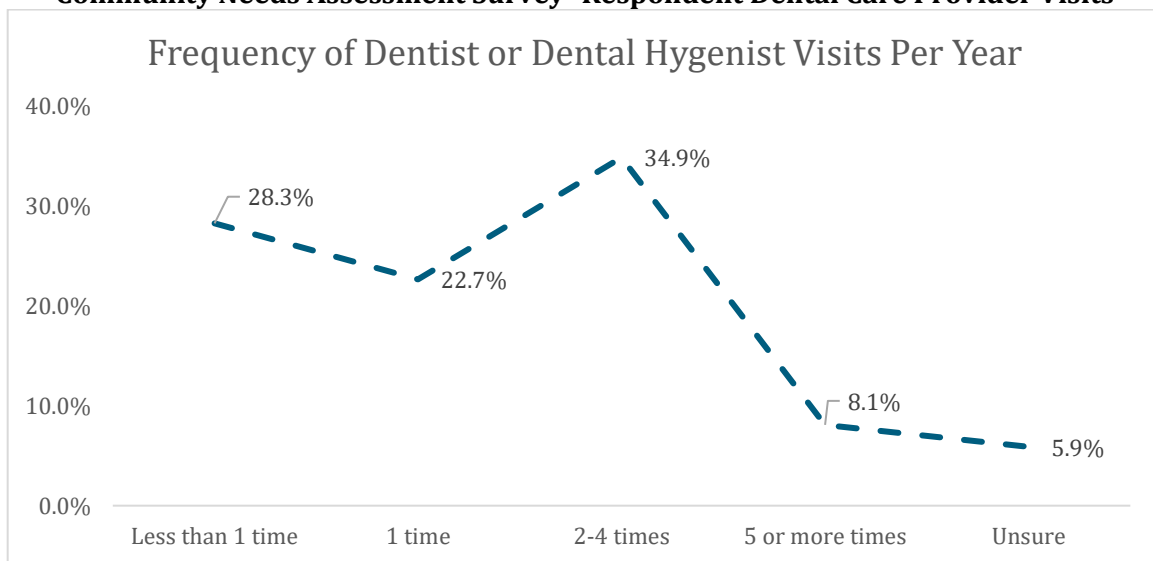
Health Care Concerns for Self or Household	Respondents (%)
Anger	9.6%
Anxiety	36.2%
Asthma	11.4%
Alcohol use	5.2%
Cancer	5.8%
Dental health	23.0%
Depression	25.9%
Diabetes	23.9%
Drug use	4.7%
Elder care/health	8.7%
Elder abuse	0.3%
Eye health	23.9%
Family conflict	5.5%
Grief	17.5%
Headaches	17.5%
Heart disease	7.9%
Hepatitis	1.2%
High blood pressure	26.5%
High cholesterol	14.3%
HIV/AIDS	0.3%
Sexual transmitted diseases	0.6%
Stroke	4.4%
Tobacco use	11.1%
Trauma/PTSD	16.0%
Vaccinations	5.0%
Violence	1.2%
Weight	26.8%
Other (Describe)	11.7% (ADHD, autoimmune disease, arthritis, dementia, COPD, endometriosis, hernia, bone spurs, allergies, PCOS, nerve and spine pain, low vitamin D, long COVID-19, violence, hormone issues, migraines, seizures, tremors, sleep apnea, stress, thyroid, bladder issues, and environmental concerns (smoke, traffic noise/speed, pollution))
None	14.3%



Community Needs Assessment Survey- Respondent Health Care Provider Visits



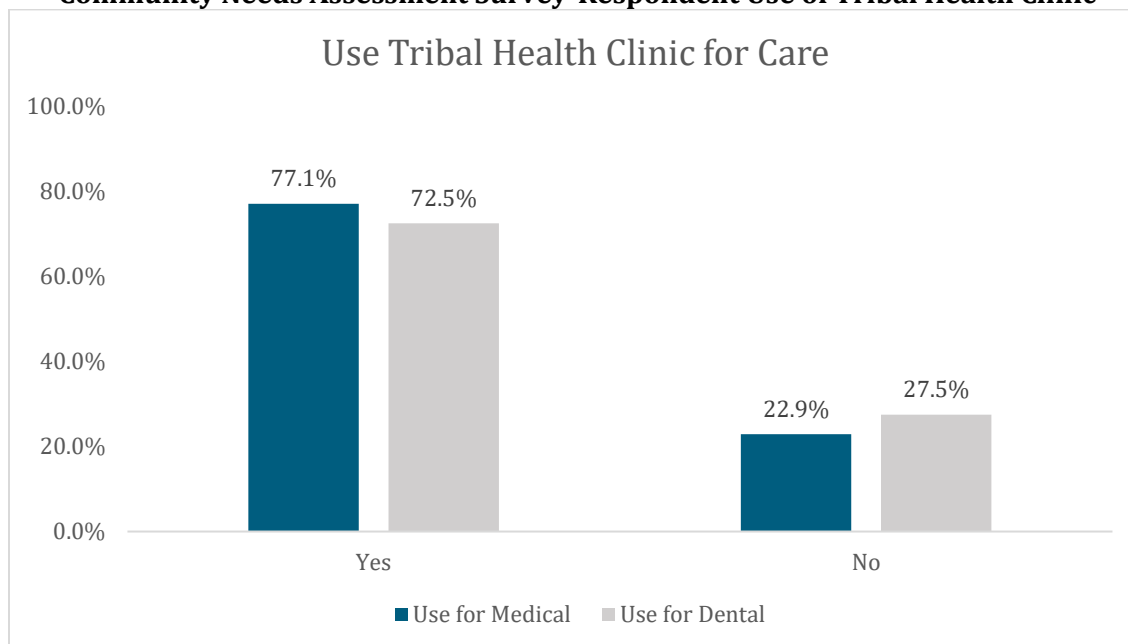
Community Needs Assessment Survey- Respondent Dental Care Provider Visits



Several barriers to the existing Tribal Health Clinic were identified in the community needs assessment and should be addressed as part of the expansion efforts. Concerns were about confidentiality, wait times for referrals, difficulty in obtaining an appointment, transportation barriers, appointments being canceled by the clinic without explanation, the quality of care received, and the professionalism of the staff.



Community Needs Assessment Survey-Respondent Use of Tribal Health Clinic



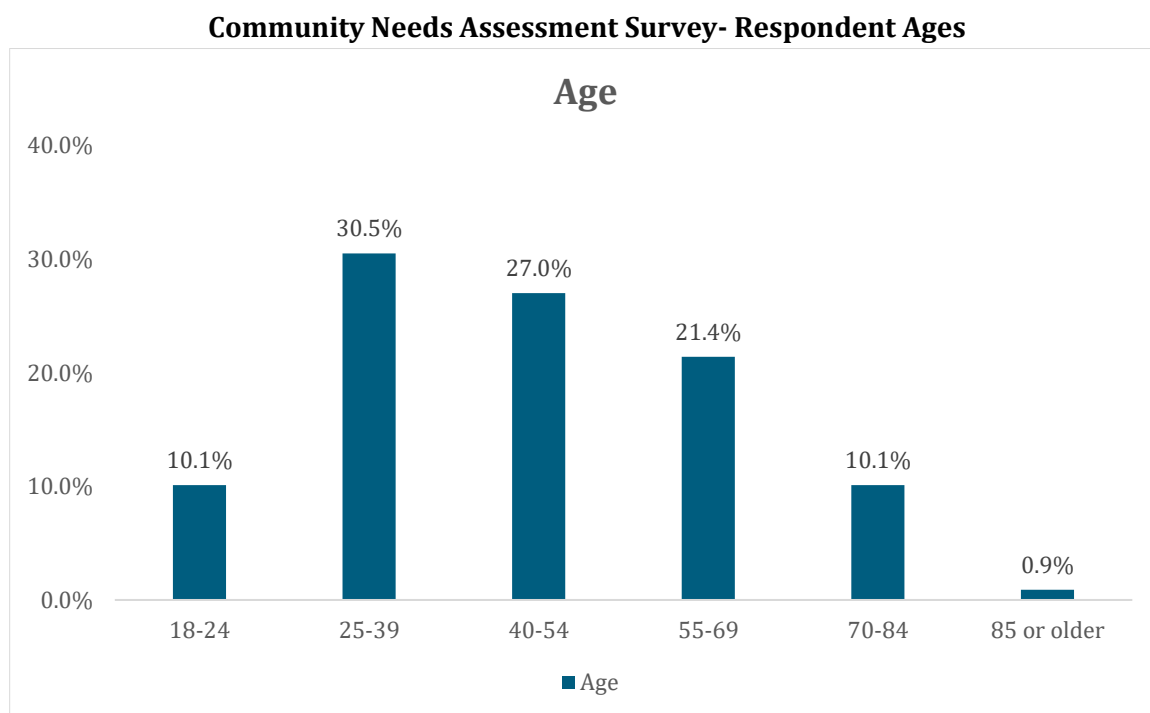
Community Needs Assessment Survey- Respondent Avoidance of Medical and Dental Care

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The clinic expansion will help address some of these challenges, and other concerns could be addressed through staff development across newly hired and existing staff, and marketing campaigns to educate patients about the clinic and its practices.

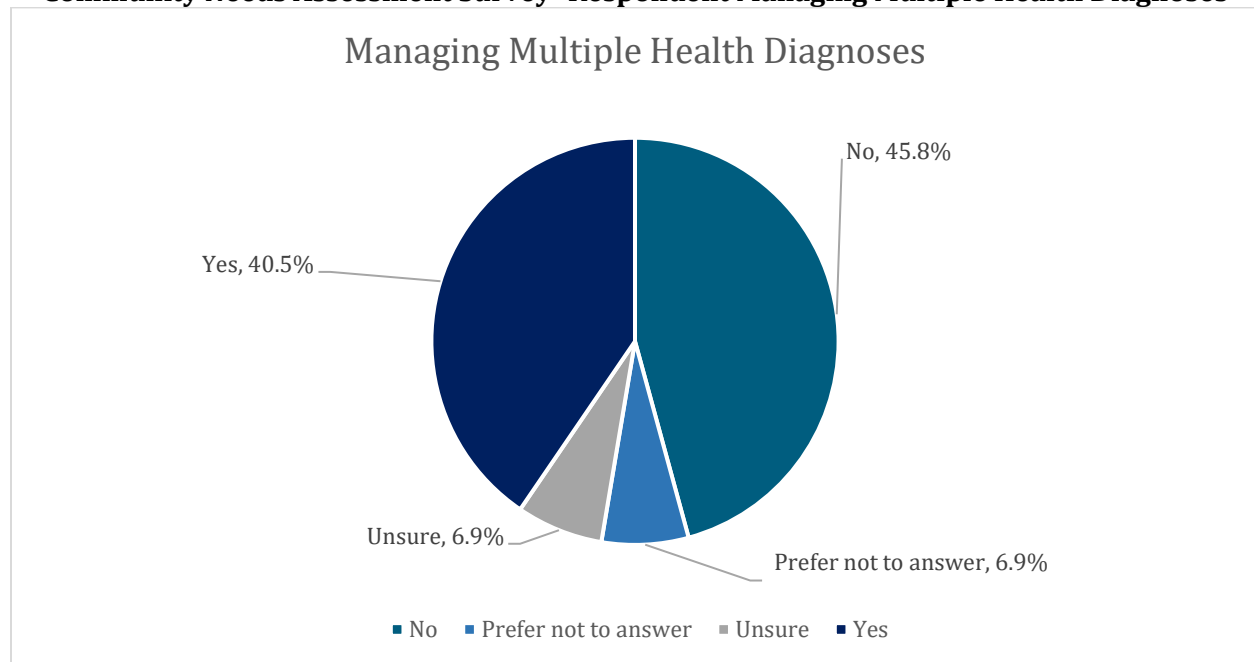
K'ima:w Assisted Care Facility

Data from the community needs assessment indicate the need for more health-related supports for older adults. Among older adults who may have complex health needs due to pre-existing health conditions and aging-related health needs, regular oversight by healthcare professionals can help extend the timing and quality of end-of-life (Citation: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7410296/>). Approximately 30% of individuals that participated in the community needs assessment were aged 55 years or older, and the most frequent health concerns among Tribal Members were diabetes, weight, high blood pressure, anxiety, depression, and eye care. Additionally, 40% of participants reported managing two or more health conditions at the time of the assessment. This highlights the need for assisted living for those with age-related and complex health needs.





Community Needs Assessment Survey- Respondent Managing Multiple Health Diagnoses





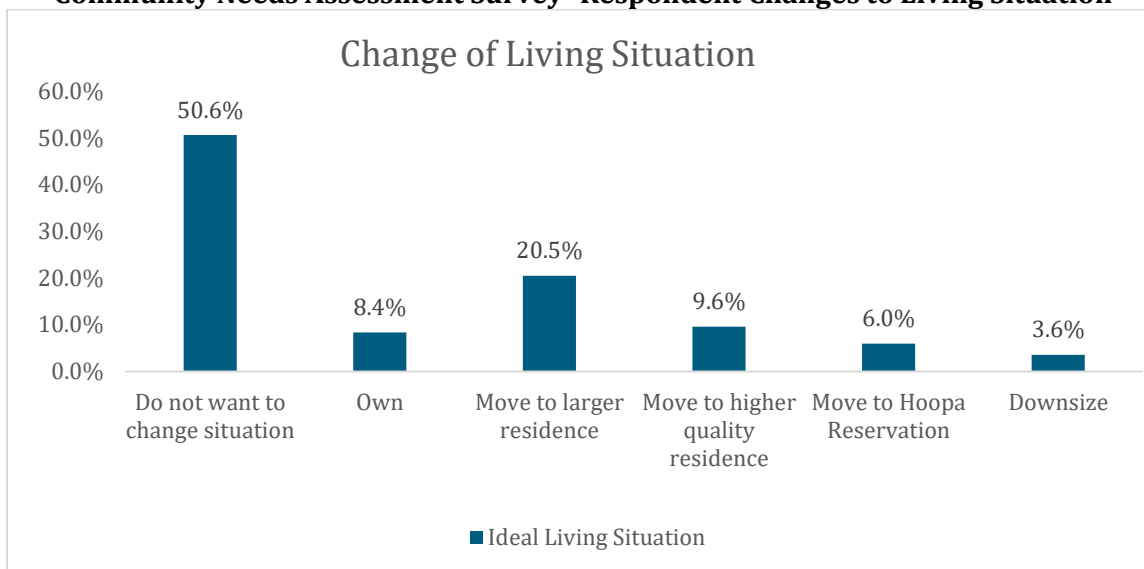
Community Needs Assessment Survey- Respondent Health Care Concerns for Self & Household

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Diabetes	23.9%
Drug use	4.7%
Elder care/health	8.7%
Elder abuse	0.3%
Eye health	23.9%
Family conflict	5.5%
Grief	17.5%
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Hepatitis	1.2%
High blood pressure	26.5%
High cholesterol	14.3%
HIV/AIDS	0.3%
Sexual transmitted diseases	0.6%
Stroke	4.4%
Tobacco use	11.1%
Trauma/PTSD	16.0%
Vaccinations	5.0%
Violence	1.2%
Weight	26.8%
Other (Describe)	11.7% (ADHD, autoimmune disease, arthritis, dementia, COPD, endometriosis, hernia, bone spurs, allergies, PCOS, nerve and spine pain, low vitamin D, long COVID-19, violence, hormone issues, migraines, seizures, tremors, sleep apnea, stress, thyroid, bladder issues, and environmental concerns (smoke, traffic noise/speed, pollution))
None	14.3%

Although 50% of individuals who completed the community needs assessment did not want to change their housing situation, about 4% wanted to downsize and 5% needed to make housing repairs/improvements to care for an aging person. Since assisted living may be something that elders may not report *wanting* but instead end up *needing*, we expect these data to under-estimate the need for assisted support and downsizing to assisted care facilities.



Community Needs Assessment Survey- Respondent Changes to Living Situation



Community Needs Assessment Survey- Respondent Problems with Residence

Problem	Respondents (%)
Need to make repairs	25.3%
Need to remodel	28.9%
Add on to current residence	15.7%
Need to modify home for a disabled person	9.6%
Need to modify home to meet needs of elderly person	4.8%
Build home but on same lot	4.8%
Need better energy efficiency	14.5%
Other	2.4%
No problems	25.3%

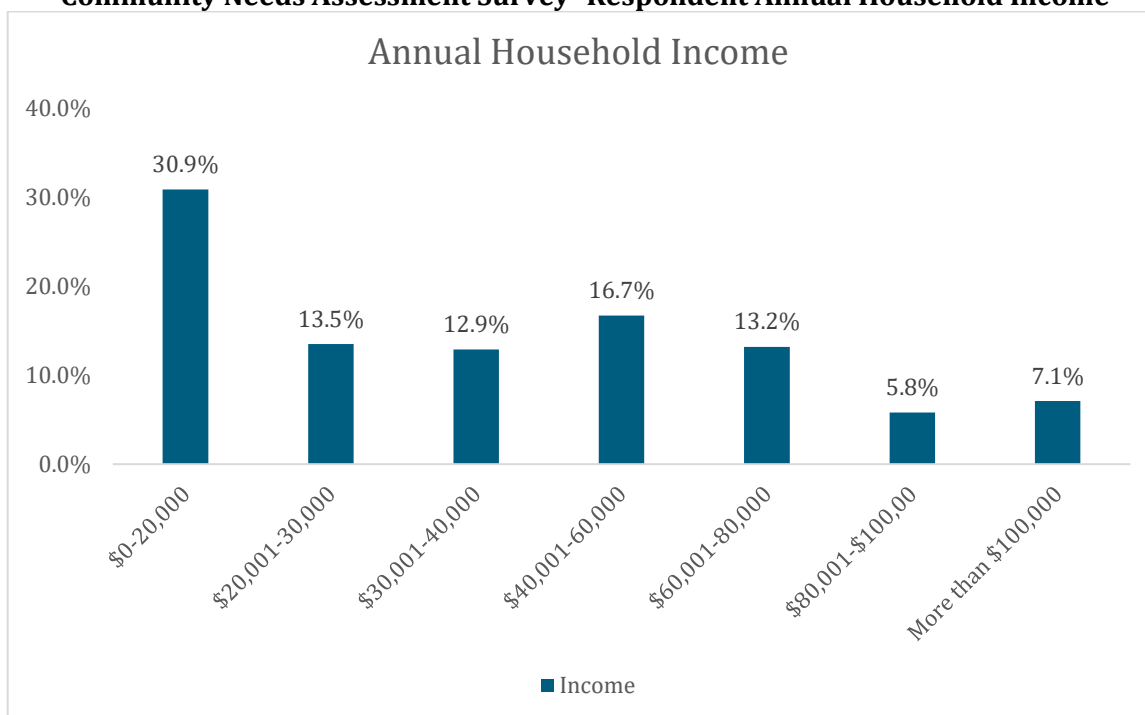
Other/additional problems with current housing were, "rent is too high" and "want my own place."

M.A.T. Clinic

The community needs assessment provided support for the M.A.T. clinic development. Demographic data indicate that almost 50% of annual household incomes fell below \$40,000, which suggests many individuals are housing insecure. Low-income levels and housing insecurity are risk factors for homelessness, substance abuse, and poor mental health outcomes, including substance use and addiction. Citation: <https://health.gov/healthypeople/priority-areas/social-determinants-health/literature-summaries/housing-instability>). Funding for a M.A.T. clinic will support Tribal efforts to mediate the impacts of housing insecurity on health.



Community Needs Assessment Survey- Respondent Annual Household Income



The community needs assessment also indicates that two of the most frequent health concerns among Tribal Members are anxiety and depression, with 36.2% of the community being concerned with anxiety and 25.9% with depression.

Community Needs Assessment Survey- Respondent Health Care Concerns for Self & Household

Health Care Concerns for Self or Household	Respondents (%)
Anger	9.6%
Anxiety	36.2%
Asthma	11.4%
Alcohol use	5.2%
Cancer	5.8%
Dental health	23.0%
Depression	25.9%
Diabetes	23.9%
Drug use	4.7%
Elder care/health	8.7%
Elder abuse	0.3%
Eye health	23.9%
Family conflict	5.5%
Grief	17.5%
Headaches	17.5%
Heart disease	7.9%
Hepatitis	1.2%
High blood pressure	26.5%



High cholesterol	14.3%
HIV/AIDS	0.3%
Sexual transmitted diseases	0.6%
Stroke	4.4%
Tobacco use	11.1%
Trauma/PTSD	16.0%
Vaccinations	5.0%
Violence	1.2%
Weight	26.8%
Other (Describe)	11.7% (ADHD, autoimmune disease, arthritis, dementia, COPD, endometriosis, hernia, bone spurs, allergies, PCOS, nerve and spine pain, low vitamin D, long COVID-19, violence, hormone issues, migraines, seizures, tremors, sleep apnea, stress, thyroid, bladder issues, and environmental concerns (smoke, traffic noise/speed, pollution))
None	14.3%

Early prevention and intervention programs should prevent negative behavioral health outcomes before they occur. However, those with anxiety and depression are at heightened risk of drug use and addiction and need more extensive mental health support and Medication Assisted Treatment facilities. For those who have already developed negative outcomes, interventions should be established to improve mental well-being and prevent future substance use (Citation: <https://health.gov/healthypeople/objectives-and-data/browse-objectives/preventive-care>; <https://www.sciencedirect.com/science/article/pii/S0378512220302826>).

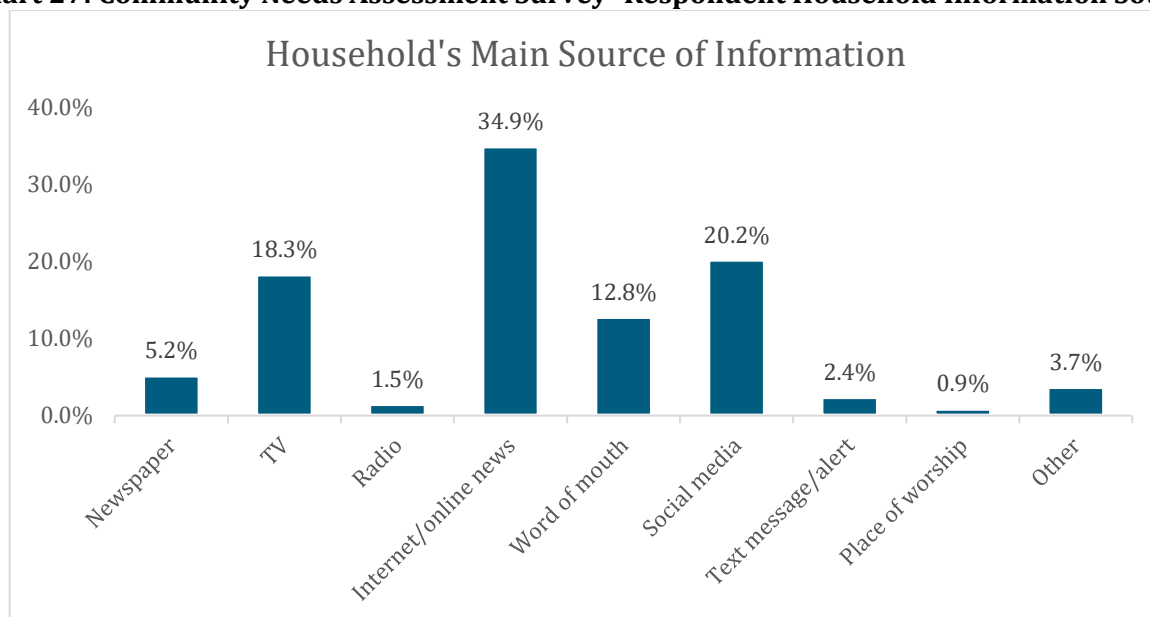
Section 7: Communication

Understanding the communication access and methods for communication of the Tribal community is crucial. This section of the survey was focused on understanding the community's connection and access to the internet and the main sources of information dissemination for Tribal Members.

Most individuals that responded showed the primary method(s) for receiving information were the internet, social media, and television (Full data shown in Chart 27). The survey also showed most Tribal Members connected to the internet via Wi-Fi, cell phone internet, and by cell phone as a hotspot (Full data on internet access is shown in Chart 28). This data showed that the community was connected to the internet through various methods and could access information via the internet and online methods.

However, there were just over 10% of respondents that still did not have access to the internet, creating a barrier for a small portion of the community in accessing information online. An open-response answer received stated a participant's main information source being "tribal gossip centers". This could be an opportunity for the Tribe to understand where these centers are and support information outreach within these circles, as well as to support programs that expand broadband access, such as the Backhaul Capacity Expansion (See Appendix D).

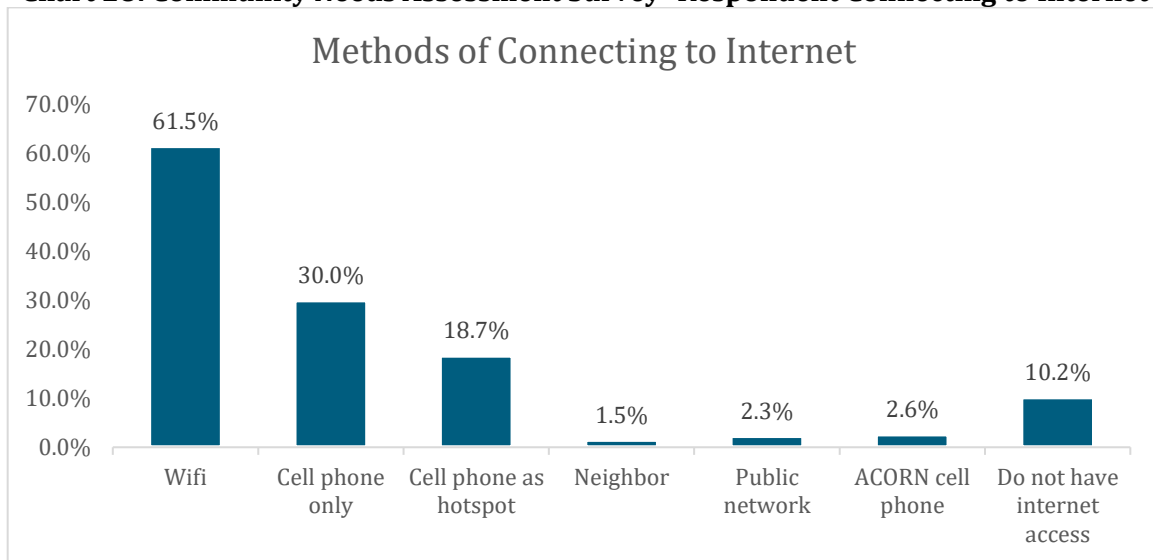
Chart 27: Community Needs Assessment Survey- Respondent Household Information Source



Other sources of household information were mail, email, and the "Tribal gossip center."



Chart 28: Community Needs Assessment Survey- Respondent Connecting to Internet



Section 8: Additional Needs

This section was also meant to provide a way for Tribal Members to include information on other needs that were not directly addressed in other areas of this survey. This information helped create a holistic report that covers a greater number of topics and critical areas of community need for further review by the Tribe.

The section of the needs assessment survey asked questions about a variety of topics, including:

- Access to Other Community Resources
- Community Garden and Food Sovereignty
- Emergency Preparedness

Access to Other Community Resources

About one-third of individuals who took the survey had access to a community garden currently, and approximately 50% had access to a gym or place to exercise, their own garden, and/or traditional Native foods (Full data shown in Chart 29). Among those who had access to traditional Native foods, the most frequently accessed were salmon, steelhead, sturgeon, or other fish (Full responses shown in Chart 30).

If offered by the Tribe or Tribal Health Center, the most frequently utilized services would be cultural classes, followed by language classes and food storage. About one-third of individuals would like to access parenting classes or caregiver support services (Full data and other identified/desired service responses are in Table 5).

Chart 29: Community Needs Assessment Survey- Respondent Access to Other Community Resources

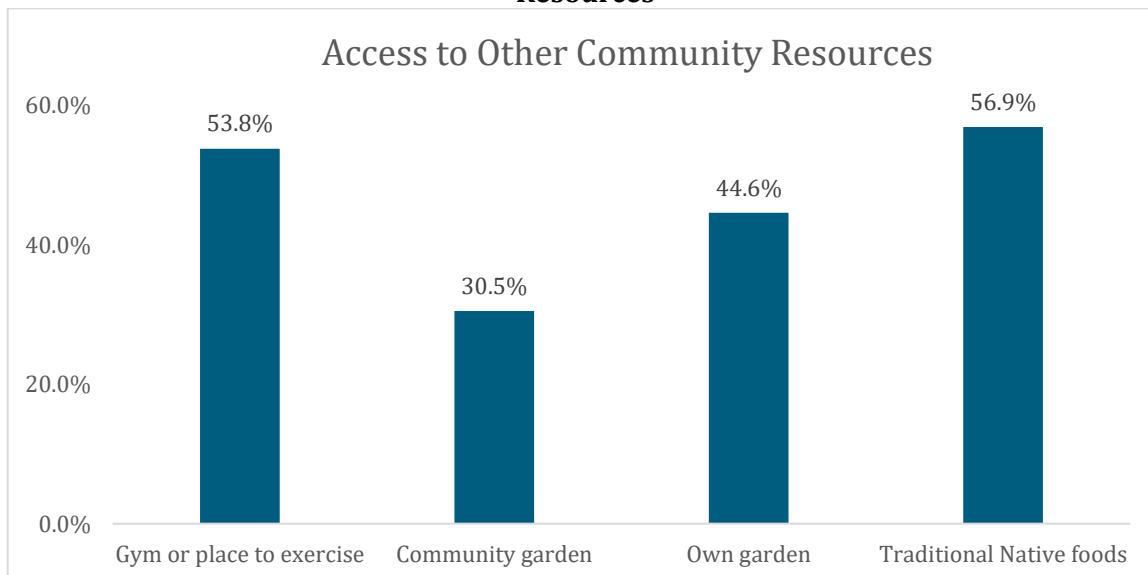
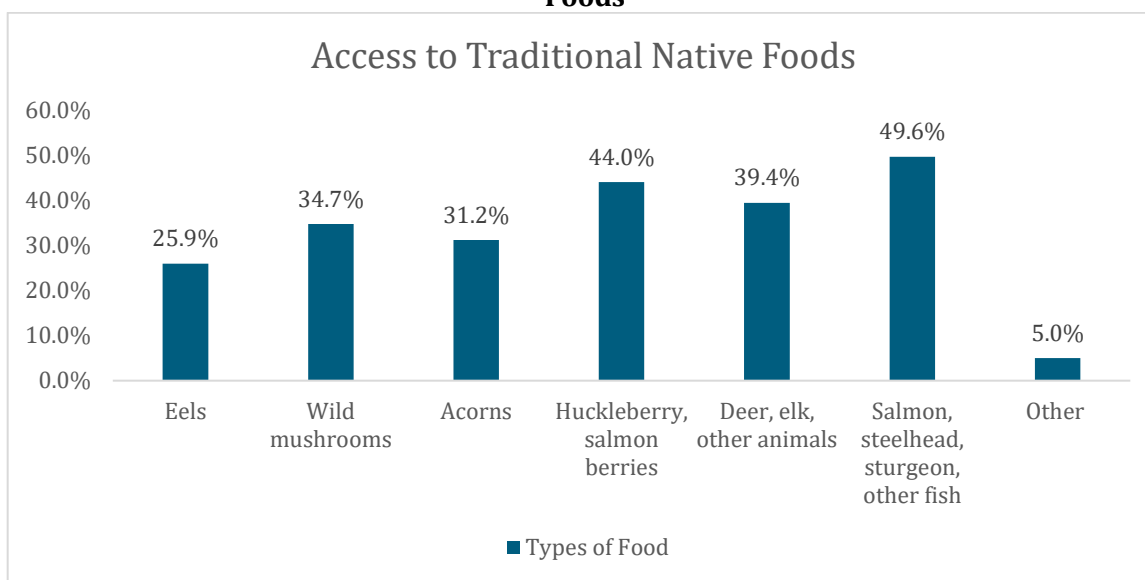




Chart 30: Community Needs Assessment Survey- Respondent Access to Traditional Native Foods



Other types of traditional Native foods were herbs, teas, blackberries, fruits, and vegetables.

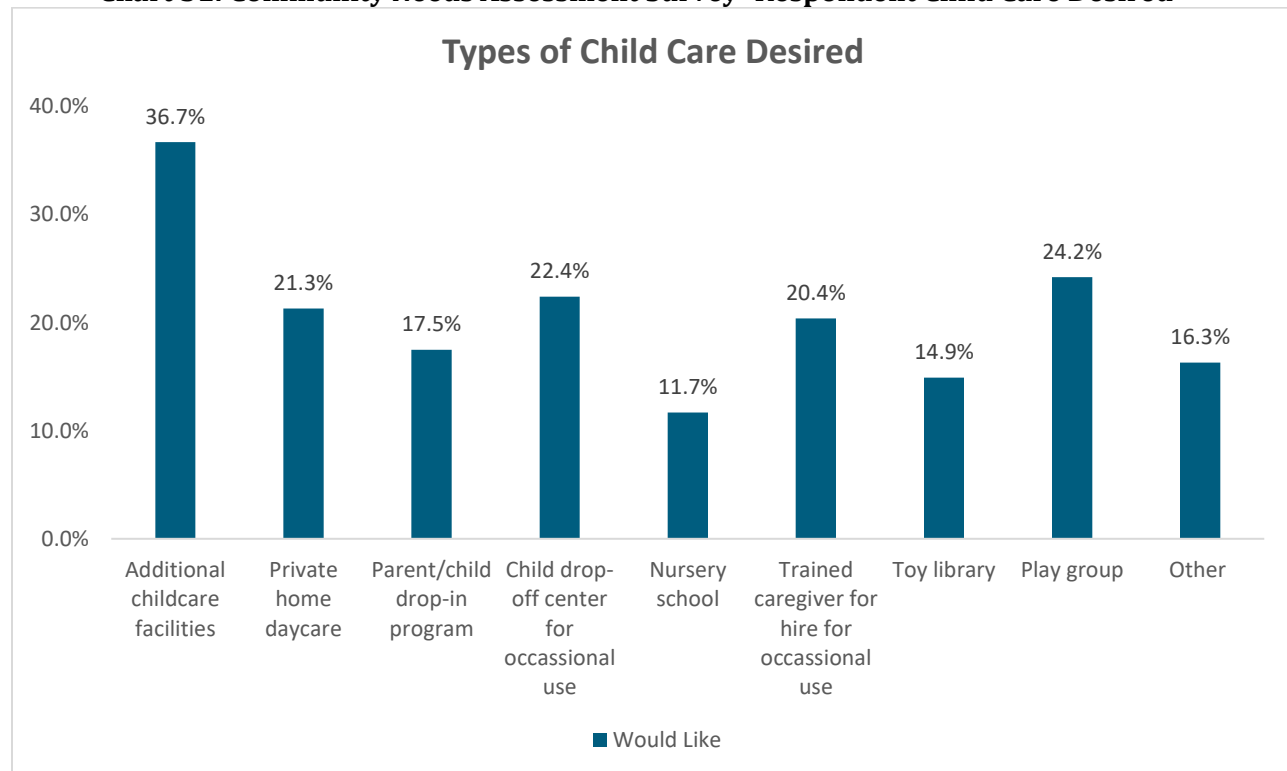
Table 5: Community Needs Assessment Survey- Respondent Utilization of Additional Services

Utilization of Additional Services if Offered by Tribe or Tribal Health Center	Respondents (%)
Parenting classes	31.2%
Caregiver support services	39.2%
Language classes	69.6%
Cultural classes	78.9%
Food storage	69.2%
Other (Describe)	ASL classes, community emergency response/first aid, culinary classes, business classes, women's talking circle, substance use group other than Al-Anon, craftsman classes, spousal support classes, senior nutrition, financial management, shed for canned food, tai chi, grief group, virtual exercise group, vocational training, participation in Tribal government activities, exercise classes, housing classes, basic pet care classes, meditation, eyeglass services, Tribal annual harvest for cultural materials

Types of Child Care Services Desired

To provide additional insights into community services, a critical area to understand was services directed at partners and children. According to the survey, if provided by the Tribe, community members with children would most frequently use additional childcare facilities, play groups, a child drop-off center for occasional use, private home daycare services, and a trained caregiver for hire for occasional use. Overall, the community indicated the need for additional resources for childcare services to support parents living within the community (Full data on services including other open responses are included in Chart 31).

Chart 31: Community Needs Assessment Survey- Respondent Child Care Desired



Other requested services for children were: sports, swim classes, biking groups, bike lane, larger preschool, vouchers for childcare assistance, vouchers for childcare for those living off-Reservation, water park, sports complex, schools on "both sides of the bridge," activity class, hikes, weaving, exercise play group, child care program that caters to working parents, Hupa language preschool, Friday childcare (Fridays are no-school for head start), a playground, parent group, program to assist with paying for childcare for higher income households, baby basket policies that encourage baby care at work, and breastfeeding.

Community Garden and Food Sovereignty

About 6% of individuals currently participate in a community garden, and another 22% would like to (Full data shown in Chart 32). However, barriers to participating in a community garden were not

having enough time, not knowing how to start, and not knowing about a nearby garden (Full data shown in Chart 33).

Chart 32: Community Needs Assessment Survey- Respondent Participation in Community Garden

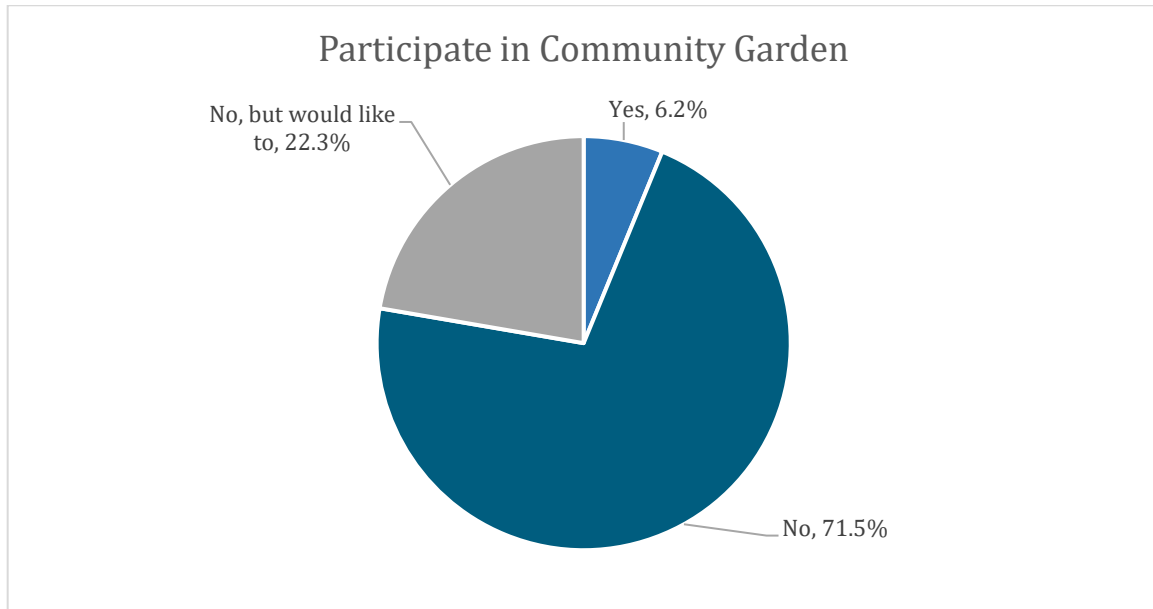
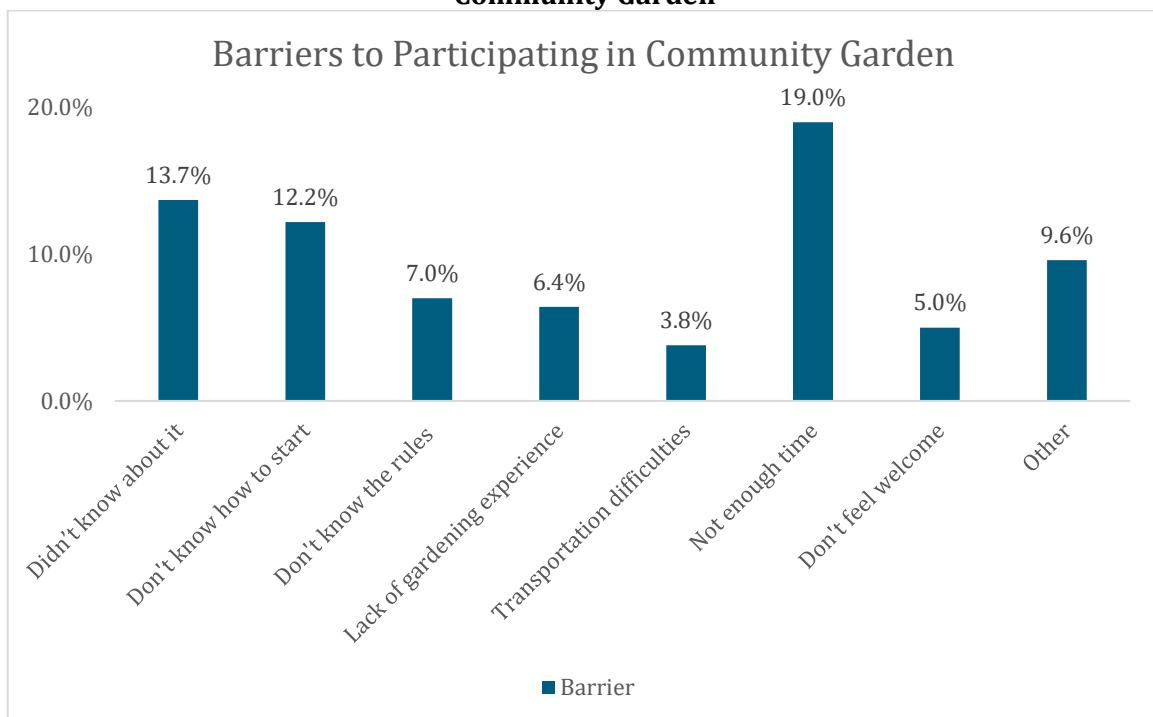


Chart 33: Community Needs Assessment Survey- Respondent Barriers to Participating in Community Garden



Other barriers to community gardening were that people have their own garden(s), lack childcare, are concerned about the cost of tools, are at work, and/or have a disability/immobility (arthritis, cannot work on ground). Several others reported not living on the Reservation or thinking the garden was inactive, "I don't think there's a lot of activity at the community garden."

Interest in Producing Own Food

Nearly 80% of survey-takers were interested in producing their own food or already producing their own food (Full data shown in Chart 34), but the most frequent barrier to producing their own food were costs (for garden, supplies, and water), as well as limited access to water for irrigation. The barriers reported are included in Chart 35 with other challenges noted in open responses.

Chart 34: Community Needs Assessment Survey- Respondent Interest in Producing Own Food

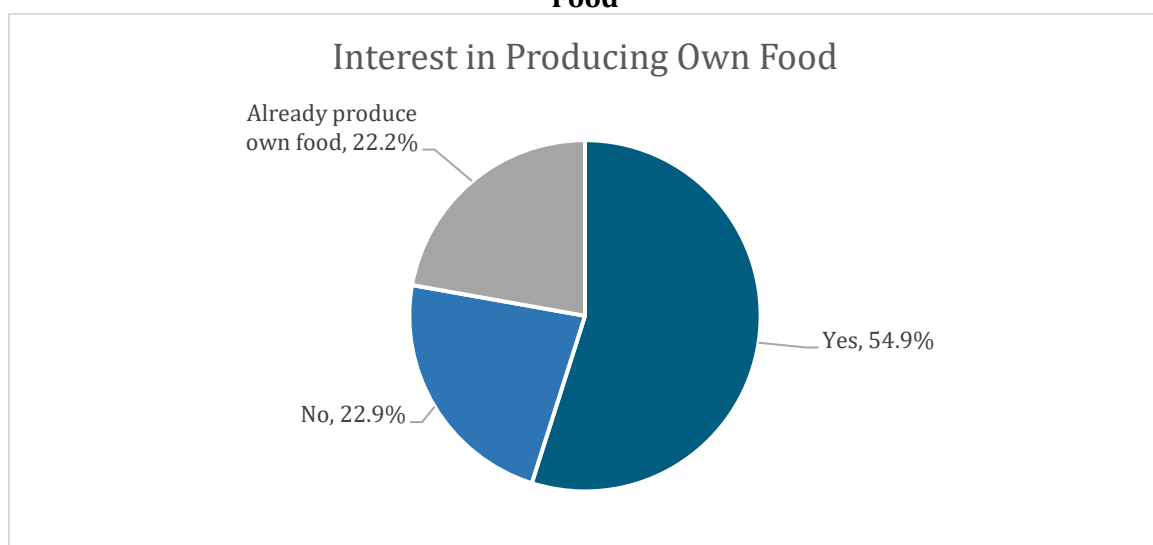
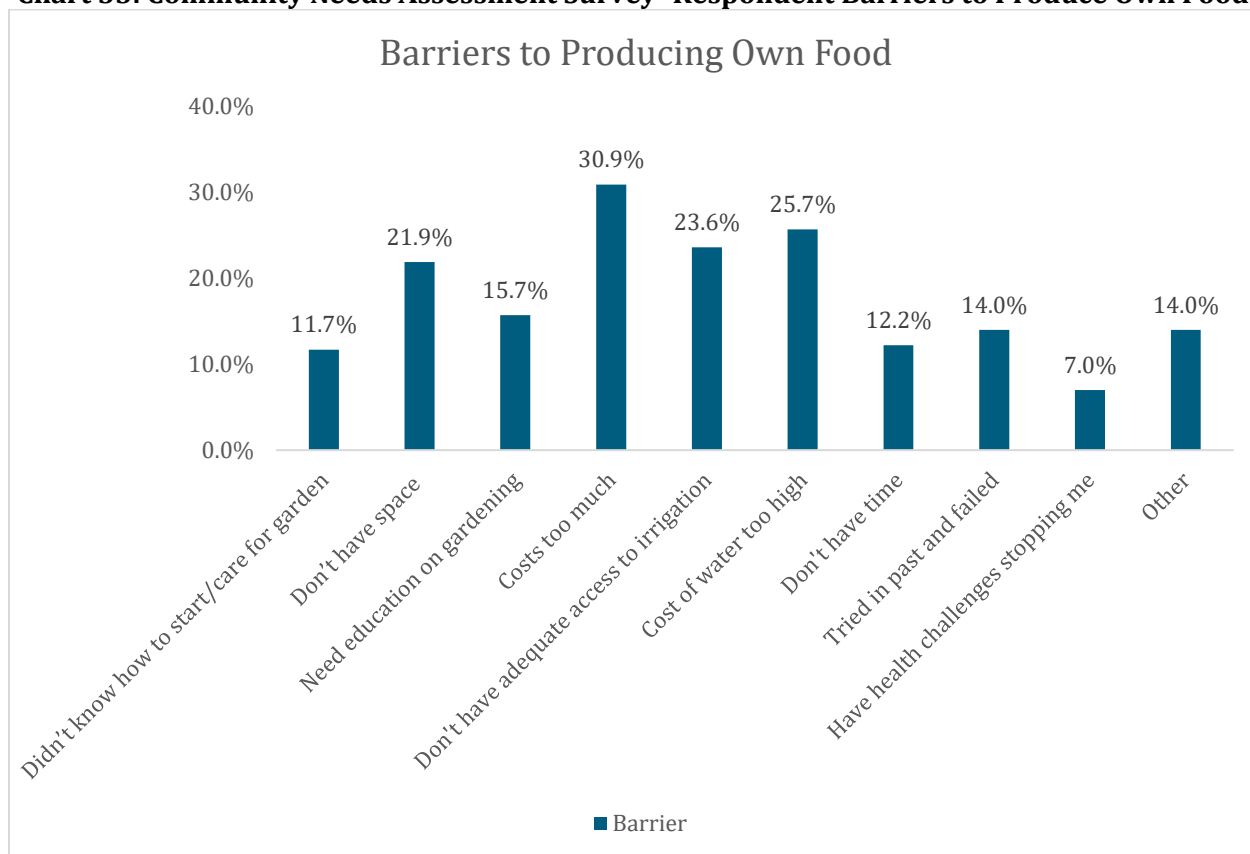




Chart 35: Community Needs Assessment Survey- Respondent Barriers to Produce Own Food



Other challenges to producing own food were: being at work, watching kids, limited motivation to produce own food, squirrels/deer/rabbits eating crop, grief, depression, people stealing from garden (food and tools), imposed, water restrictions, no land ("Only have space for 1-2 crops"), rocky ground, poor soil quality, wildfire smoke preventing outdoor activity or enough sun to grow crops, overwatering during rainy season, and not enough sunshine in cloudy part of the mountains. Proposed solutions were: providing raised gardening boxes, a Tribal greenhouse, financial assistance, and leadership organized unemployed people to take care of elders' gardens.

Emergency Preparedness

Recent Global and local natural disasters have demonstrated the importance of ensuring accessibility to emergency preparedness for everyone living within the Tribal community, including individuals with disabilities or in need of additional emergency response support. The key focus of questions in this section was to understand community member preparedness during emergency response and recovery efforts; the goal was to support the Tribe in identifying needs and preparing the community and its members for future emergency situations. To support this effort, the sections focused on access to emergency provisions and the identification of medicines that would need to be refrigerated within a household.

Only about 50% of individuals had access to the number of supplies and provisions needed for an emergency. Reasons for not evacuating during an emergency were reported in Table 6. The main reasons that would prevent a household from evacuating during an emergency were:

- Lack of trust in public officials
- No transportation
- Health problems
- Concerns about traffic jams
- Do not want to leave pets
- Concern about leaving property/looters
- Worried about personal safety
- Nowhere to go
- No money
- Mobility difficulties
- No well-publicized evacuation plan
- “There’s nowhere safer than [our] own mountains”

Table 6: Community Needs Assessment Survey- Respondent Access to Emergency Provisions

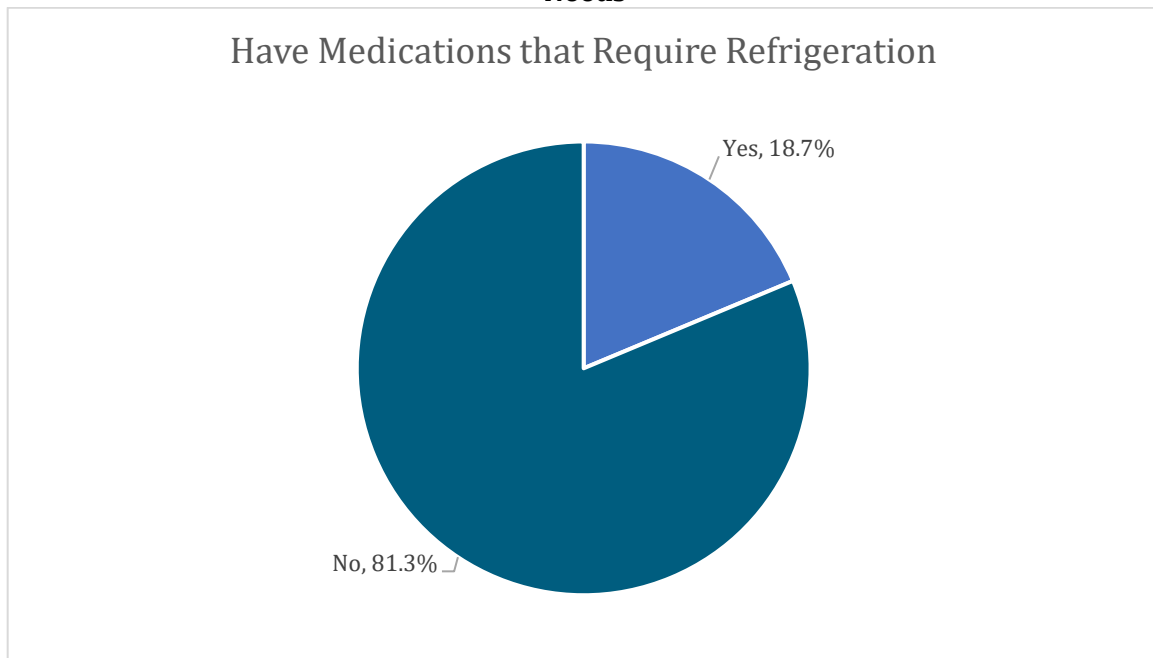
Access to Emergency Provisions	Respondents (%)
3-day supply of water for each person	47.5%
3-day supply of perishable foods for each person	52.1%
7-day supply of medication/insulin for each person that needs it	51.5%
Generator/energy source to keep power on	44.9%
Flashlights and batteries	63.7%
Other (Describe)	Gas/fuel (home, car)

Refrigerated Medication Needs

About one-fifth of community members had medications that require refrigeration, including birth control, diabetes medication, insulin, Humira, eye drops, children’s antibiotics, Trulicity, probiotics, weekly shots for arthritis, and weight management medications (Full data is included in Chart 36).



Chart 36: Community Needs Assessment Survey- Respondent Medication Refrigeration Needs





Section 9: Additional Comments

The final areas of the survey were focused on gathering any additional comments that were not directly addressed within the survey. This included an open-response section at the end of the survey to create a holistic community needs assessment.

Several individuals commented directly on the needs assessment questions, stating that the questions seemed thoughtful and inclusive of the whole community. Others felt the questions were focused on on-Reservation Tribal Members who benefit from the Tribe's services. Many comments support other projects the Tribe is undertaking, which are indicated in parentheses after each item.

Additional community needs outlined in the comments at the end of the survey were:

- Affordable housing (Natinixwe Elder Village, Elder Housing Rehabilitation, Student Housing, Campbell Field, Down Payment Assistance Fund)
- Trash clean-up (New Transfer Station – Trash Dump)
- Tree cut-down (Export Lumber/Timber Products)
- Better personal security for Tribal Members
- Safe places for youth (K-12 Educational Programming Facility, Tribal College Feasibility Study)
- Addressing mental health and substance use in the community (M.A.T Clinic, K'ima:w Clinic Expansion, Transitional Housing)
- Laundry services for community (Macintosh Property)
- Supportive services and programs (work programs, housing day programs, legal help) for those with developmental disabilities (Transitional Housing, TERO, K-12 Educational Programming Facility)
- Access to solar energy/power (Microgrid Development)
- Financial and legal services
- Restaurants and healthy foods in stores, not just via community gardening
- Better medical and dental care (K'ima:w Clinic Expansion, Assisted Care Facility)
- Access to clean drinking water (Safe Drinking Water – Trojan UV Algae)
- Support for off-Reservation Tribal Members (Student Housing, Transitional Housing)

Section 10: Support for Additional Hoopa Valley Economic, Workforce, Education, and Infrastructure Projects

There were a few other current or future Hoopa Valley economic, workforce, education, cultural, and infrastructure projects that could be supported by information within the community needs assessment. These are reflected in the text below and supported by information from the demographic, health, housing, communication, emergency preparedness, and additional comment(s) sections of the community needs assessment survey.

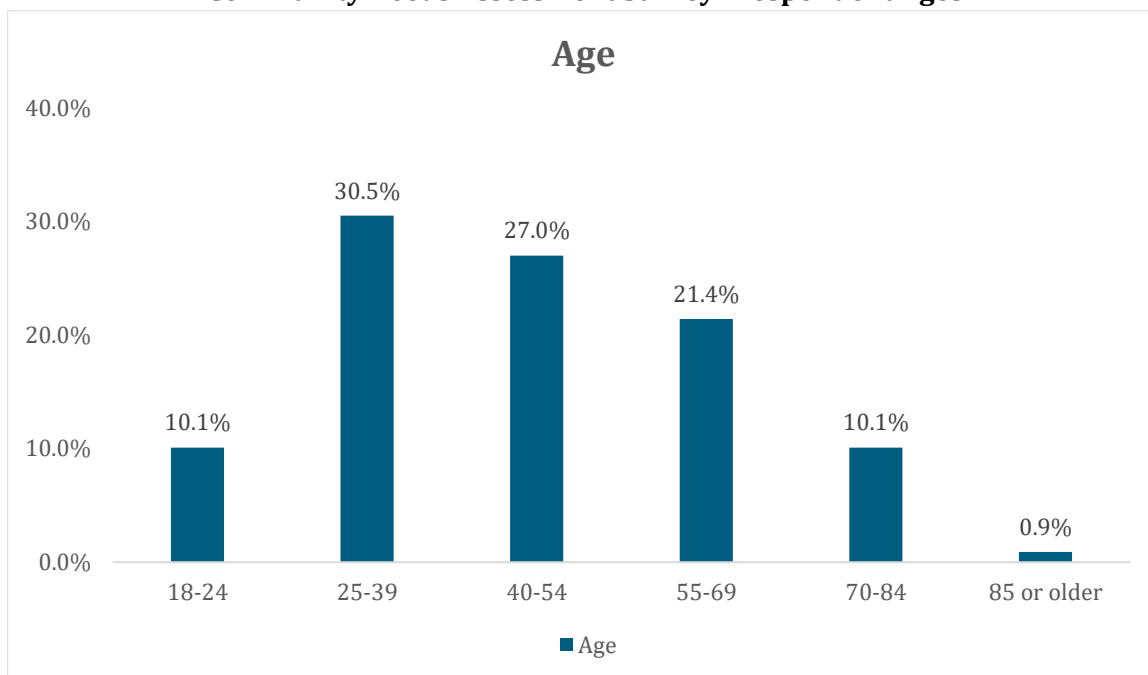
Note: Charts and tables in this section come from other sections throughout this document and may be referenced multiple times because of relevance to specific project plan narratives. The charts and tables in this section are not numbered to reduce confusion and support easier utilization of project narratives.

Economic Development Projects

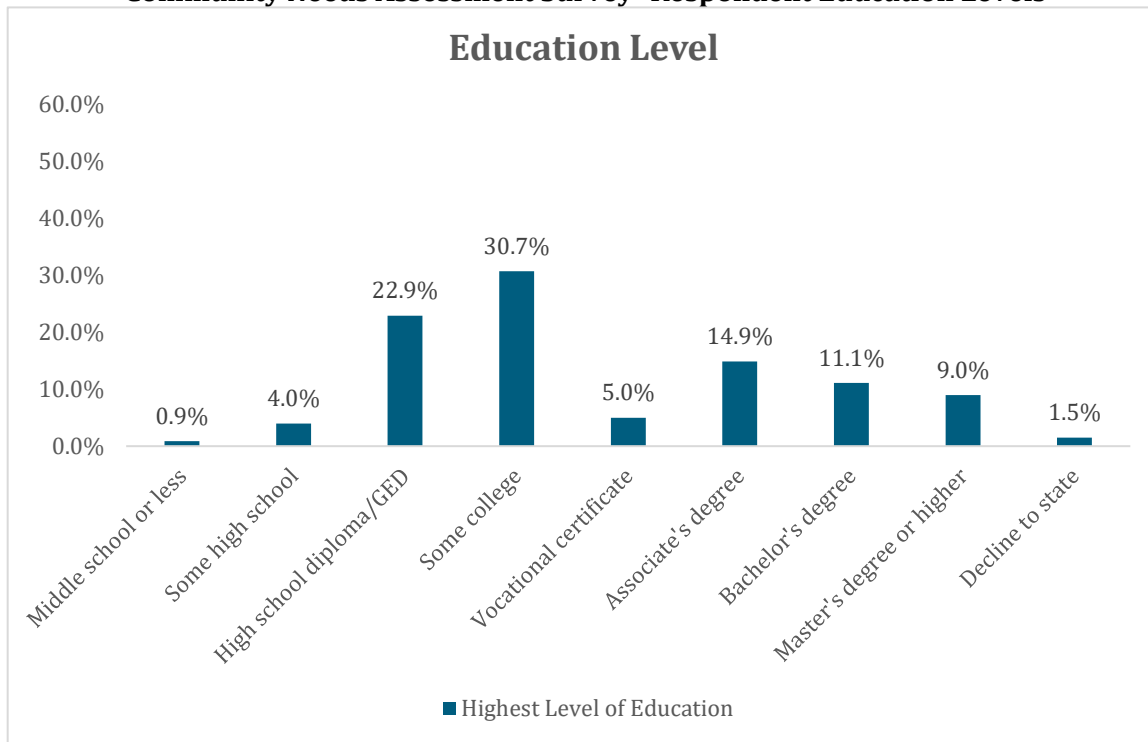
Although economic development projects were not directly assessed within the community needs assessment, a few data points, including write in comments, demonstrate some community interest in **New Travel Center, Restaurant, and Timber and Lumber Product projects.**

Related to the New Travel Center and Restaurant are the information about age and income that are found in the needs assessment. Specifically, although 70% of individuals who participated in the community needs assessment were of working age, only 36% had a college degree or higher, and entry-level positions such as those within a travel center or restaurant support job creation and resulting economic growth. Write-in comments from the community needs assessment stated an additional need of the community was “restaurants and healthy food in stores, not just through a community garden,” which reflects support of a new restaurant that has healthy food options.

Community Needs Assessment Survey- Respondent Ages



Community Needs Assessment Survey- Respondent Education Levels

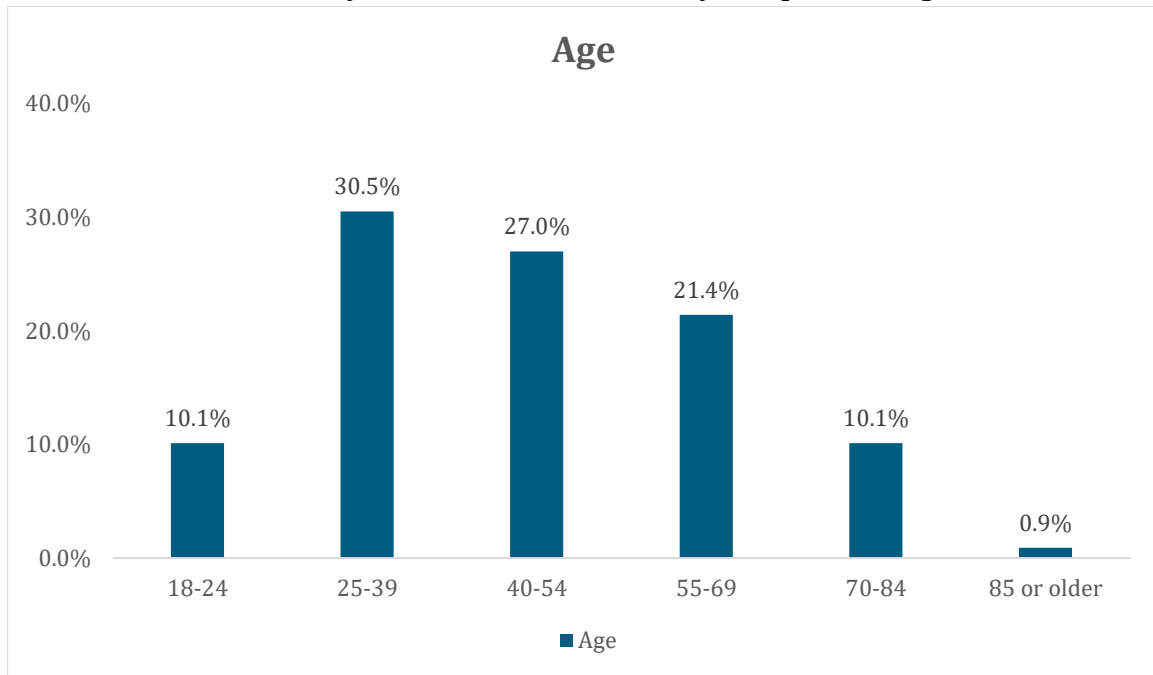


Lastly, write-in information from the community needs assessment indicated there was a need for assistance with “tree clean-up.” This suggests there may be timber and lumber products available via routine maintenance rather than only harvesting from forest areas.

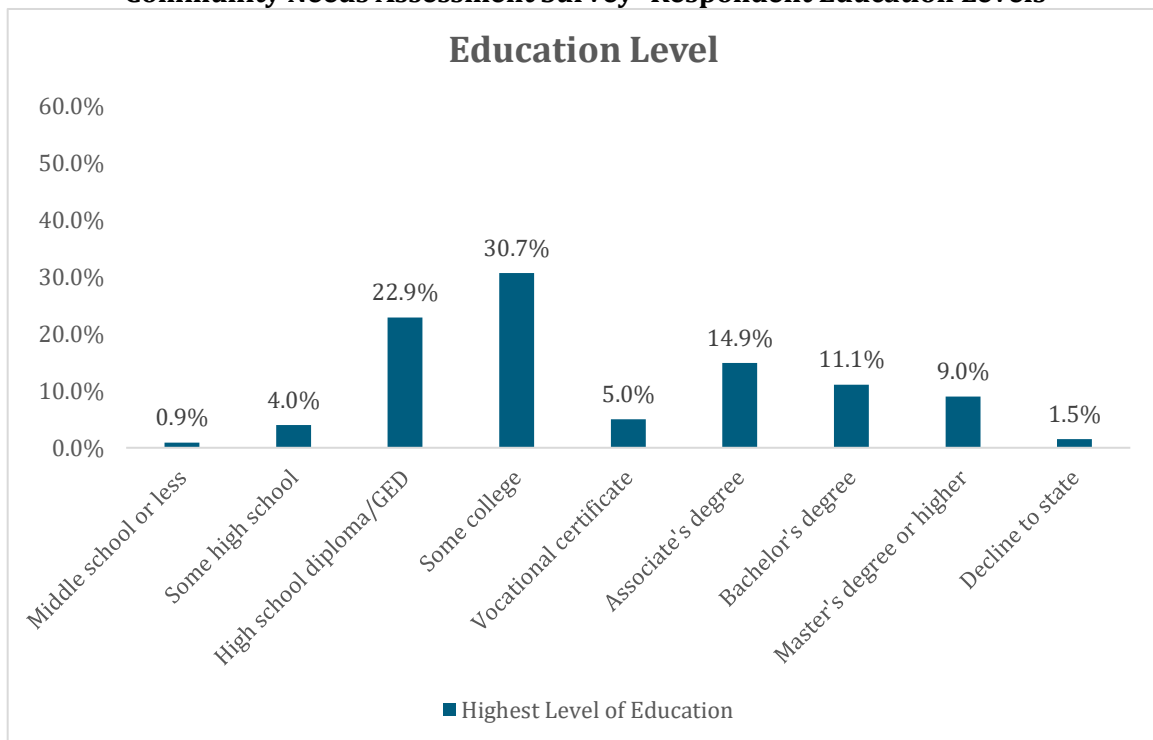
Workforce, Education, and Entrepreneur Projects

According to the community needs assessment, 70% of individuals who participated in the Assessment are of working age, but only 36% have a college degree or higher. Educational disparities are responsible for poorer financial outcomes, physical health, and mental health (Citation: <https://health.gov/healthypeople/priority-areas/social-determinants-health>). Additional needs identified by the community include via write-in information included, “safe spaces for youth,” and the creation of a **K-12 Educational Programming Facility** can support short- and long-term goals for the community in safe spaces, education, and health.

Community Needs Assessment Survey- Respondent Ages



Community Needs Assessment Survey- Respondent Education Levels

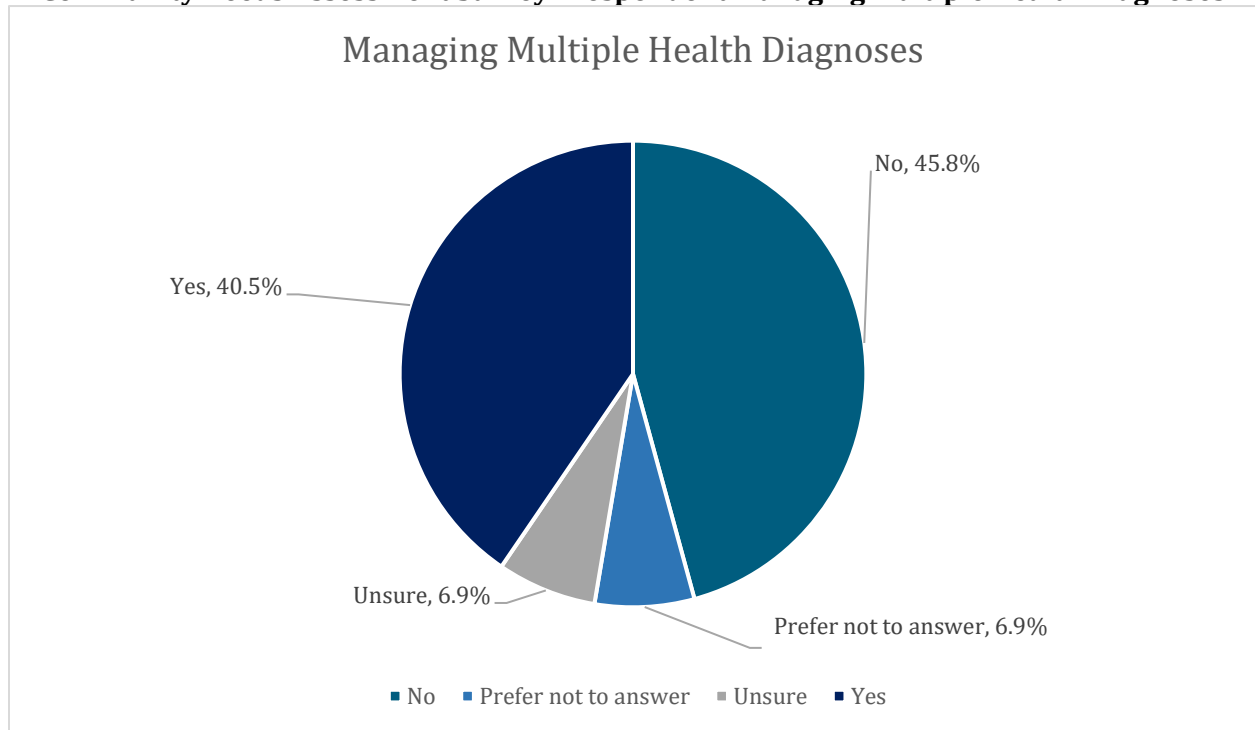


Findings from the community needs assessment indicate that over 40% of community members are managing multiple health diagnoses, and the most frequent health concerns are diabetes, weight, high blood pressure, anxiety, depression, and eye health. Student achievement in education reduces negative chronic, infectious, and mental health outcomes (Citation:



<https://health.gov/healthypeople/priority-areas/social-determinants-health>). This further supports the establishment of more K-12 facilities for Tribal Members.

Community Needs Assessment Survey- Respondent Managing Multiple Health Diagnoses



Community Needs Assessment Survey- Respondent Health Care Concerns for Self & Household

Health Care Concerns for Self or Household	Respondents (%)
Anger	9.6%
Anxiety	36.2%
Asthma	11.4%
Alcohol use	5.2%
Cancer	5.8%
Dental health	23.0%
Depression	25.9%
Diabetes	23.9%
Drug use	4.7%
Elder care/health	8.7%
Elder abuse	0.3%
Eye health	23.9%
Family conflict	5.5%
Grief	17.5%
Headaches	17.5%
Heart disease	7.9%
Hepatitis	1.2%
High blood pressure	26.5%
High cholesterol	14.3%
HIV/AIDS	0.3%
Sexual transmitted diseases	0.6%
Stroke	4.4%
Tobacco use	11.1%
Trauma/PTSD	16.0%
Vaccinations	5.0%
Violence	1.2%
Weight	26.8%
Other (Describe)	11.7% (ADHD, autoimmune disease, arthritis, dementia, COPD, endometriosis, hernia, bone spurs, allergies, PCOS, nerve and spine pain, low vitamin D, long COVID-19, violence, hormone issues, migraines, seizures, tremors, sleep apnea, stress, thyroid, bladder issues, and environmental concerns (smoke, traffic noise/speed, pollution))
None	14.3%

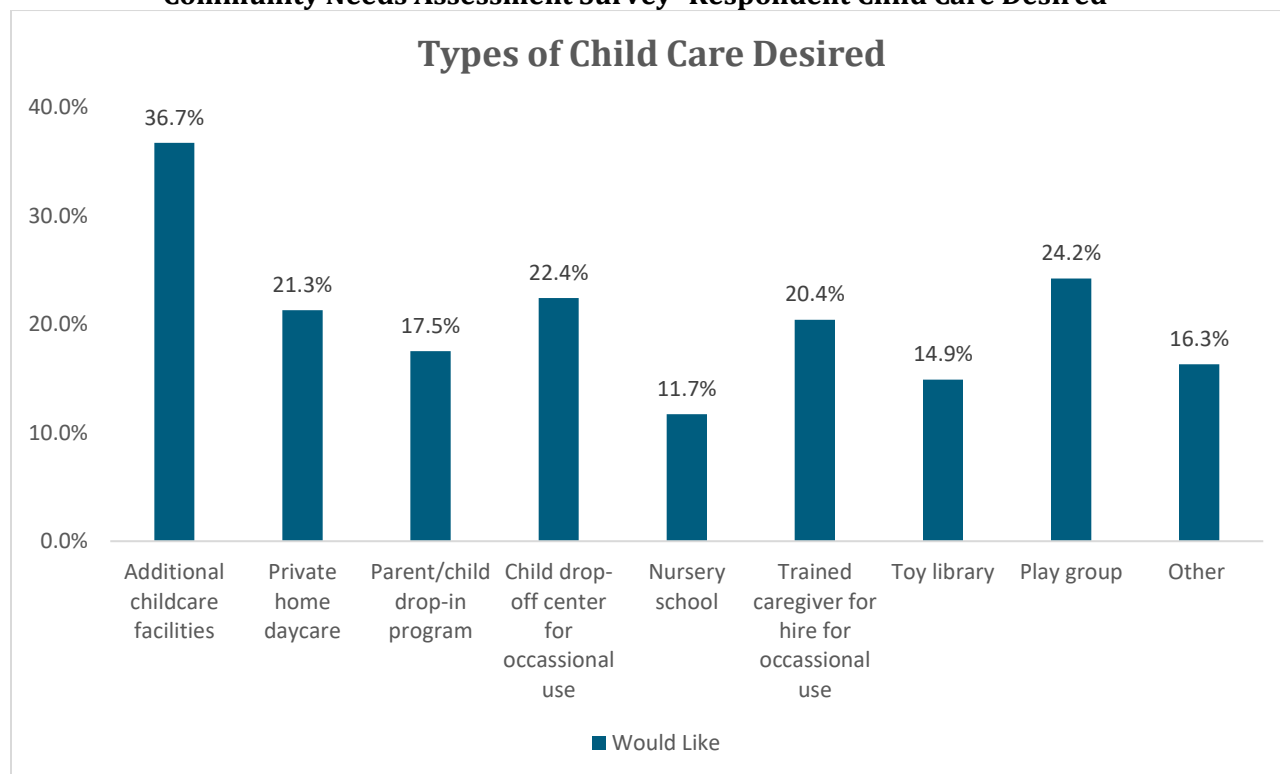
Although the focus of the site is for K-12 education, expanded support at a centralized location like the school should be considered to benefit parents and families in the community. Based on the community needs assessment, other considerations for the facility include hosting parenting classes in the evenings, which 31.2% of community members would like to see offered by the Tribe. The site may also meet Member's needs for expanded child-based programming, including childcare, preschool, and language classes for children.



Community Needs Assessment Survey- Respondent Utilization of Additional Services

Utilization of Additional Services if Offered by Tribe or Tribal Health Center	Respondents (%)
Parenting classes	31.2%
Caregiver support services	39.2%
Language classes	69.6%
Cultural classes	78.9%
Food storage	69.2%
Other (Describe)	ASL classes, community emergency response/first aid, culinary classes, business classes, women's talking circle, substance use group other than Al-Anon, craftsman classes, spousal support classes, senior nutrition, financial management, shed for canned food, tai chi, grief group, virtual exercise group, vocational training, participation in Tribal government activities, exercise classes, housing classes, basic pet care classes, meditation, eyeglass services, Tribal annual harvest for cultural materials

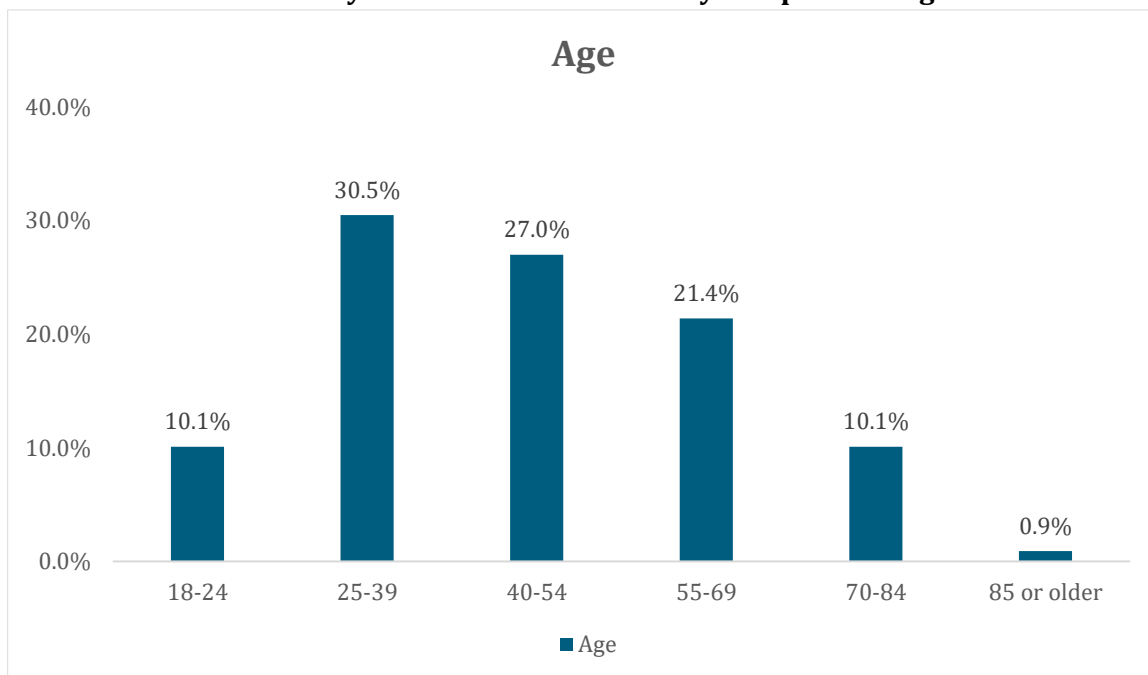
Community Needs Assessment Survey- Respondent Child Care Desired



Other requested services for children were: sports, swim classes, biking groups, bike lane, larger preschool, vouchers for childcare assistance, vouchers for childcare for those living off-Reservation, water park, sports complex, schools on “both sides of the bridge,” activity class, hikes, weaving, exercise play group, child care program that caters to working parents, Hupa language preschool, Friday childcare (Fridays are no-school for head start), a playground, parent group, program to assist with paying for childcare for higher income households, baby basket policies that encourage baby care at work, and breastfeeding.

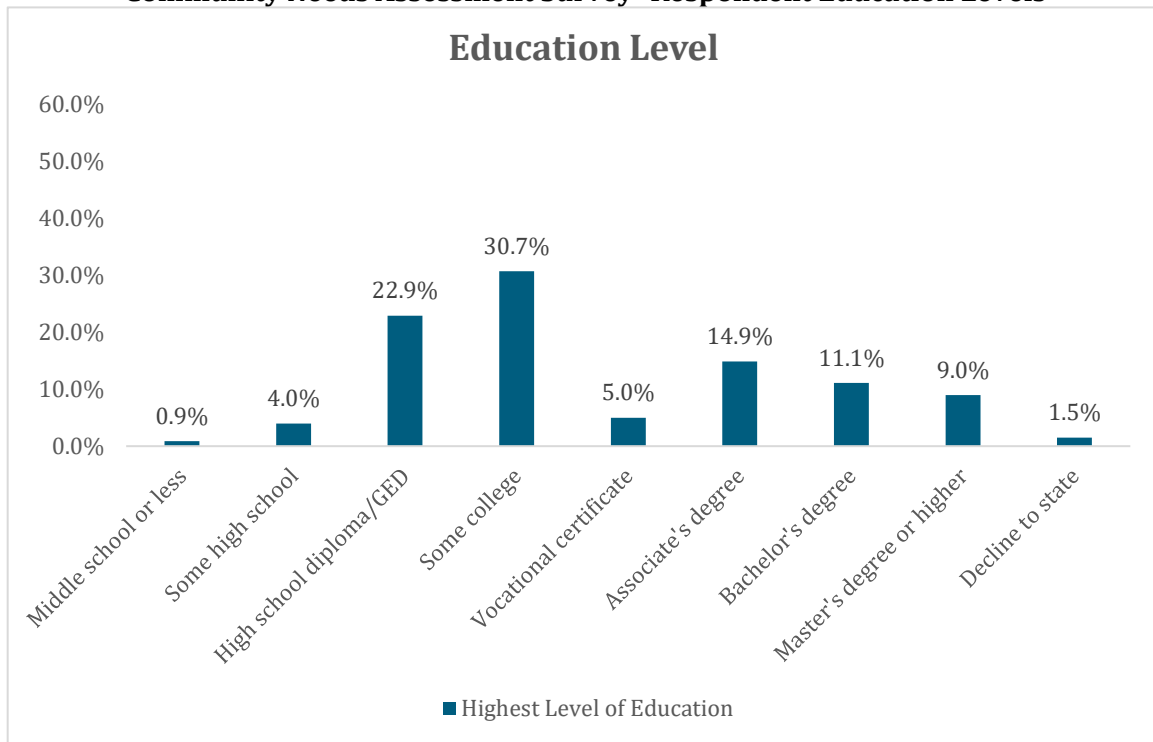
According to the community needs assessment, 70% of individuals who participated in the Assessment are of working age, but only 36% have a college degree or higher. Entry-level positions and skilled trades certifications support job creation and stimulate the economy. However, the workforce needs to be trained to sustain businesses. For those who are not attending college, **Workforce Development Program (TERO)** will support the skilled labor needed to staff new Tribal enterprises and promote employment among Tribal Members.

Community Needs Assessment Survey- Respondent Ages





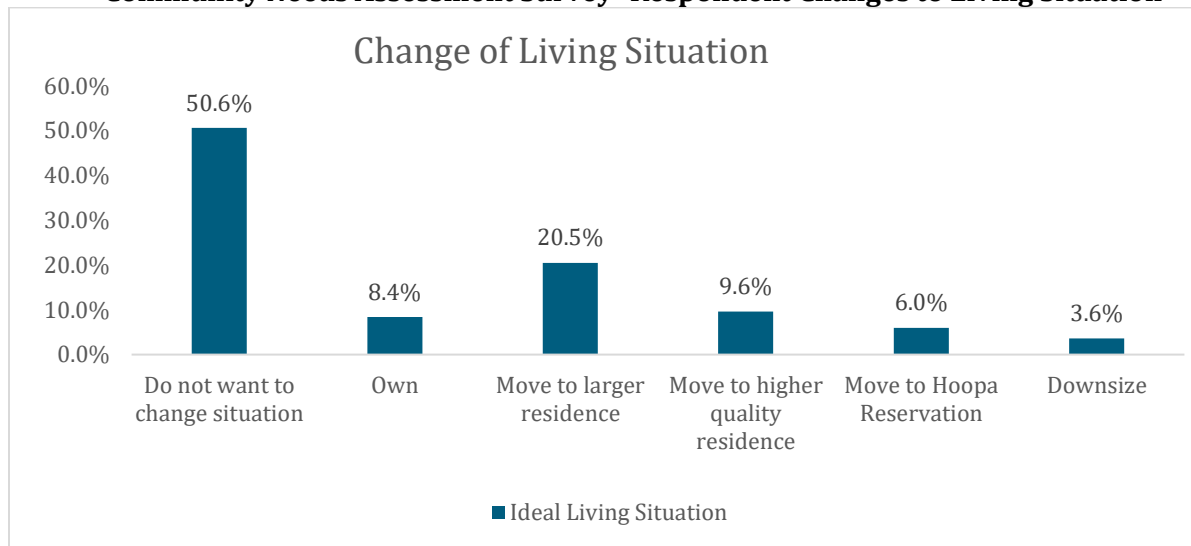
Community Needs Assessment Survey- Respondent Education Levels



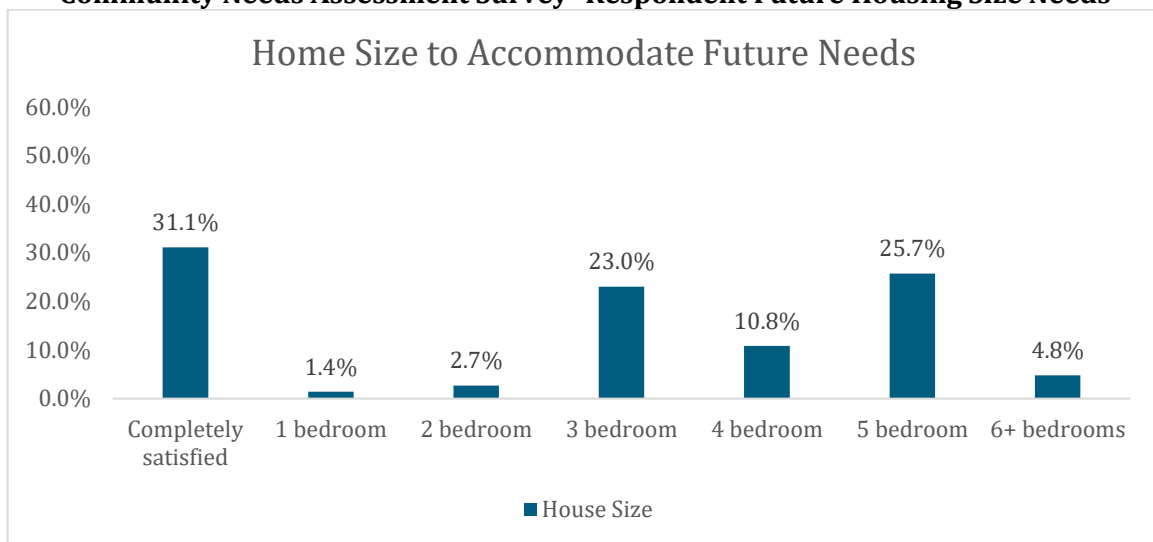
CDFI Recertification The CDFI being recertified would support housing funds, and assistance would provide support to individuals who would like to own their own home but lack access to financing options, including the 8.4% of individuals who participated in the needs assessment who said they would like to own their own home. Over a quarter of individuals who participated in the community needs assessment (27.4%) would like a single-family home if they changed to a new housing location (rather than an apartment or townhome). A total of 23.0% of Tribal Members would like a 3-bedroom home to accommodate future needs, while 10.8% would like 4 bedrooms, and 25.7% would like 5 bedrooms. The CDFI would provide access to funding and would help Tribal Members purchase homes that meet their family's current and future needs.



Community Needs Assessment Survey- Respondent Changes to Living Situation

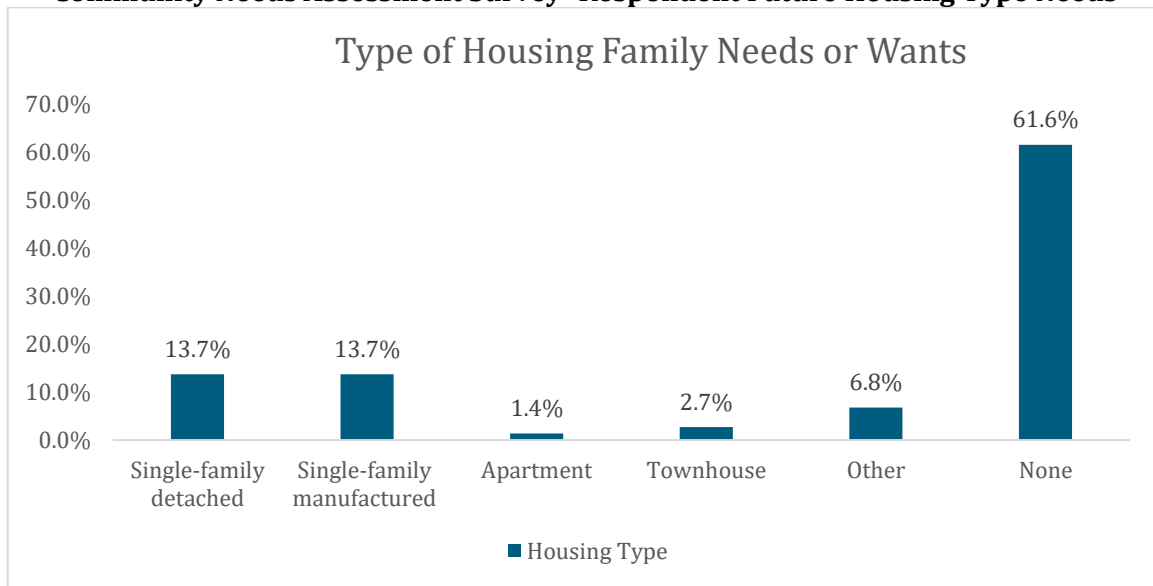


Community Needs Assessment Survey- Respondent Future Housing Size Needs





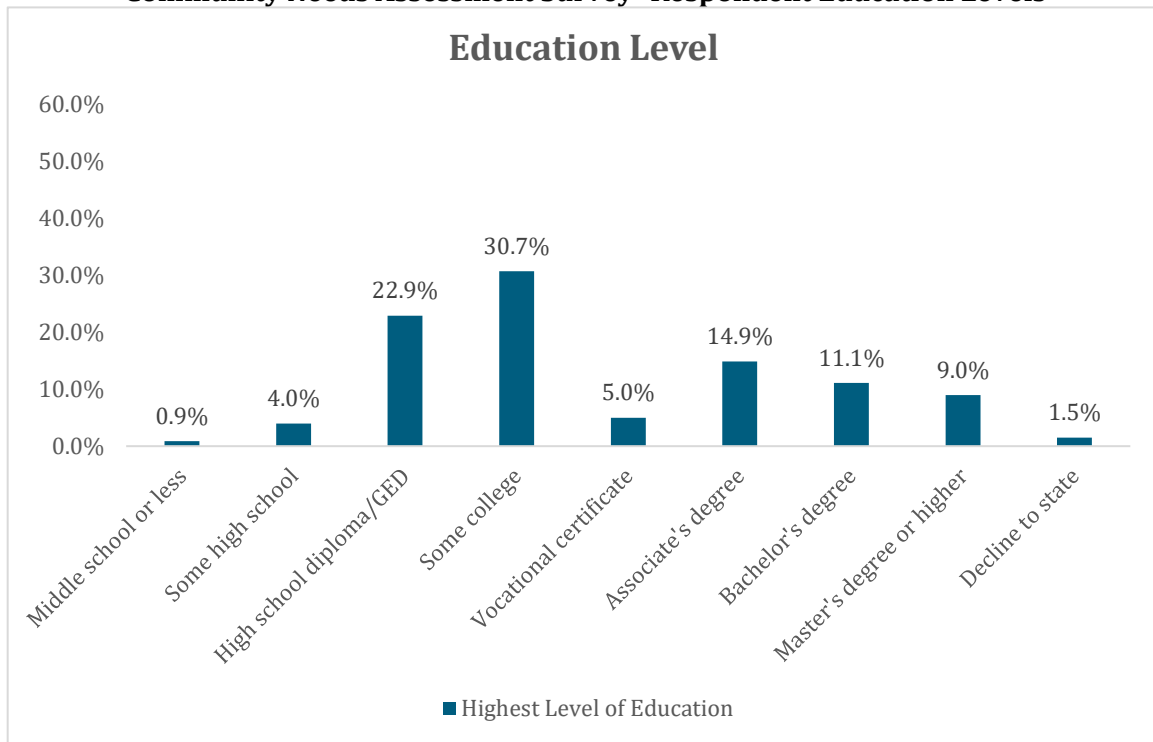
Community Needs Assessment Survey- Respondent Future Housing Type Needs



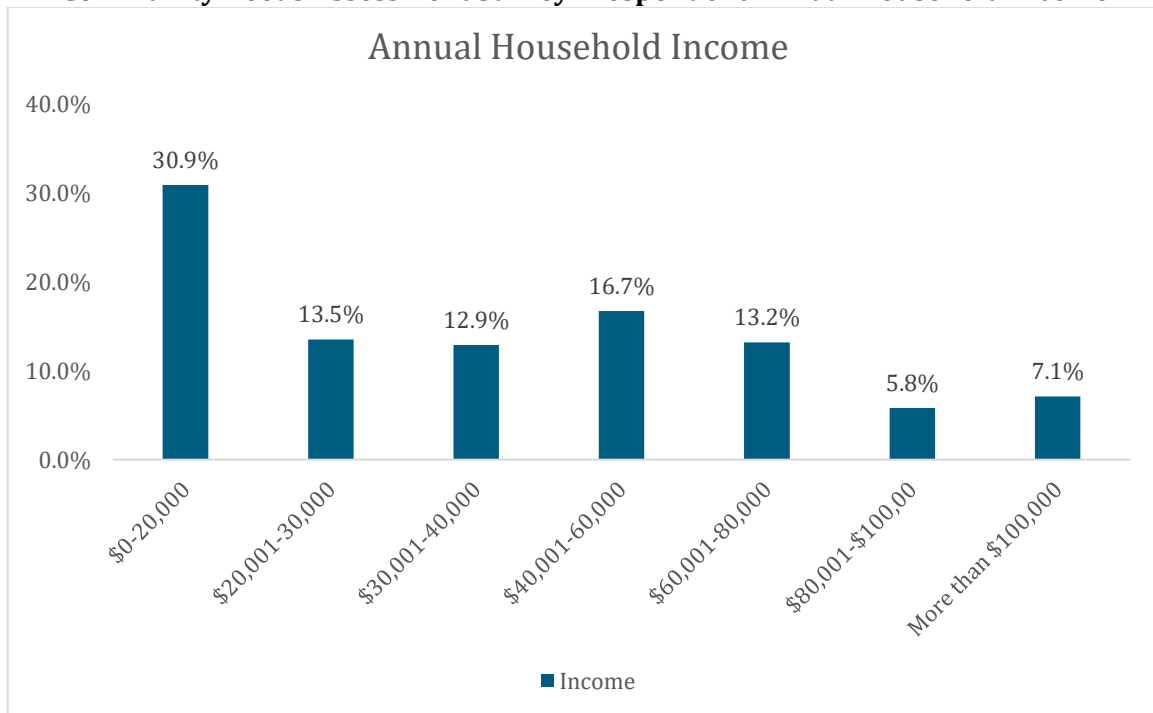
A total of 65% of Hoopa Valley Tribal Members do not have a college degree, yet 30% of that group started college but did not finish. Support for Tribal Member students attending a Tribally run college may reduce this gap in educational achievement. Demographic information from the community needs assessment also indicates that almost 50% of annual Tribal Member household incomes fell below \$40,000, which may be an artifact of the low education levels leading to skill-limited jobs or unemployment by Tribal Members. Therefore, the findings support conducting a **Tribal College Feasibility Study** to determine whether it's possible to open a Tribal college.



Community Needs Assessment Survey- Respondent Education Levels

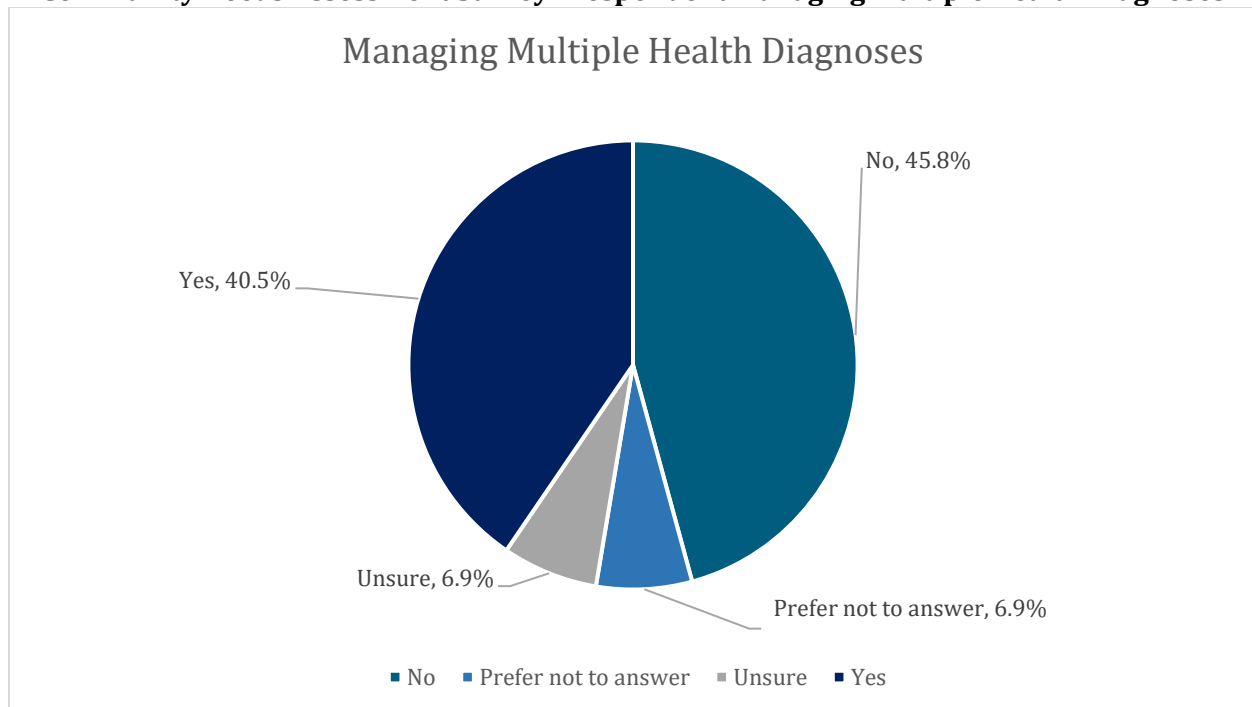


Community Needs Assessment Survey- Respondent Annual Household Income



Findings from the assessment indicate that over 40% of community members are managing multiple health diagnoses, and the most frequent health concerns are diabetes, weight, high blood pressure, anxiety, depression, and eye health. Student achievement in post-secondary education reduces negative chronic, infectious, and mental health outcomes (<https://health.gov/healthypeople/priority-areas/social-determinants-health>).

Community Needs Assessment Survey- Respondent Managing Multiple Health Diagnoses





Community Needs Assessment Survey- Respondent Health Care Concerns for Self & Household

Health Care Concerns for Self or Household	Respondents (%)
Anger	9.6%
Anxiety	36.2%
Asthma	11.4%
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Dental health	23.0%
Depression	25.9%
Diabetes	23.9%
Drug use	4.7%
Elder care/health	8.7%
Elder abuse	0.3%
Eye health	23.9%
Family conflict	5.5%
Grief	17.5%
Headaches	17.5%
Heart disease	7.9%
Hepatitis	1.2%
High blood pressure	26.5%
High cholesterol	14.3%
HIV/AIDS	0.3%
Sexual transmitted diseases	0.6%
Stroke	4.4%
Tobacco use	11.1%
Trauma/PTSD	16.0%
Vaccinations	5.0%
Violence	1.2%
Weight	26.8%
Other (Describe)	11.7% (ADHD, autoimmune disease, arthritis, dementia, COPD, endometriosis, hernia, bone spurs, allergies, PCOS, nerve and spine pain, low vitamin D, long COVID-19, violence, hormone issues, migraines, seizures, tremors, sleep apnea, stress, thyroid, bladder issues, and environmental concerns (smoke, traffic noise/speed, pollution))
None	14.3%



Infrastructure Projects

Responses to the community needs assessment showed support for the **Tribal Microgrid Development** project. Within the comments section of questions about individuals' current housing situation, many Tribal Members said an improvement to their residence would be "solar and alternative power options." Write-in comments in the document similarly included suggestions for individual- and community-based "access to solar energy or power." When asked about needed housing improvements, 14.1% of Tribal Members said they need better energy efficiency. Additionally, about 55% of community members do not have access to a generator or power source to keep the power on in the event of an emergency, but approximately one-fifth have medications requiring refrigeration, which requires a power source.

Community Needs Assessment Survey- Respondent Problems with Residence

Problem	Respondents (%)
Need to make repairs	25.3%
Need to remodel	28.9%
Add on to current residence	15.7%
Need to modify home for a disabled person	9.6%
Need to modify home to meet needs of elderly person	4.8%
Build home but on same lot	4.8%
Need better energy efficiency	14.5%
Other	2.4%
No problems	25.3%

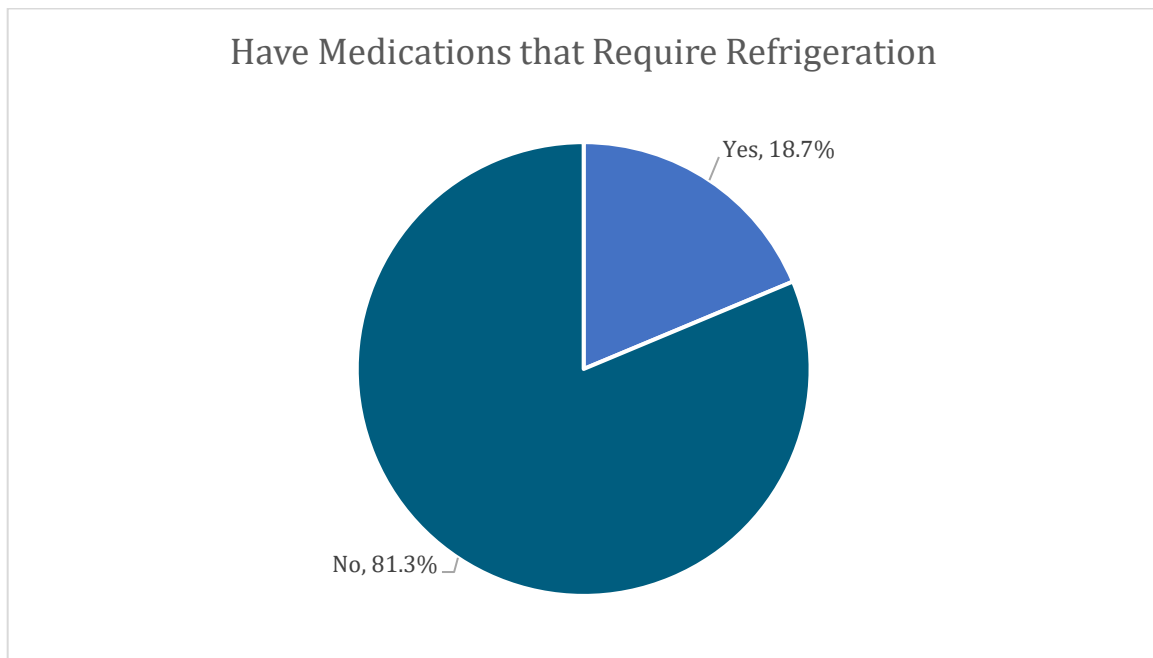
Other/additional problems with current housing were, "rent is too high" and "want my own place."

Community Needs Assessment Survey- Respondent Access to Emergency Provisions

Access to Emergency Provisions	Respondents (%)
3-day supply of water for each person	47.5%
3-day supply of perishable foods for each person	52.1%
7-day supply of medication/insulin for each person that needs it	51.5%
Generator/energy source to keep power on	44.9%
Flashlights and batteries	63.7%
Other (Describe)	Gas/fuel (home, car)

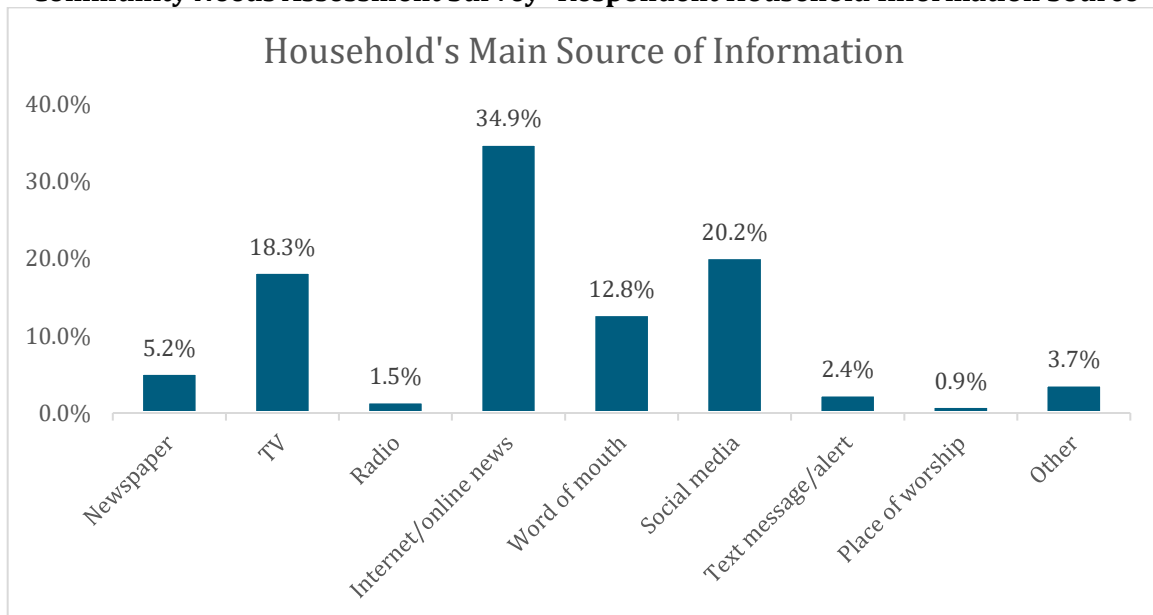


Community Needs Assessment Survey- Respondent Medication Refrigeration Needs



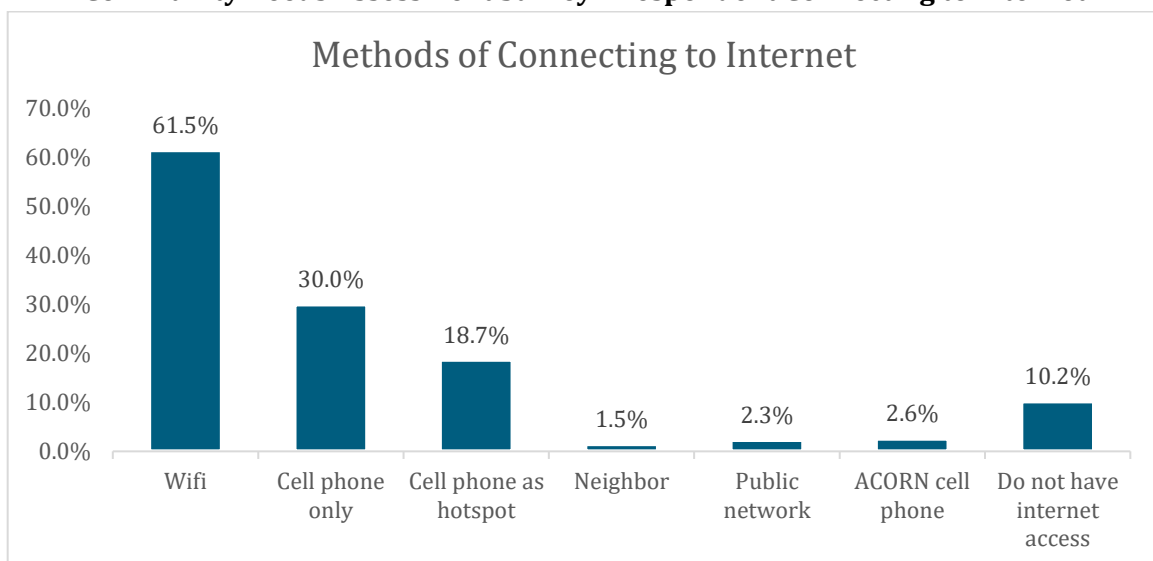
Findings from the community needs assessment show that the internet/online, TV, and social media are primary sources of information for community households, and 61.5% connect to the internet via WIFI, 30.0% use their cell phone only, and 18.7% use their cell phone as a hotspot. Approximately 10% do not have internet access via WIFI, cell phone, or broadband. This information reveals a gap in digital access that could be alleviated by the **Backhaul Capacity Expansion to support Tribal Broadband Connectivity**.

Community Needs Assessment Survey- Respondent Household Information Source



Other sources of household information were mail, email, and the "Tribal gossip center."

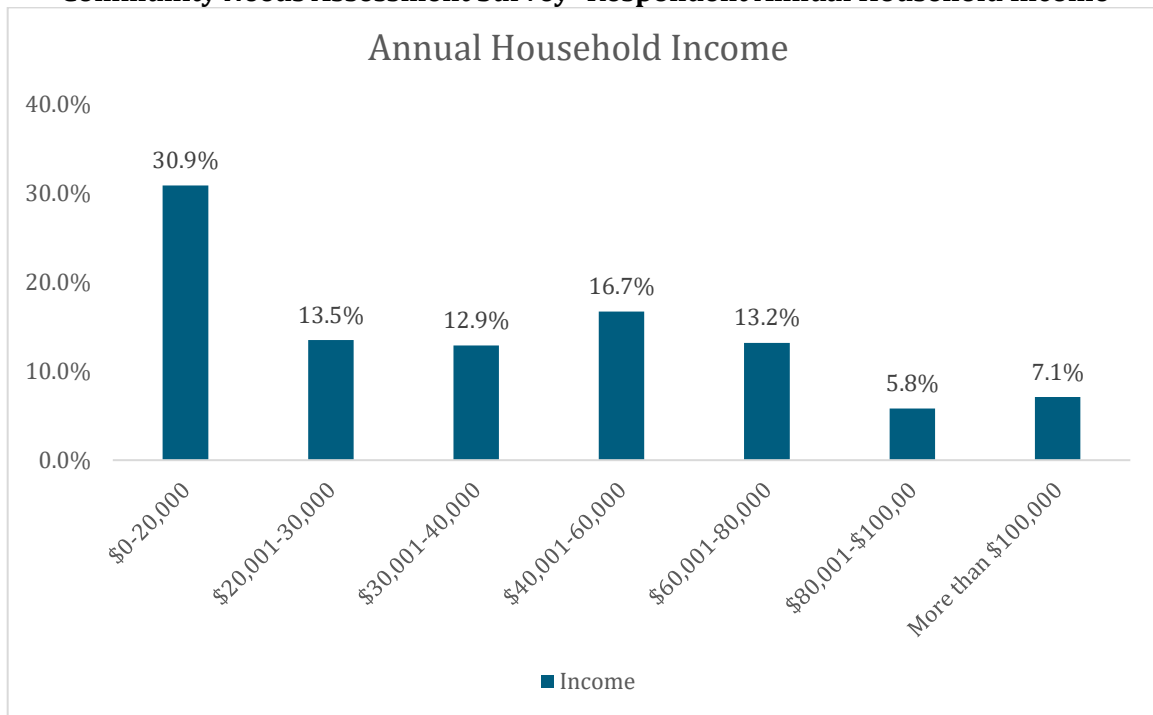
Community Needs Assessment Survey - Respondent Connecting to Internet



Tribal broadband connectivity for Members would also alleviate the cost of a cell phone or additional WIFI by community members from low-income households; community needs assessment demographic data indicate that almost 50% of annual household incomes fell below \$40,000, which suggests paying WIFI may be a financial challenge.



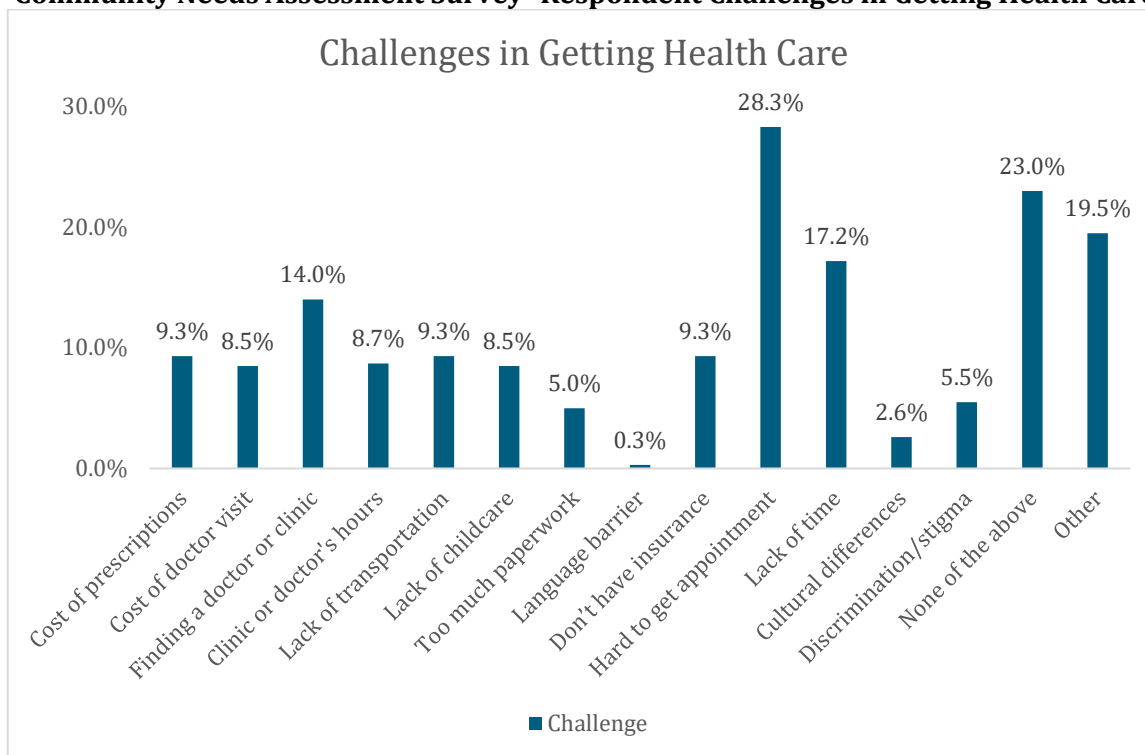
Community Needs Assessment Survey- Respondent Annual Household Income



Improved broadband access could support the improvement in healthcare access among Tribal Members. Improved access was prioritized within the community needs assessment, with many asking for “better medical and dental care.” Although the Tribal Health Center is currently available for medical or dental services, 9.3% have transportation barriers to receiving care, 8.5% have a lack of childcare, 17.2% have a lack of time, and 28.3% reported it was hard to get an appointment. Virtual health care (telehealth) through Tribal Broadband connectivity may address these barriers, especially because about 50% of community members would like to start or continue virtual health care services.



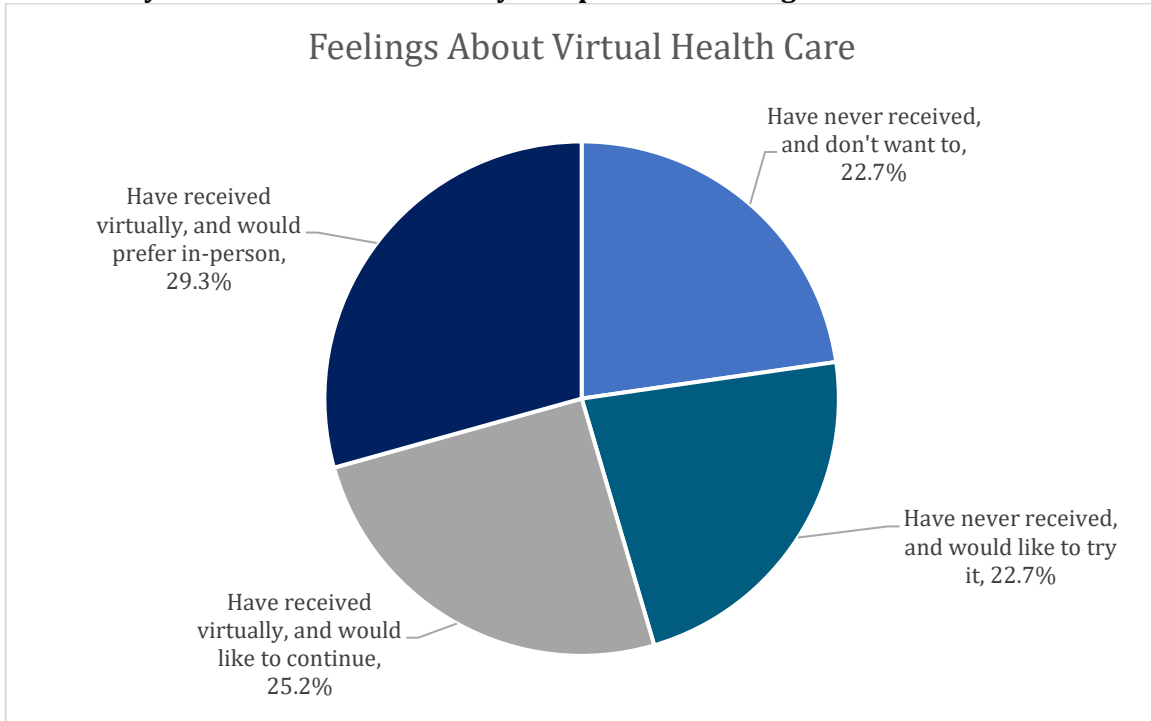
Community Needs Assessment Survey- Respondent Challenges in Getting Health Care



Other challenges in getting health care were: Gas prices, geographic distance, long wait times in waiting room, conflicts with doctors, provider turnover, lack of follow up from provider(s) after care is received, limited staffing among providers at Tribal health clinic, provider not being a specialist in areas relevant to health, lack of confidence in providers, medical bills are “unpaid and it ruins credit,” not enough time off from work, and concerns with confidentiality (specifically that personal health information is shared with outside of health center).



Community Needs Assessment Survey- Respondent Feelings About Virtual Health Care



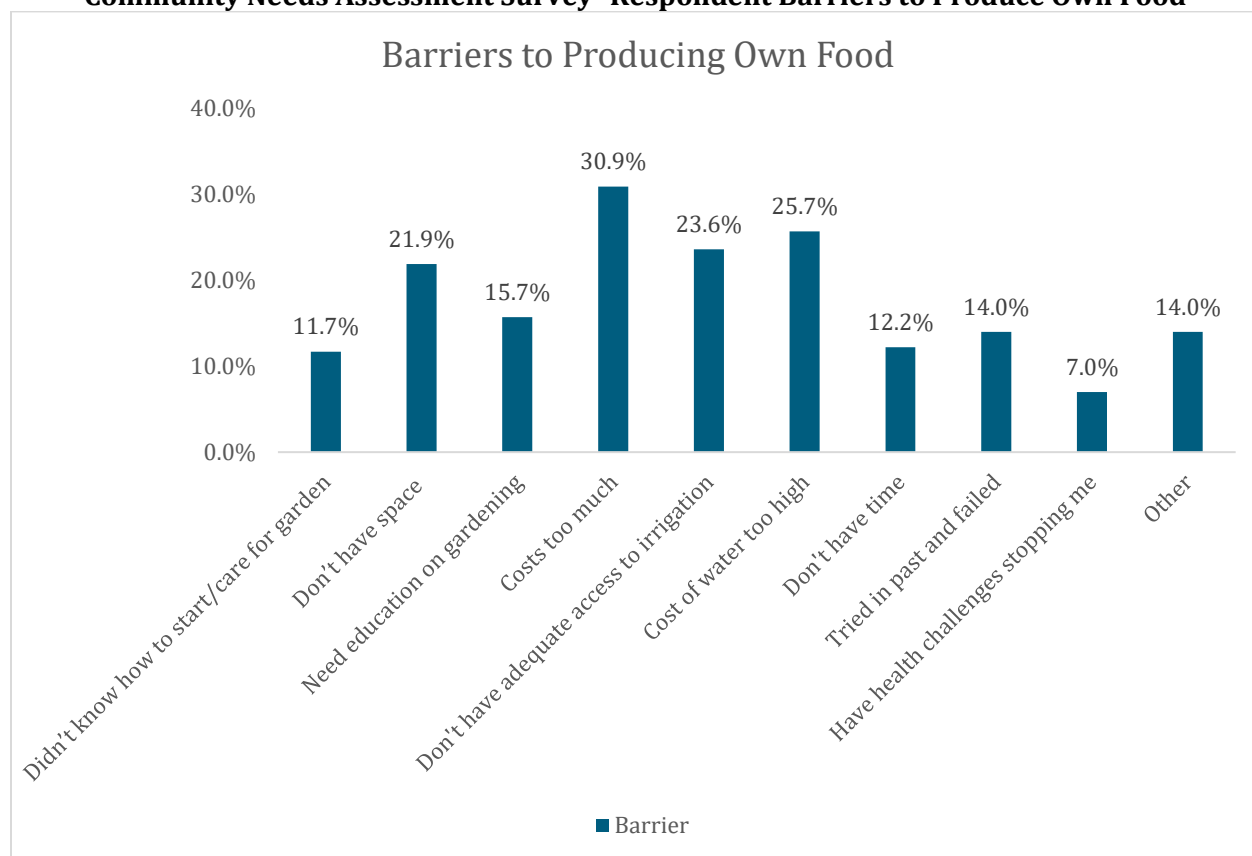
Trinity River Intake Protection, Irrigation, and Safe Drinking Water Projects should be prioritized based on results of the community needs assessment. Improved Irrigation Systems lower costs for individuals and communities by reducing leaks and minimizing inefficiencies in water irrigation management, utilization, and storage (Citation: <https://catalog.extension.oregonstate.edu/sites/catalog/files/project/pdf/em8783.pdf>).

Investments in the irrigation system and resulting water storage may have the long-term benefit of improved health of community members who can utilize water for growing non-processed foods. The Trinity River intake system is a crucial part of the Tribal irrigation system as it provides direct access to water to maintain system usability. Responses to a few questions in the assessment support the protection of clean water, waterways, and water resources.

While water and water resources were not directly assessed in the community needs assessment, Tribal Members frequently mentioned issues related to water, such as the need for “access to clean drinking water.” When asked about barriers to producing their own food, 23.6% of Tribal Members said they do not have adequate access to irrigation, and 25.7% said the cost of water is too high, which limits them from wanting to produce their own food. Additionally, in assessing community emergency preparedness, only about 50% of community members had access to a 3-day supply of water for each person (47.5%) or a 3-day supply of perishable foods for each person (52.1%). Improved irrigation may support additional access to water for home gardening and food sovereignty.



Community Needs Assessment Survey- Respondent Barriers to Produce Own Food



Other challenges to producing own food were: being at work, watching kids, limited motivation to produce own food, squirrels/deer/rabbits eating crop, grief, depression, people stealing from garden (food and tools), imposed, water restrictions, no land ("Only have space for 1-2 crops"), rocky ground, poor soil quality, wildfire smoke preventing outdoor activity or enough sun to grow crops, overwatering during rainy season, and not enough sunshine in cloudy part of the mountains. Proposed solutions were: providing raised gardening boxes, a Tribal greenhouse, financial assistance, and leadership organized unemployed people to take care of elders' gardens.

Community Needs Assessment Survey- Respondent Access to Emergency Provisions

Access to Emergency Provisions	Respondents (%)
3-day supply of water for each person	47.5%
3-day supply of perishable foods for each person	52.1%
7-day supply of medication/insulin for each person that needs it	51.5%
Generator/energy source to keep power on	44.9%
Flashlights and batteries	63.7%
Other (Describe)	Gas/fuel (home, car)

Qualitative data from the community needs assessment identified an additional need of the community to be "Trash Clean Up." The construction of a **New Transfer Station** will help address this need by providing additional resources for trash disposal.

Culture, Language, and Community Projects

The community needs assessment did not directly address the need for a **Cultural Museum**, but 78.9% of Tribal Members were interested in cultural classes and 69.6% in language classes, which are programming that could be offered within the Cultural Museum building during the evening hours or built into education provided at the K-12 school.

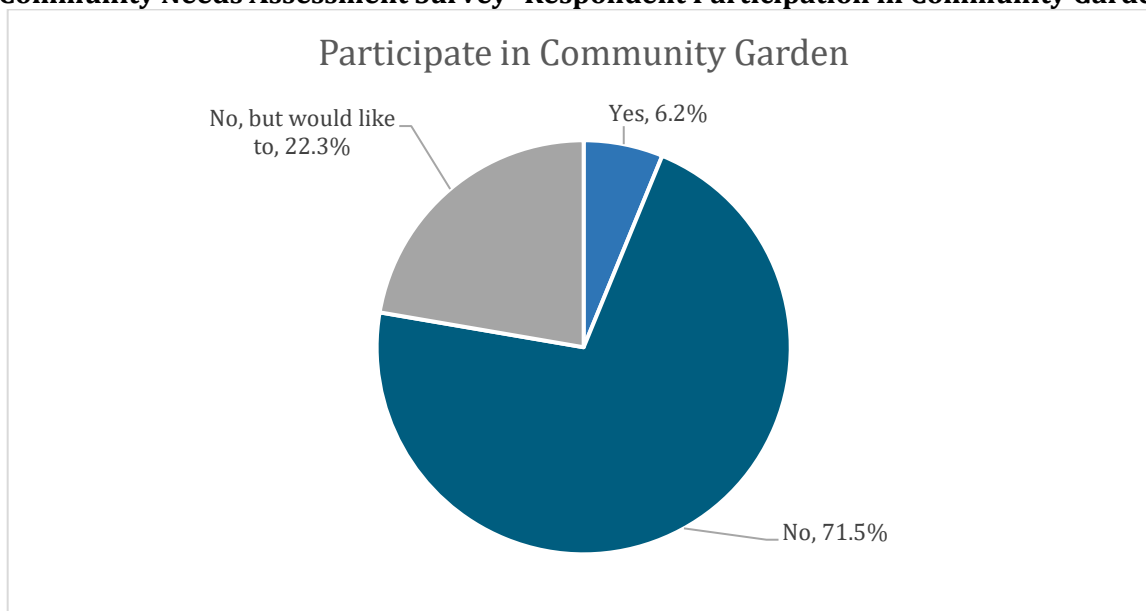
Community Needs Assessment Survey- Respondent Utilization of Additional Services

Utilization of Additional Services if Offered by Tribe or Tribal Health Center	Respondents (%)
Parenting classes	31.2%
Caregiver support services	39.2%
Language classes	69.6%
Cultural classes	78.9%
Food storage	69.2%
Other (Describe)	ASL classes, community emergency response/first aid, culinary classes, business classes, women's talking circle, substance use group other than Al-Anon, craftsman classes, spousal support classes, senior nutrition, financial management, shed for canned food, tai chi, grief group, virtual exercise group, vocational training, participation in Tribal government activities, exercise classes, housing classes, basic pet care classes, meditation, eyeglass services, Tribal annual harvest for cultural materials

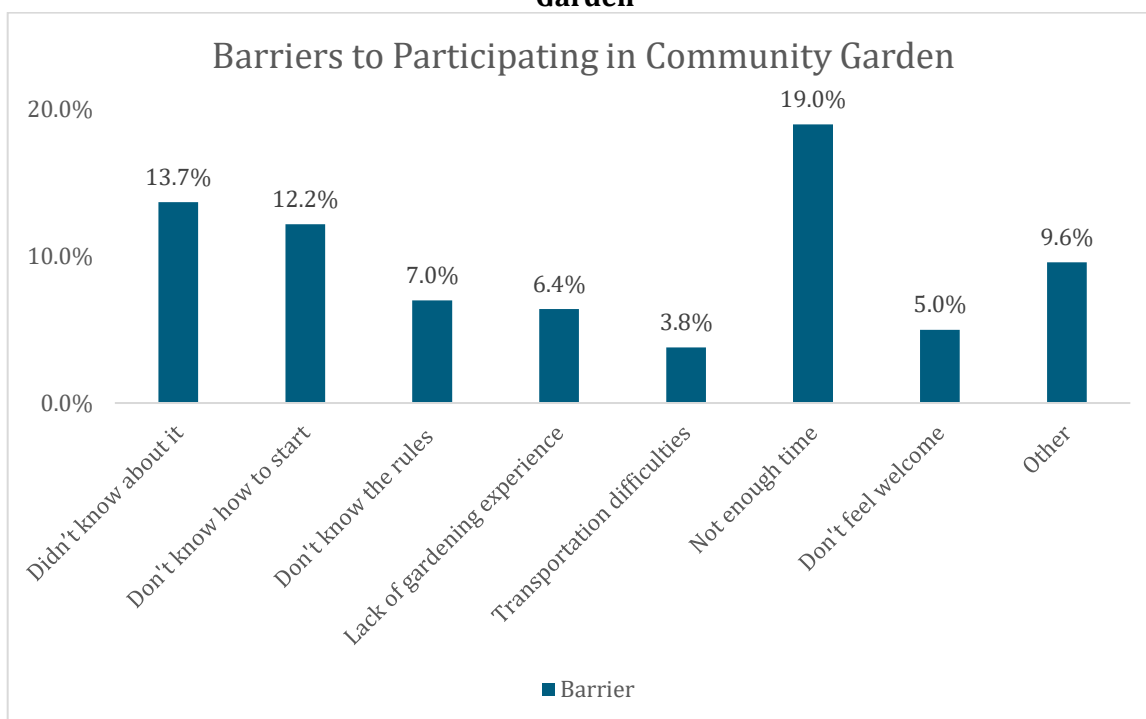
According to the community needs assessment, about 6% of individuals from Hoopa Valley participate in a **Community Garden** currently, and 22% would like to. However, many barriers were identified to participating in community gardening, such as not having enough time (19.0%), not knowing about the garden (13.7%), or not knowing how to start/the rules (19.2%).



Community Needs Assessment Survey- Respondent Participation in Community Garden



Community Needs Assessment Survey- Respondent Barriers to Participating in Community Garden

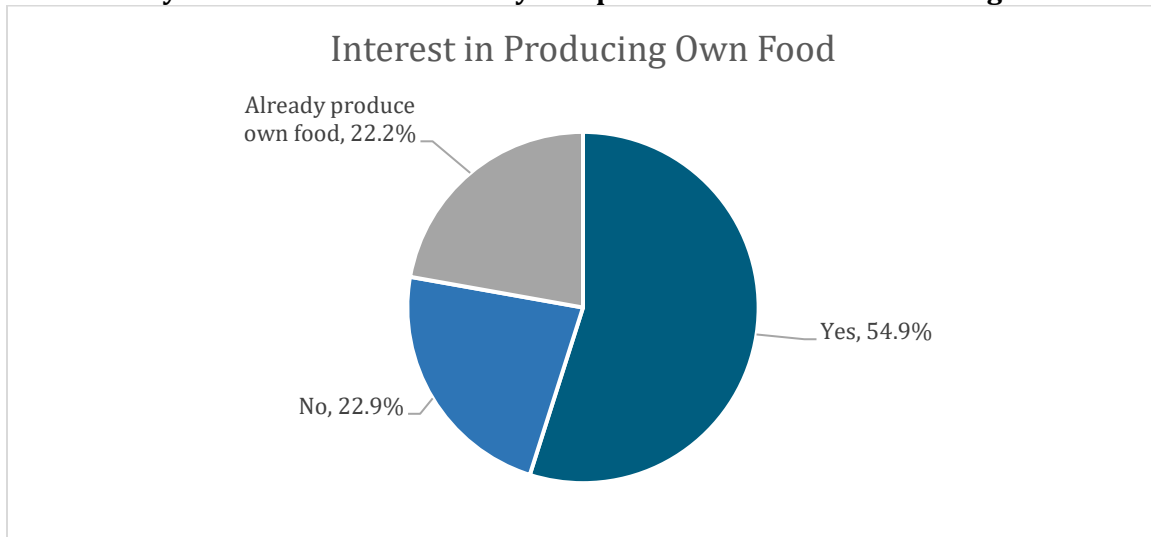


Other barriers to community gardening were that people have their own garden(s), lack childcare, are concerned about the cost of tools, are at work, and/or have a disability/immobility (arthritis, cannot work on ground). Several others reported not living on the Reservation or thinking the garden was inactive, "I don't think there's a lot of activity at the community garden."



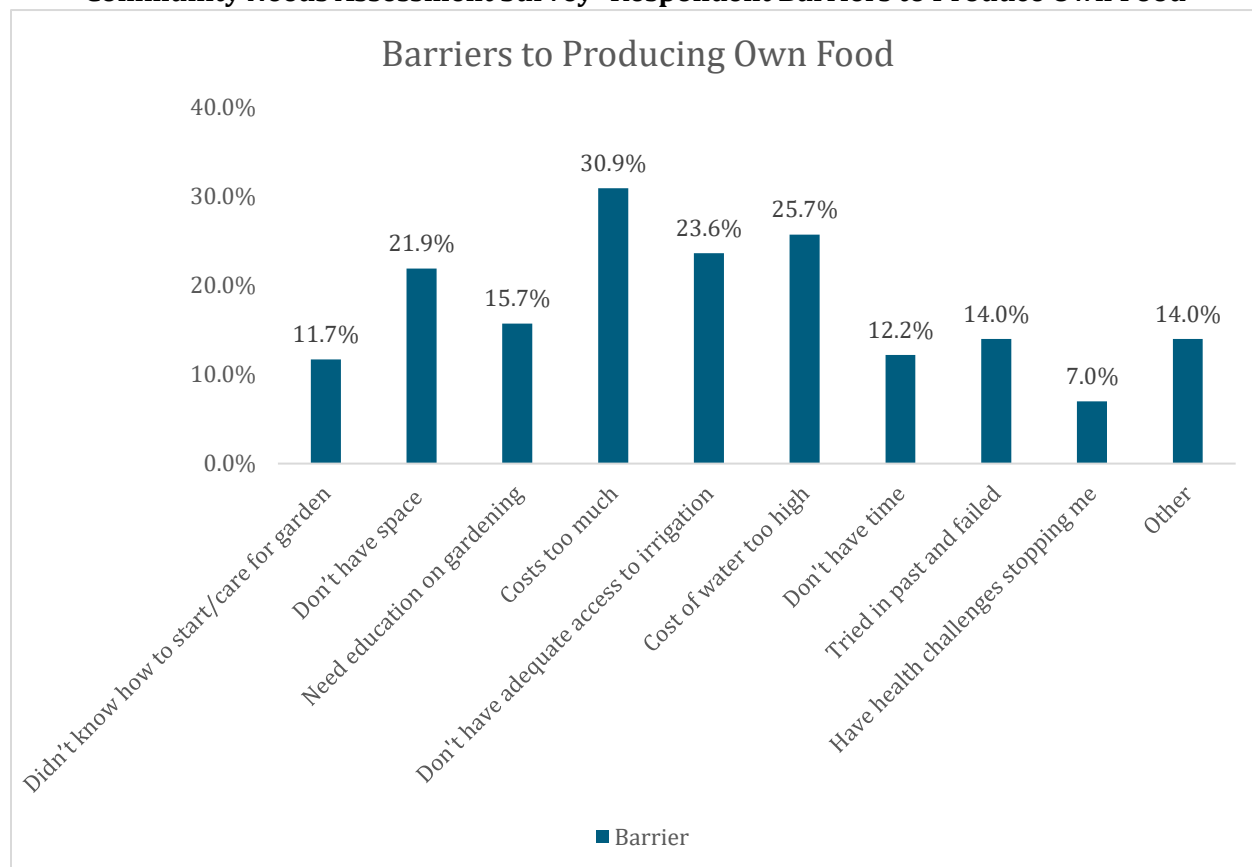
Nearly 80% of those who participated in the community needs assessment were interested in producing their own food, also known as **Food Sovereignty**, or are already producing their own food, but the most frequent barriers to home gardening were costs (garden, supplies, water) and limited access to water for irrigation. Others reported that they need education on gardening, do not have space for home gardening, or do not have time.

Community Needs Assessment Survey- Respondent Interest in Producing Own Food





Community Needs Assessment Survey- Respondent Barriers to Produce Own Food

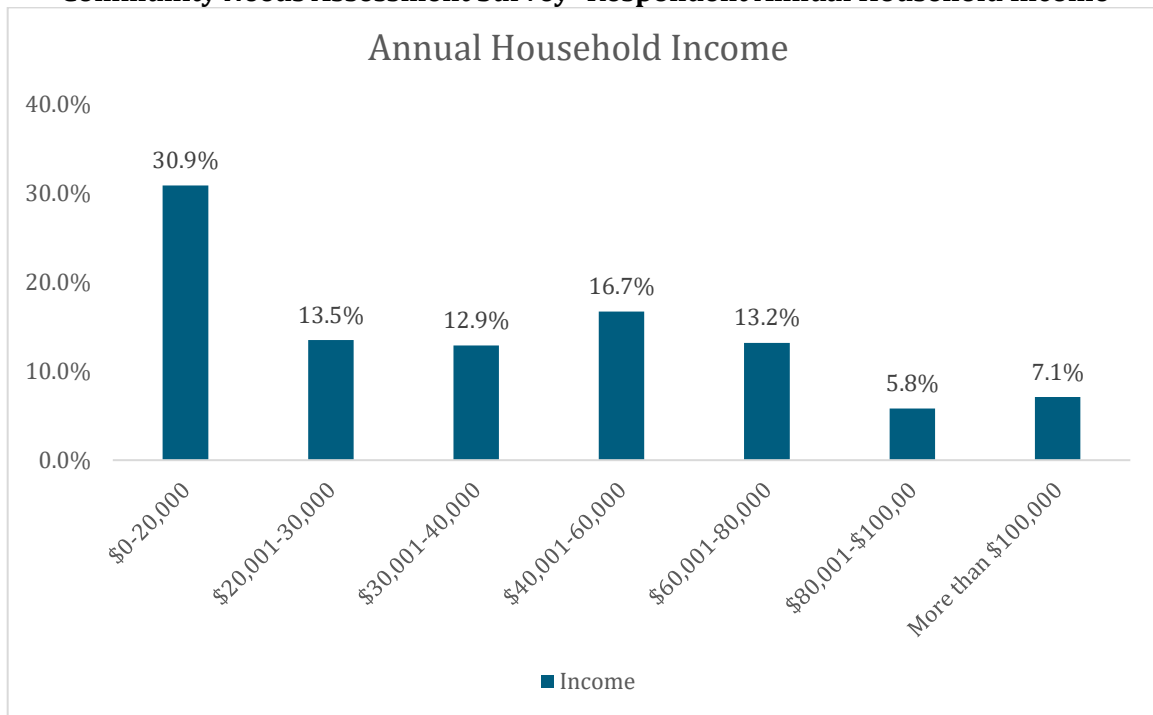


Other challenges to producing own food were: being at work, watching kids, limited motivation to produce own food, squirrels/deer/rabbits eating crop, grief, depression, people stealing from garden (food and tools), imposed, water restrictions, no land ("Only have space for 1-2 crops"), rocky ground, poor soil quality, wildfire smoke preventing outdoor activity or enough sun to grow crops, overwatering during rainy season, and not enough sunshine in cloudy part of the mountains. Proposed solutions were: providing raised gardening boxes, a Tribal greenhouse, financial assistance, and leadership organized unemployed people to take care of elders' gardens.

Demographic data from the community needs assessment indicate that almost 50% of annual household incomes fell below \$40,000, which suggests many individuals are food insecure. Approximately 35% of Tribal Members have sometimes, often, or always not had enough food to eat or money to buy food for their family, and the top health concerns of the community are diabetes, high blood pressure, weight, depression, anxiety, and eye health. Low-income levels are risk factors for homelessness, substance abuse, and poor health and mental health outcomes (Citation: <https://health.gov/healthypeople/priority-areas/social-determinants-health>).

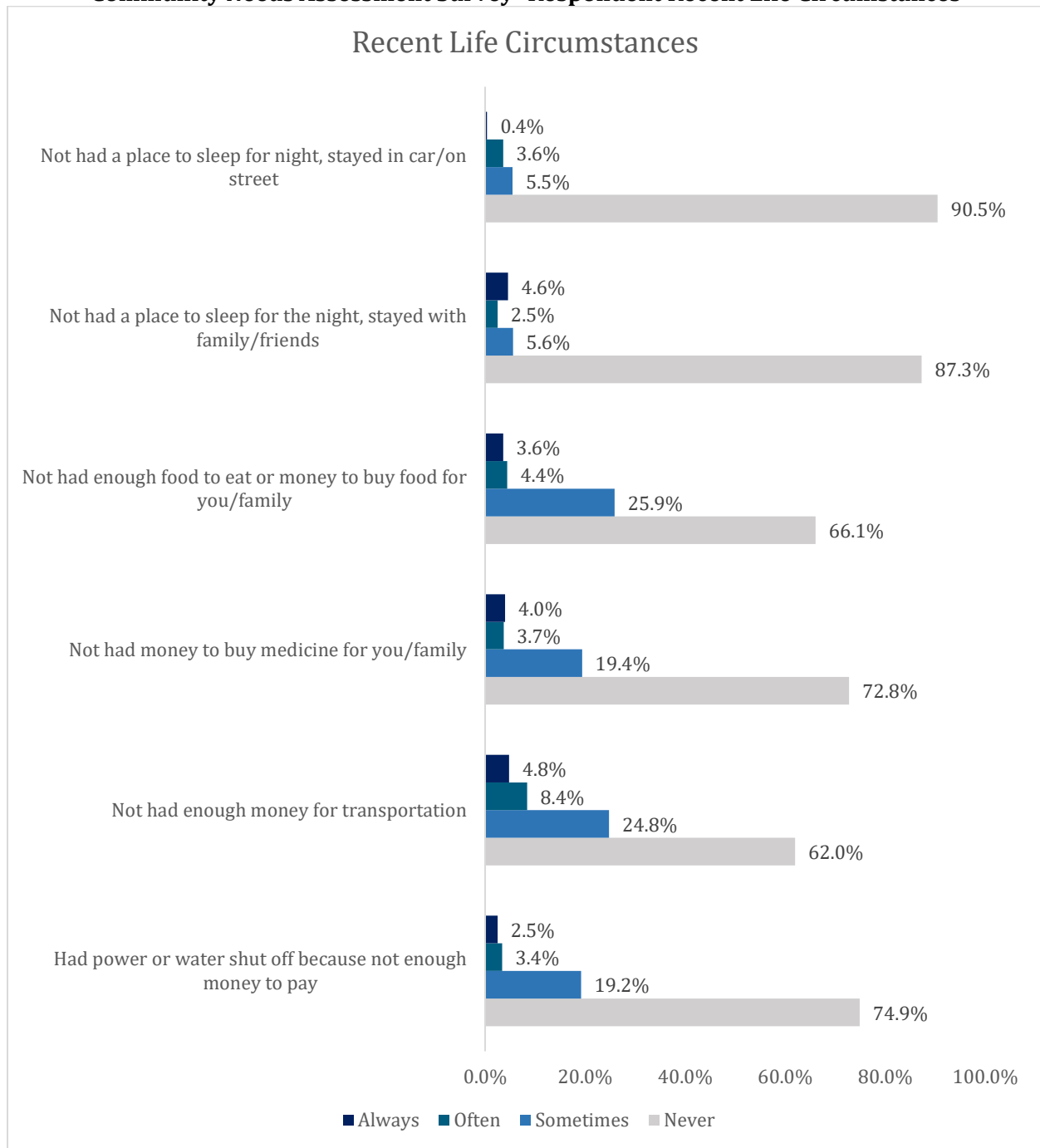


Community Needs Assessment Survey- Respondent Annual Household Income





Community Needs Assessment Survey- Respondent Recent Life Circumstances





Community Needs Assessment Survey- Respondent Health Care Concerns for Self & Household

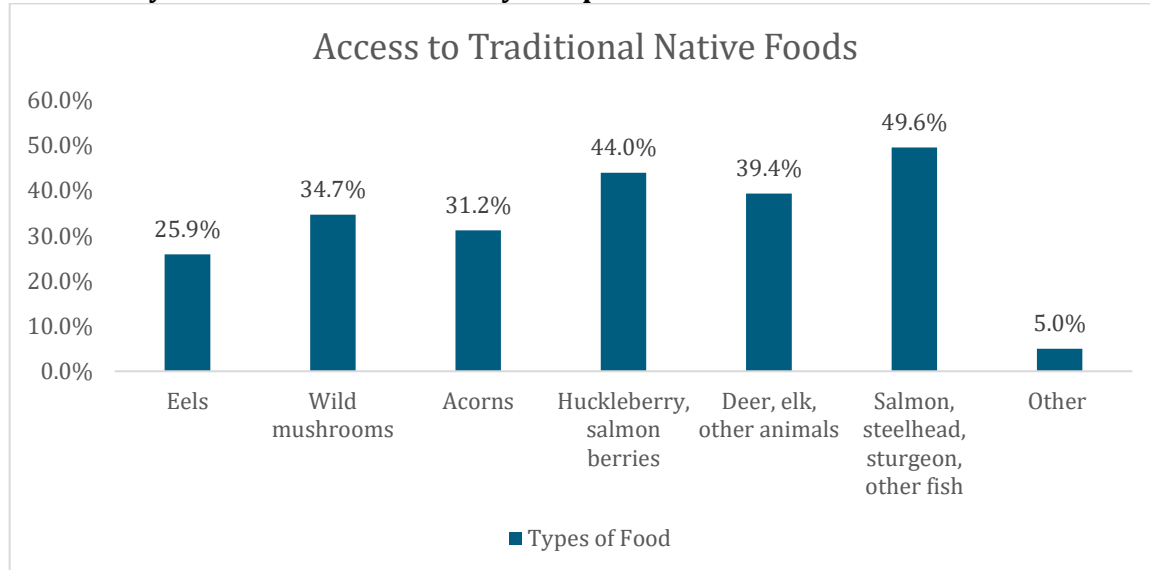
Health Care Concerns for Self or Household	Respondents (%)
Anger	9.6%
Anxiety	36.2%
Asthma	11.4%
Alcohol use	5.2%
Cancer	5.8%
Dental health	23.0%
Depression	25.9%
Diabetes	23.9%
Drug use	4.7%
Elder care/health	8.7%
Elder abuse	0.3%
Eye health	23.9%
Family conflict	5.5%
Grief	17.5%
Headaches	17.5%
Heart disease	7.9%
Hepatitis	1.2%
High blood pressure	26.5%
High cholesterol	14.3%
HIV/AIDS	0.3%
Sexual transmitted diseases	0.6%
Stroke	4.4%
Tobacco use	11.1%
Trauma/PTSD	16.0%
Vaccinations	5.0%
Violence	1.2%
Weight	26.8%
Other (Describe)	11.7% (ADHD, autoimmune disease, arthritis, dementia, COPD, endometriosis, hernia, bone spurs, allergies, PCOS, nerve and spine pain, low vitamin D, long COVID-19, violence, hormone issues, migraines, seizures, tremors, sleep apnea, stress, thyroid, bladder issues, and environmental concerns (smoke, traffic noise/speed, pollution))
None	14.3%

Community Gardening and **Food Sovereignty** efforts reduce negative physical and mental health outcomes from a lack of nutritious food and improve food security for Hoopa Valley Tribal Members. The Tribe is situated in an area considered a “food desert,” meaning it is difficult to access nutritious and nutrient-rich foods without traveling long distances and/or paying premium costs (Citation: <https://environmentalevidencejournal.biomedcentral.com/articles/10.1186/2047-2382-3-20>, <https://www.frontiersin.org/articles/10.3389/fsufs.2021.704750/full>). Based on the information

from the community needs assessment, Tribal initiatives in this area should be focused on education about community gardening and sovereignty, including how to garden; providing gardening supplies including tools and raised beds; and showcasing the health and time savings of gardening versus purchasing from convenience or grocery stores.

Food sovereignty programs should also focus on educating about and/or increasing access to traditional Native foods, as less than half of Tribal Members have access to them. This may be because they do not know the benefits of the foods or simply do not have a way to access them. For example, 49.6% of individuals who participated in the community needs assessment had access to fish, 44.0% to berries, 39.4% to animal-based meats, 34.7% to wild mushrooms, 31.2% to acorns, and 25.9% to eel.

Community Needs Assessment Survey- Respondent Access to Traditional Native Foods



Other types of traditional Native foods were herbs, teas, blackberries, fruits, and vegetables

The community needs assessment indicated a need for **Emergency Preparedness Project Planning**. Survey information showed that approximately 50% of community members did not have access to any of the following: (1) a 3-day supply of water for each person; (2) a 3-day supply of perishable foods for each person; or (3) 7-day supply of medication/insulin for each person that needs it.

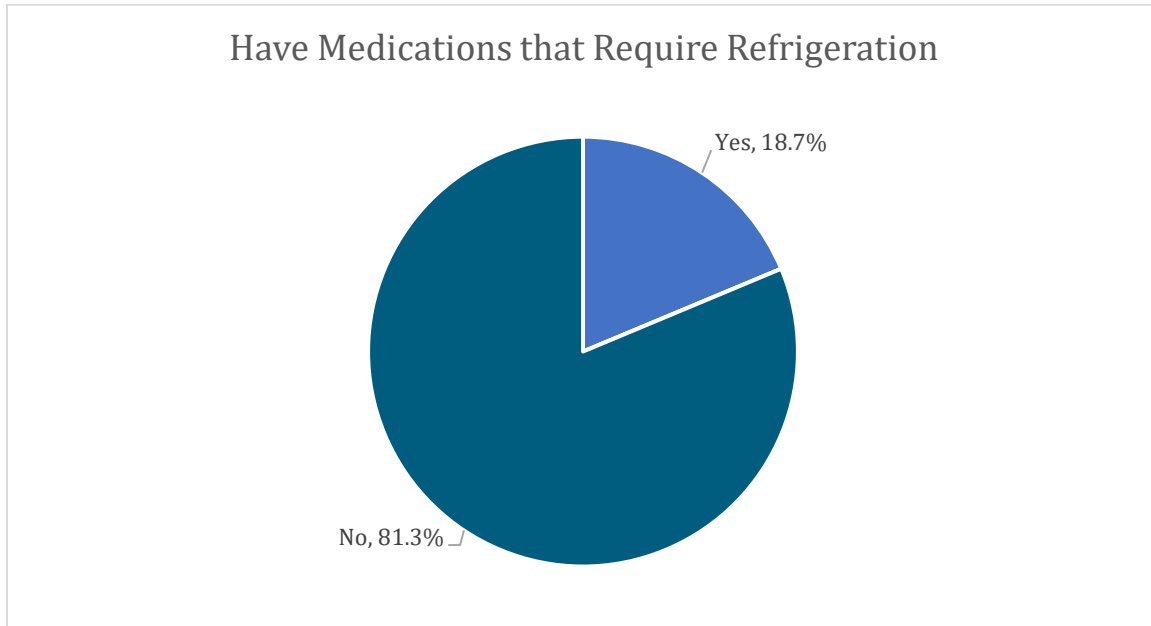
Community Needs Assessment Survey- Respondent Access to Emergency Provisions

Access to Emergency Provisions	Respondents (%)
3-day supply of water for each person	47.5%
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7-day supply of medication/insulin for each person that needs it	51.5%
Generator/energy source to keep power on	44.9%
Flashlights and batteries	63.7%
Other (Describe)	Gas/fuel (home, car)

About 55% of residents did not have access to a generator or energy source to keep the power on and 35% did not have access to flashlights or batteries; nearly 20% reported taking medication requiring refrigeration, but priorities for planning and programming involve public education about the importance of emergency preparedness and the distribution of needed supplies.

About one-fifth of community members had medications that require refrigeration, including birth control, diabetes medication, insulin, Humira, eye drops, children's antibiotics, Trulicity, probiotics, weekly shots for arthritis, and weight management medications (Full data is included in Chart 36).

Community Needs Assessment Survey- Respondent Medication Refrigeration Needs



When asked why they might not evacuate in the case of an emergency, write-in reasons provided included a lack of trust in public officials, no well-publicized evacuation plan, worries about personal safety and property, a desire to not leave pets behind, and a perception that “there’s nowhere safer than [our] own mountains.” Based on this information, emergency preparedness programming should focus on awareness of evacuation routes and the importance of emergency response, publicizing Tribal security efforts to protect resident homes during emergencies, and evacuation shelters that allow pets. The main reasons that would prevent a household from evacuating during an emergency were:

- Lack of trust in public officials
- No transportation
- Health problems
- Concerns about traffic jams
- Do not want to leave pets
- Concern about leaving property/looters
- Worried about personal safety
- Nowhere to go



- No money
- Mobility difficulties
- No well-publicized evacuation plan
- “There’s nowhere safer than [our] own mountains”



Appendices

Appendix A: Hoopa Valley Tribe Community Needs Assessment Survey



Hoopa Valley Tribal Member Community Needs Assessment

Please provide your Tribal roll number below if you would like to be entered into the survey raffle to win 1 of 3 prizes (\$500, \$750, or \$1,500). Your roll number will not be used for analysis purposes or in any other way. **Please note:** the selection of winners will be done through a randomized electronic process administered by Blue Stone Strategy Partners. The three selected roll numbers will be sent to enrollment for direct notification and administering of prizes to the three winners. **You may choose not to provide your roll number, but will not be eligible for the raffle.**

Tribal Roll Number: _____

Section 1: Housing Information

1. Which best describes the location of your residence?

- ☐ On Hoopa Valley Reservation; District (Please describe/or specify don't know): _____
- ☐ On a reservation or Tribal lands other than the Hoopa Valley Reservation
- ☐ Off-reservation

2. Do you currently have land available for new housing? (Please select all that apply)

- ☐ Yes, Tribal allotment
- ☐ Yes, Tribal assignment
- ☐ Yes, Tribal lease
- ☐ Yes, don't know what type
- ☐ Yes, Tribal fee land
- ☐ Yes, off-reservation
- ☐ No

3. Current living situation (Please only select one)

- ☐ Apartment
- ☐ Manufactured or mobile home
- ☐ Single-family detached home
- ☐ Townhome/condo
- ☐ With friends/family
- ☐ No place to live
- ☐ Other (Please

describe) _____

4. Do you pay monthly mortgage/home loan or rent payments?

- ☐ Yes, pay rent
- ☐ Yes, make mortgage/home loan payments
- ☐ No



Hoopa Valley Tribal Member Community Needs Assessment

5. Including utilities and rent or mortgage/loan payments, what is your current monthly housing payment? (If you only pay utilities, please select the last option and list the amount of your utility payment)

- ☐ \$0
- ☐ \$1 - \$200
- ☐ \$201 - \$400
- ☐ \$401 - \$600
- ☐ \$601 - \$800
- ☐ \$801 - \$1,000
- ☐ \$1,001 - \$1,400
- ☐ \$1,401 - \$1,800
- ☐ \$1,801 - \$2,200
- ☐ \$2,201 - \$2,400
- ☐ More than \$2,400
- ☐ I only pay for utilities (please specify the amount you pay for utilities) _____

6. Which best describes the composition of your household? (Please only select one)

- ☐ Couple with children at home
- ☐ Couple only (no children living at home)
- ☐ Single parent with children at home
- ☐ Single-person household
- ☐ Non-family household (one or more people living in a private dwelling who are not "related" persons)
- ☐ Multiple generations that include adults, children, and/or elders
- ☐ Multiple families
- ☐ Veteran living in a home
- ☐ Person with disabilities living in a home
- ☐ Other, please describe: _____

7. On a scale of 1 (not satisfied) to 5 (satisfied), how satisfied are you with your current housing situation?

- ☐ 1 Not satisfied ☐ 2 ☐ 3 ☐ 4 ☐ 5 Satisfied

8. Please rate the overall condition of your residence.

- ☐ Excellent (very few repairs or changes needed)
- ☐ Good (a few minor repairs are needed)
- ☐ Adequate (repairs needed to improve living conditions)
- ☐ Poor (major repairs needed to make it safe and livable)

9. Do you have homeowner/rental insurance?

- ☐ Yes
- ☐ No



Hoopa Valley Tribal Member Community Needs Assessment

10. How do you primarily heat your home or residence? *(Please only select one)*

- ☐ Furnace
- ☐ Boiler
- ☐ Heat pump
- ☐ Portable heater
- ☐ Solar power
- ☐ Wood-burning stove
- ☐ Fireplace
- ☐ Other (Please describe): _____

11. Which of the following changes would you like to make to your current residence? *(Select all that apply)*

- ☐ I do not need/want to make changes to my current residence
- ☐ Make repairs to worn-out or broken components
- ☐ Remodel current residence
- ☐ Add-on to current residence
- ☐ Modify to accommodate a disabled person
- ☐ Modify to accommodate an elderly person
- ☐ Energy efficiency upgrades (*Upgrade home insulation, install energy-efficient windows, upgrade to a smart thermostat, install solar panels, update old appliances, update to energy-efficient lighting, etc.*)
- ☐ Build a new home on the same lot
- ☐ New HVAC/AC
- ☐ Air conditioning
- ☐ Heating (*woodstove*)
- ☐ Generator
- ☐ Remove garbage from the area
- ☐ Remove old vehicles or abandoned trailers
- ☐ Other (please specify) _____

12. If you had an opportunity to change your housing situation, what would be your preferences? *(Select all that apply)*

- ☐ I do not need/want to change my housing situation
- ☐ Currently rent but would prefer to own
- ☐ Currently own a home but would prefer to rent
- ☐ Downsize to a smaller residence
- ☐ Move to a larger residence
- ☐ Move to a higher quality residence (*newer or more modern housing*)
- ☐ Move to a more affordable residence
- ☐ Move to a residence on the Hoopa Valley Reservation (*currently live off-reservation*)

13. In the future, what type of residence would you prefer to live in?

- ☐ I am satisfied with my current residence
- ☐ Single-family detached home (stick built)
- ☐ Single-family manufactured home
- ☐ Apartment



Hoopa Valley Tribal Member Community Needs Assessment

- ☐ Townhome/condo
- ☐ Other (please describe) _____

14. What size home will reasonably accommodate your current or future housing need?

- ☐ I am satisfied with my current residence
- ☐ 1 bedroom
- ☐ 2 bedroom
- ☐ 3 bedroom
- ☐ 4 bedroom
- ☐ 5 bedroom
- ☐ 6+ bedroom

15. In the future, how much would you be willing to pay each month for a new or upgraded home?

- ☐ Do not need a new or upgraded home
- ☐ \$601 - \$800
- ☐ \$801 - \$1,000
- ☐ \$1,001 - \$1,400
- ☐ \$1,401 - \$1,800
- ☐ \$1,801 - \$2,200
- ☐ \$2,201 - \$2,400
- ☐ \$2,401 - \$2,600
- ☐ \$2,601 - \$2,800
- ☐ \$2,801 - \$3,000
- ☐ Other (Please specify the amount you would be willing to pay) _____

16. Do you have any additional ideas or comments concerning your current housing situation that you would like to share?

Section 2: Your Health and Health Needs

17. How many times do you usually see a doctor, nurse, or other health provider each year? (Please only select one)

- ☐ Less than 1x/year
- ☐ 1x/year
- ☐ 2-4x/year
- ☐ 5x or more/year
- ☐ Unsure

18. How many times do you see a dentist or dental hygienist each year? (Please only select one)

- ☐ Less than 1x/year
- ☐ 1x/year
- ☐ 2-4x/year
- ☐ 5x or more/year
- ☐ Unsure

19. Would you describe yourself as having multiple health diagnoses that you are managing?

- ☐ No
- ☐ Yes
- ☐ Prefer not to answer
- ☐ Don't know



Hoopa Valley Tribal Member Community Needs Assessment

20. Which of the following are common health/mental health concerns for you and your household?

- | | | |
|--|--|---|
| <input type="checkbox"/> Anger | <input type="checkbox"/> Headaches | <input type="checkbox"/> None |
| <input type="checkbox"/> Anxiety | <input type="checkbox"/> Heart disease | <input type="checkbox"/> Other, describe: _____ |
| <input type="checkbox"/> Asthma | <input type="checkbox"/> Hepatitis | _____ |
| <input type="checkbox"/> Alcohol use | <input type="checkbox"/> High blood pressure | _____ |
| <input type="checkbox"/> Cancer | <input type="checkbox"/> High cholesterol | _____ |
| <input type="checkbox"/> Dental health | <input type="checkbox"/> HIV/AIDS | _____ |
| <input type="checkbox"/> Depression | <input type="checkbox"/> Sexually transmitted diseases | _____ |
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Stroke | _____ |
| <input type="checkbox"/> Drug use | <input type="checkbox"/> Tobacco use | _____ |
| <input type="checkbox"/> Elder care/health | <input type="checkbox"/> Trauma/PTSD | _____ |
| <input type="checkbox"/> Elder abuse | <input type="checkbox"/> Vaccinations | _____ |
| <input type="checkbox"/> Eye health | <input type="checkbox"/> Violence | _____ |
| <input type="checkbox"/> Family conflict | <input type="checkbox"/> Weight | _____ |
| <input type="checkbox"/> Grief | | _____ |

Section 3: Access to Health Care Services

21. Who is the current health care provider for you and your household? (Select all that apply)

- | | |
|--|--|
| <input type="checkbox"/> Community clinic/health center | <input type="checkbox"/> Naturopath/herbalist |
| <input type="checkbox"/> Tribal Health Center/Clinic | <input type="checkbox"/> Hospital/emergency room |
| <input type="checkbox"/> Medicine man/traditional healer | <input type="checkbox"/> None |
| <input type="checkbox"/> Doctor's office | <input type="checkbox"/> Other. Describe: _____ |
| <input type="checkbox"/> Urgent care | _____ |

22. Do you use the Tribal Health Clinic for medical care?

- ☐ Yes, (please indicate where): _____
- ☐ No

22a. If yes, how easy is it to get an appointment for medical care?

- ☐ Not easy ☐ Somewhat easy ☐ Very easy

22b. If yes, on a scale of 1 (not satisfied) to 5 (satisfied), how satisfied are you with the Tribal Health Center medical care?

- Not satisfied ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 Satisfied

22c. If no, why not? _____

23. Do you use the Tribal Health Clinic for dental care?

- ☐ Yes, (please indicate where): _____
- ☐ No

23a. If yes, how easy is it to get an appointment for dental care?



Hoopa Valley Tribal Member Community Needs Assessment

- ☐ Not easy ☐ Somewhat easy ☐ Very easy

23b. If yes, on a scale of 1 (not satisfied) to 5 (satisfied), how satisfied are you with the Tribal Health Center dental care?

Not satisfied ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 Satisfied

23c. If no, why not? _____

24. What is your main source of transportation to health care appointments?

(Select all that apply)

- ☐ Personal vehicle ☐ Ride share ☐ Local clinic transportation ☐ Bike ☐ Walking
☐ Hitch a ride ☐ No ride

25. What challenges do you and members of your household have in getting health care? (Select all that apply)

- ☐ Cost of prescriptions ☐ Lack of childcare ☐ Lack of time
☐ Cost of doctor visit ☐ Too much paperwork ☐ Cultural differences
☐ Finding a doctor or clinic ☐ Language barrier ☐ Discrimination/stigma
☐ Clinic or doctor's hours ☐ Don't have insurance ☐ None
☐ Lack of transportation ☐ Hard to get appointment ☐ Other, describe: _____

26. How many times have you been seen in the Emergency Room or Department in the past 12 months?

- ☐ Never ☐ 1-2 times ☐ 3-5 times ☐ More than 5 times

27. When did you last have health care insurance or coverage (Medicaid, Medicare)?

- ☐ This year ☐ last 1-2 years ☐ 3-5 years ☐ more than 5 years ago

Section 4: Use of Supportive Services

28. Do you access any of the following types of services? (Select all that apply)

- ☐ TANF ☐ Ryan White
☐ WIC ☐ Child Action
☐ General assistance ☐ Medicaid
☐ EBT/Food stamps (*Cal Fresh*) ☐ Other, please describe: _____
☐ Housing Voucher (*Federal government program*) _____
☐ HUD Mutual Help _____
☐ Elder free lunch program (*K'imaw* elders) _____
☐ Food boxes (TANF, Food for people, other) _____
☐ Food commodity program (Tribal) _____
☐ Food Bank _____
☐ Transportation _____



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29. In the past 12 months, how often have you experienced any of the following?

	Never	Sometimes	Often	Always
Not had a place to sleep for the night and stayed in a car, on the street, or camped?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not had a place to sleep for the night and stayed with friends or family?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not had enough food to eat or money to buy food for you or your family?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not had money to buy medicine for you or your family?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not had enough money for transportation or transportation-related insurance you needed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Had power (gas and electric) or water shut off because you didn't have enough money to pay the bills?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

30. Do you have any additional ideas or comments concerning your current health care needs that you would like to share?

Section 5: Communication

31. How do you typically access internet service at home? (Select all the apply)

- ☐ Wi-Fi or other internet, available in my home ☐ Cell phone only ☐ Neighbor
☐ Using my cell phone as a hot spot ☐ I do not have access to the internet in my home
☐ Public network ☐ ACORN cell phone ☐ Other (please describe): _____

32. How do you feel about receiving health care or other services by phone or video (virtually)? (Please only select one)

- ☐ I have never received services virtually and would like to try it
☐ I have never received services virtually and I don't want to
☐ I have received services virtually and would like to continue, even after Covid-19
☐ I have received services virtually and would prefer in-person, if possible

33. What is your household's main source of receiving information? (Please only select one)

- ☐ Newspaper



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- ☐ TV
- ☐ Radio
- ☐ Internet/Online News
- ☐ Friends/Family/Word of Mouth
- ☐ Social media
- ☐ Text message/Cell phone alert
- ☐ Church/Place of worship

☐ Other (Please describe): _____

Section 6: Other Needs

34. Do you have access to:

- | | | |
|--------------------------|------------------------------|-----------------------------|
| Gym or place to exercise | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Community garden | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Own garden | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Traditional Native foods | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

If yes, which of the following foods?:

- ☐ Salmon, steelhead, sturgeon, or other fish
- ☐ Eels
- ☐ Wild mushrooms
- ☐ Acorns
- ☐ Berries (huckleberry, salmon berries)
- ☐ Deer, elk, or other animals
- ☐ Other (please describe): _____

35. Please indicate if you participate in the community garden.

- ☐ Yes ☐ No ☐ No, but I would like to

If you would like to, please indicate any barriers you face in doing so:

- ☐ I didn't know we had a community garden
- ☐ I don't know how or am unsure of how to start participating
- ☐ I don't know the rules or restrictions on participating
- ☐ Lack of gardening knowledge or experience
- ☐ Access to transportation to the community garden
- ☐ I don't have enough time to participate
- ☐ I don't feel welcome to participate
- ☐ Other (please describe): _____



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36. Are you interested in producing your own food?

☐ No ☐ Yes ☐ I already produce my own food

If yes or already produce my own food, what are the barriers preventing you or that make it difficult for you to do so? Please select all that apply:

I don't know how to start my own garden or take care of it. ☐

I don't have the space or area to start my own garden. ☐

I need some education or information on gardening techniques, what to grow, and how to properly care for my garden (watering, weeding, fertilizer, when to plant and pick). ☐

It costs too much for gardening materials (seeds or seedlings, soil or fertilizer, gardening tools, etc.). ☐

I don't have adequate access to irrigation water. ☐

The cost of water is too high for extra use in a garden. ☐
Would education on water conservation methods help? ☐ Yes ☐ No

I don't have enough time or have other priorities that prevent me from producing my own food. ☐

I have tried and was unable to grow my own garden in the past. ☐

Please describe prior issues you have had:

I have health, physical, or other challenges that stop me from producing my own food, and need assistance to grow and maintain a garden. ☐

Please describe the type of challenge you face and the type of assistance that would help:

Other barrier (please describe): _____ ☐

37. Do you take any medication that must be stored in a refrigerator?

☐ Yes

☐ No

If yes, please describe: _____



Hoopa Valley Tribal Member Community Needs Assessment

38. If offered or expanded by the Tribal Health Clinic or Tribe, would you use the following services:

- Parenting classes ☐ Yes ☐ No
Caregiver support services ☐ Yes ☐ No
Language classes ☐ Yes ☐ No
Cultural classes ☐ Yes ☐ No
Food storage ☐ Yes ☐ No

Other services not currently provided (please describe): _____

39. Which of the following child care services would you like to have offered in our community? (Select all that apply)

- ☐ Additional child care facilities
☐ Private home daycare
☐ Parent/child drop-in program
☐ Child drop-off center for occasional use
☐ Nursery school
☐ Trained caregiver to hire for occasional use
☐ Toy Library
☐ Playgroup
☐ Other (Please describe): _____

40. In the event of an emergency, does your household have:

- 3-day supply of water for each person ☐ Yes ☐ No
3-day supply of non-perishable foods (protein bars, nuts) for each person ☐ Yes ☐ No
7-day supply of medication/insulin for each person that needs it ☐ Yes ☐ No
Generator/energy source to keep power on ☐ Yes ☐ No
Flashlights and batteries ☐ Yes ☐ No
Other, please describe below: ☐ Yes ☐ N/A

41. What would be the main reason that prevents your household from evacuating if asked to do so in an emergency (Please only select one):

- ☐ Lack of transportation
☐ Lack of trust in public officials
☐ Concern about leaving property
☐ Concern about personal safety
☐ Concern about leaving pets
☐ Concern about traffic jams
☐ Inconvenient/expensive
☐ Health problems
☐ Nowhere to go
☐ Other (Please describe): _____



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Section 7: Personal Characteristics

42. How old are you?

- ☐ 18-24
- ☐ 25-39
- ☐ 40-54
- ☐ 55-69
- ☐ 70-84
- ☐ 85 or older

43. What is your highest level of education? (Please only select one)

- ☐ Elementary or middle school
- ☐ Some high school
- ☐ High school or GED
- ☐ Some college
- ☐ Vocational certificate
- ☐ Associates Degree
- ☐ Bachelor's Degree
- ☐ Master's Degree or higher
- ☐ Decline to state

44. What is your current employment status?

- ☐ Employed by the Hoopa Valley Tribe and/or its enterprises
- ☐ Employed by business or organization not affiliated with the Hoopa Valley Tribe
- ☐ Self-employed
- ☐ Homemaker
- ☐ Retired
- ☐ On Disability
- ☐ Student
- ☐ Unemployed

45. Please select your yearly household income, including social security or other assistance.

- ☐ Less than \$20,000
- ☐ \$20,001-30,000
- ☐ \$30,001-40,000
- ☐ \$40,001-60,000
- ☐ \$60,001-80,000
- ☐ \$80,001-100,000
- ☐ More than \$100,000

46. Are you a veteran?

- ☐ Yes
- ☐ No

47. Do you have special needs? (Developmental or other disability)

- ☐ Yes (If you feel comfortable sharing please describe below):
- ☐ No



Hoopa Valley Tribal Member Community Needs Assessment

48. Do you have any additional comments that you would like to share?



Appendix B: Hoopa Valley Tribe Community Needs Assessment Announcement



Hoopa Valley Tribal Member Community Needs Assessment Announcement

Dear Hoopa Valley Tribal Members,

Blue Stone Strategy Partners has been retained to conduct a **Hoopa Valley Tribal Member Community Needs Assessment** via a survey. Information that will be gathered through the community needs assessment survey includes important areas related to: housing needs, healthcare needs and services, supportive and community services, food security, and other critical information about our member's needs. The survey will be anonymous with the only individual personal identifying information requested being your roll number for the survey raffle (*Further details about the raffle are included below*). Blue Stone will only review the results from the survey questions and will not include the roll numbers in the survey assessment report or use this information in any other way.

The community needs assessment will assist our Tribe by:

- Informing our Tribal leadership of current and future community needs, and gaps in services provided to make informed decisions to support our community
- Support our directors in developing programs and services to meet our communities needs
- Guide future decision-making through quality data and analysis
- Support communication to our Tribal membership
- Support our Tribe with necessary information to increase the specificity and competitiveness of our grant applications for funding available to the Hoopa Valley Tribe

Community needs assessment raffle: For your participation in the community needs assessment, we are offering three prizes in the amount of \$500, \$750, and \$1,500. The prizes will be awarded through a raffle drawing tied to your roll number, if you choose to include it with your survey. The selection of winners will be done through a randomized electronic process administered by Blue Stone Strategy Partners. The three selected roll numbers will be sent to enrollment for direct notification and administering of prizes to the three winners.

Please find below important information about our community needs assessment survey

Community Needs Assessment Overview: The community needs assessment is broken into seven sections with 48 questions on the paper version and 59 for the electronic. The electronic version has the same questions, but due to formatting restrictions some questions needed to be separated for proper response collection. The survey should take approximately 30 minutes to complete.

Who is eligible to take the survey: The community needs assessment is open to all adult enrolled Hoopa Valley Tribal members 18 years and older.



How to take the community needs assessment: The community needs assessment may be completed through the following two methods:

1. Filling out a paper survey that will be mailed out
 - a. Paper copies may also be requested by contacting the Planning Director Jaclyn Robinson at 707-296-4577 or by Email: planningdirector.hoopatribe@gmail.com
2. Filling out the survey electronically through Blue Stone's secure survey monkey account, accessible via the following link: <https://www.surveymonkey.com/r/8HQC2Y6h>
 - a. The link may also be accessed through the Tribal website and Facebook page.

Submitting your survey: The survey may be submitted in the following ways:

- The paper version may be:
 1. Dropped off at the Hoopa Valley Tribal Office either to reception or drop box
 2. Mailed back to:
Attention: Planning Department
11860 State Highway 96
PO Box 1348
Hoopa, CA 95546
 3. Scanned and emailed to: teamgoodmedicine@gmail.com
 - Please use the subject: Community Needs Assessment
- The electronic version responses will be directly sent to Blue Stone's secure survey monkey account upon completion and submission of your survey.

Survey submission deadlines: The survey will be open until Friday, October 21st. *Please note the following details regarding additional submission deadline information:*

- Surveys received after Friday, October 21st will not be accepted.
- Paper surveys submitted by mail must be mailed back by Tuesday, October 18th, or risk not being accepted if received after Friday, October 21st.
- Paper surveys being directly dropped off must be submitted by Friday, October 21st before 4:00 PM Pacific Time
- Paper surveys scanned and emailed must be sent by Friday, October 21st before 5:00 PM Pacific Time
- Electronic surveys must be submitted by Friday, October 21st before 5:00 PM Pacific Time


Questions about the survey: If you have any questions about the survey you can contact either:

1. Walter Gray, COO at: 530-625-4211 ext. 108
2. Jaclyn Robinson, Planning Director at: 707-296-4577

Thank you for your time and we appreciate your participation in the Hoopa Valley Tribal Member Community Needs Assessment.



Appendix C: Hoopa Valley Tribe Community Needs Assessment Flyer



Hoopa Valley Tribal Member Community Needs Assessment Information & Deadline Extension Announcement

Submission Deadline Extension:

The deadline to submit the survey has been extended to Friday, October 28th by 5:00pm Pacific Time. The extended submission deadline is due to technical difficulties with the online survey link not working properly. The online survey link has been fixed and updated. Thank you for understanding.

Purpose: Gather important information from our Tribal members directly tied to critical areas of need within our community. The information collected will provide us with a database of key information we can use to:


- Inform our Tribal leadership of current and future community needs to support decision-making
- Support our directors in developing programs and services to meet our community's needs
- Support communication to our Tribal membership
- Provide our Tribe with the necessary background about our community for grant applications and other opportunities where data is a critical evaluation factor or requirement

Prizes: We are offering three prizes through a raffle in the amount of \$500, \$750, and \$1,500 for taking and completing the needs assessment survey. The selection of winners will be done through a randomized electronic process of all participants that have provide their roll number.

Questions: If you have any questions, you can contact either:

1. Walter Gray, COO at: 530-625-4211 ext. 108
2. Jaclyn Robinson, Planning Director at: 707-296-4577

How to take the community needs assessment

1. Filling out a paper survey
 - a. Paper copies have been mailed out and may also be requested by contacting the Planning Director Jaclyn Robinson at 707-296-4577 or by Email: planningdirector.hoopatribe@gmail.com
2. Electronically via the following link or QR Code:
<https://www.surveymonkey.com/r/8HQC2Y6>


Submitting your survey

- The paper version may be:
 1. Dropped off at the Hoopa Valley Tribal Office to reception or drop box
 2. Mailed back to:
Attention: Planning Department
11860 State Highway 96
PO Box 1348
Hoopa, CA 95546
 3. Scanned and emailed to:
teamgoodmedicine@gmail.com
 - Please use the subject: Community Needs Assessment
- The electronic version responses will be automatically recorded upon completion and submission of your survey.



Appendix D: Programmatic Planning Overview by Selected Community Needs Assessment Data

Economic Development Projects

Project	Selected CNA Data Supporting Project
Travel Center <i>Casino, Gas Station, C-Store, Tire Shop, Quick Oil Change</i>	<ul style="list-style-type: none"> The development of a new travel center supports workforce development; Although 70% of individuals who participated in the Community Needs Assessment are of working age, only 36% have a college degree or higher, and entry-level positions such as those within a travel center support job creation and resulting economic growth.
New Restaurant	<ul style="list-style-type: none"> Write-in comments from the Community Needs Assessment stated an additional need of the community was “restaurants and healthy food in stores, not just through a community garden.” The development of a new restaurant also supports the workforce; Although 70% of individuals who participated in the Community Needs Assessment are of working age, only 36% have a college degree or higher, and entry-level positions such as those within a restaurant support job creation and resulting economic growth.
Section 17 Business Development	<ul style="list-style-type: none"> CNA data did not directly address this type of project.
Develop 8a Business Development <i>To set up a new business structure to increase revenue for Tribal Entities</i>	<ul style="list-style-type: none"> CNA data did not directly address this type of project.
Buy Land with Original Territory <i>To Develop C-Store/Casino</i>	<ul style="list-style-type: none"> CNA data did not directly address this type of project.

<i>M.A.T Clinic</i>	<ul style="list-style-type: none"> • The Community Needs Assessment provides support for this project. Demographic data indicate that almost 50% of annual household incomes fell below \$40,000, which suggests many individuals are housing insecure. Low-income levels and housing insecurity are risk factors for homelessness, substance abuse, and poor mental health outcomes. • The Community Needs Assessment also indicates that two of the most frequent health concerns among Tribal Members are anxiety and depression, with 36.2% of the community being concerned with anxiety and 25.9% with depression. • Early prevention and intervention programs should prevent negative behavioral health outcomes before they occur. However, those with anxiety and depression are at heightened risk of drug use and addiction and need more extensive mental health support and Medication Assisted Treatment facilities. • For those who have already developed negative outcomes, interventions should be established to improve mental well-being and prevent future substance use.
<i>Export Timber/Lumber Products</i> <i>Export plan for Timber and Lumber Products</i>	<ul style="list-style-type: none"> • Qualitative data from the Community Needs Assessment indicated there was a community need for assistance with “tree clean-up.” This suggests there may be timber and lumber products available via routine maintenance rather than only harvesting from forest areas.
<i>Residential Real Estate Development</i> <i>To acquire Residential Real Estate off Tribal Lands</i>	<ul style="list-style-type: none"> • CNA data did not directly address this type of project.

Housing Projects

Project	Selected CNA Data Supporting Project
<i>Natinixwe Elder Village</i> <i>To provide low-income rental housing to individuals 55 and older on the Hoopa Valley</i>	<ul style="list-style-type: none"> • The Community Needs Assessment surveyed individuals aged 18 and above on housing needs, and 30% of the participants in the assessment were aged 55 and older. Among participants who completed the Community Needs Assessment, the most frequently reported household income level was less than \$20,000, and almost 50% of annual household incomes fell below \$40,000.



Indian Reservation	<ul style="list-style-type: none">• Low-income rental housing for individuals aged 55 and older would provide support to elders in the community who cannot afford a higher monthly rent or mortgage payment but have additional housing needs.• Over a quarter of individuals who participated in the needs assessment (27.4%) would like a single-family home if they changed to a new housing location (rather than an apartment or townhome). A total of 23.0% of Tribal Members would like a 3-bedroom home to accommodate future needs, while 10.8% would like 4 bedrooms, and 25.7% would like 5 bedrooms. These data can aid in the development of floor plans for current and future housing expansions.
Elder Housing Rehabilitation <i>To provide a home rehabilitation grant to individual Hoopa Tribal Elders over the age of 62, and who are private homeowners in need of Rehabilitation</i>	<ul style="list-style-type: none">• The Community Needs Assessment surveyed individuals aged 18 and above on housing needs, and 30% of the participants in the assessment were aged 55 and older.• Approximately 85% of individuals who took the Community Needs Assessment are satisfied with the condition of their housing, but there are 15% who report the condition to be “adequate” or “poor.”• A total of 50.6% of community members did not want to change their current living situation/location, but there were problems with Tribal Members’ current housing, which were reported to be the: need to make repairs (25.3%), need to remodel (28.9%), need to modify home for disabled person (9.6%), and need to modify home to meet needs of an elderly person (4.8%).• One quote from the needs assessment was “My home is 22 years old. Time to start remodeling or buy new.”• This project will support the needed repairs among elder Tribal Members while supporting the desire to stay in the same location/living situation.
Student Housing <i>To provide affordable housing for Hoopa Tribal Member students attending post-secondary college or trade school in Humboldt County</i>	<ul style="list-style-type: none">• Qualitative data from the Community Needs Assessment highlighted the importance of “supporting off-reservation” members through funding, access to services, and other supports, such as housing.• According to the Community Needs Assessment, a total of 65% of Hoopa Valley Tribal Members do not have a college degree, although 30% of that group started college but did not finish. Support for Tribal students attending college may reduce this gap in educational achievement.• The Community Needs Assessment provides support for this project in other ways as well. Demographic data indicate that almost 50% of annual household incomes fell below \$40,000, which suggests paying for one household’s housing may be a challenge let alone for college student housing. Given the health disparities that affect those from lower income backgrounds or levels of education, the investment in student housing to improve educational outcomes will positively impact the community’s health and mental health.• Findings from the Community Needs Assessment indicate that over 40% of community members are managing multiple health diagnoses, and the most frequent health concerns are diabetes, weight, high blood pressure, anxiety, depression, and eye health. Student achievement in post-secondary education reduces negative chronic, infectious, and mental health outcomes.



<i>Transitional Housing (Off Reservation)</i> <i>To provide shelter to Hoopa Tribal Members experiencing Homelessness, substance abuse, and mental health</i>	<ul style="list-style-type: none">• Qualitative data from the Community Needs Assessment highlighted the importance of "supporting off-reservation" members through funding, access to services, and other supports, such as housing.• The Community Needs Assessment provides support for this project in other ways as well. Demographic data indicate that almost 50% of annual household incomes fell below \$40,000, which suggests many individuals are housing insecure. Low-income levels and housing insecurity are risk factors for homelessness, substance abuse, and poor mental health outcomes. Funding for transitional housing supports those who are experiencing these conditions.• The Community Needs Assessment indicates that two of the most frequent health concerns are anxiety and depression, with 36.2% of the community being concerned with anxiety and 25.9% with depression. Approximately 35% of Tribal Members have sometimes, often, or always not had enough food to eat or money to buy food for their family, and 25% have had power or water shut off due to an inability to pay. Transitional housing will provide supportive services for individuals who are homeless, use substances, or experience poor mental health due to depression, anxiety, or finance-related recent life stressors
<i>Macintosh Property</i> <i>To provide laundry facilities to the Hoopa Community, a Safe Post Office location, and Housing</i>	<ul style="list-style-type: none">• The Community Needs Assessment supports the development of laundry facilities. Specific write-in comments about community needs included "laundry services for the community."• Additionally, demographic data indicate that almost 50% of annual household incomes fell below \$40,000. In-home appliances such as washers and dryers are not frequently owned by individuals from low-income households, which is why this facility will be important to many families in the community.• A laundry facility would also support the Tribal workforce; although 70% of individuals who participated in the Community Needs Assessment are of working age, only 36% have a college degree or higher, and entry-level positions such as those within a laundry facility will support job creation for these individuals.
<i>Down Payment Assistance Fund</i> <i>To provide one-time home-buyer down-payment assistance to any Tribal Member (over 18 and qualifies for mortgage)</i>	<ul style="list-style-type: none">• The Community Needs Assessment surveyed individuals aged 18 and above on housing needs, and the most frequently reported household income level was less than \$20,000, with 50% of annual household incomes below \$40,000.• Down payment assistance would provide support to individuals who would like to own their own home, including the 8.4% of individuals who participated in the needs assessment who said they would like to own their own home.• Over a quarter of individuals who participated in the needs assessment (27.4%) would like a single-family home if they changed to a new housing location (rather than an apartment or townhome). A total of 23.0% of Tribal Members would like a 3-bedroom home to accommodate future needs, while 10.8% would like 4 bedrooms, and 25.7% would like 5 bedrooms. Down payment assistance funding would help Tribal Members purchase homes that meet their family's current and future needs.
<i>Campbell Field (12 Housing Units)</i> <i>To provide Homeownership</i>	<ul style="list-style-type: none">• The Community Needs Assessment surveyed individuals aged 18 and above on housing needs, and the most frequently reported household income level was less than \$20,000, with 50% of annual household incomes below \$40,000.



<p><i>Opportunities to Hoopa Tribal Membership</i></p>	<ul style="list-style-type: none"> • Down payment assistance would provide support to individuals who would like to own their own home, including the 8.4% of individuals who participated in the needs assessment who said they would like to own their own home. • Over a quarter of individuals who participated in the needs assessment (27.4%) would like a single-family home if they changed to a new housing location (rather than an apartment or townhome). A total of 23.0% of Tribal Members would like a 3-bedroom home to accommodate future needs, while 10.8% would like 4 bedrooms, and 25.7% would like 5 bedrooms. These data can aid in the development of floor plans for current and future housing expansions.
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Public Health and Wellness Projects

Project	Selected CNA Data Supporting Project
<p><i>K'ima:w Medical Clinic Expansion</i> <i>To expand pharmacy, exam, and patient rooms and add a conference room</i></p>	<ul style="list-style-type: none"> • Prevention and early intervention are important for reducing the exacerbation of health conditions later in life. For those who already have chronic mental health concerns, frequent engagement in high-quality health care improves the quality of life and health prognosis. • Approximately 30% of individuals that participated in the Community Needs Assessment were aged 55 years or older, and the most frequent health concerns among Tribal Members were diabetes, weight, high blood pressure, anxiety, depression, and eye care. Additionally, 40% of participants reported managing two or more health conditions at the time of the assessment, but only 35% had gone to the doctor in the past year, and 3.4% were unsure of the last time they saw a doctor. This showcases a gap in health care provision that would be reduced by expanding clinic services. • Several barriers to the existing Tribal Health Clinic were identified in the Community Needs Assessment and should be addressed as part of the expansion efforts. Concerns were about confidentiality, wait times for referrals, difficulty in obtaining an appointment, transportation barriers, appointments being canceled by the clinic without explanation, the quality of care received, and the professionalism of the staff. • The clinic expansion will help address some of these challenges, and other concerns could be addressed through staff development across newly hired and existing staff, and marketing campaigns to educate patients about the clinic and its practices.

<p><i>K'ima:w Assisted Care Facility</i> <i>Assisted Living help for those that are unable to care for their own basic needs</i></p>	<ul style="list-style-type: none"> • For older adults who may have complex health needs due to pre-existing health conditions and aging-related health needs, regular oversight by healthcare professionals can help extend the timing and quality of end-of-life. • Approximately 30% of individuals that participated in the Community Needs Assessment were aged 55 years or older, and the most frequent health concerns among Tribal Members were diabetes, weight, high blood pressure, anxiety, depression, and eye care. Additionally, 40% of participants reported managing two or more health conditions at the time of the assessment. This highlights the need for assisted living for those with age-related and complex health needs. • Although 50% of individuals who completed the Community Needs Assessment did not want to change their housing situation, about 4% wanted to downsize and 5% needed to make housing repairs/improvements to care for an aging person. Since assisted living may be something that elders do not want but instead need, we expect these data to under-estimate the need for assisted support and downsizing to assisted care facilities.
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Workforce & Entrepreneur Development Projects

Project	Selected CNA Data Supporting Project
<p><i>K-12 Educational Programming Facility</i> <i>Creation of a K-12 facility</i></p>	<ul style="list-style-type: none"> • According to the Community Needs Assessment, 70% of individuals who participated in the Assessment are of working age, but only 36% have a college degree or higher. Educational disparities are responsible for poorer financial outcomes, physical health, and mental health. • Additional needs identified by the community include "safe spaces for youth," and the creation of a K-12 facility will support both short- and long-term goals for the community in safe spaces, education, and health. • Findings from the Community Needs Assessment indicate that over 40% of community members are managing multiple health diagnoses, and the most frequent health concerns are diabetes, weight, high blood pressure, anxiety, depression, and eye health. Student achievement in education reduces negative chronic, infectious, and mental health outcomes. This further supports the establishment of more K-12 facilities for Tribal Members. • Although the focus of the site is for K-12 education, expanded support at a centralized location like the school should be considered to benefit parents and families in the community. Based on the Community Needs Assessment, other considerations for the facility include hosting parenting classes in the evenings, which 31.2% of community members would like to see offered by the Tribe. The site may also meet



	Member's needs for expanded child-based programming, including childcare, preschool, and language classes for children.
Workforce Training Program (TERO)	<ul style="list-style-type: none"> According to the Community Needs Assessment, 70% of individuals who participated in the Assessment are of working age, but only 36% have a college degree or higher. Entry-level positions and skilled trades certifications support job creation and stimulate the economy. However, the workforce needs to be trained to sustain those businesses. For those who are not attending college, workforce development programs will support the skilled labor needed to staff new Tribal enterprises and promote employment among Tribal Members.
CDFI Recertification	<ul style="list-style-type: none"> The CDFI being recertified would support housing funds and assistance would provide support to individuals who would like to own their own home but lack access to financing options, including the 8.4% of individuals who participated in the needs assessment who said they would like to own their own home. Over a quarter of individuals who participated in the needs assessment (27.4%) would like a single-family home if they changed to a new housing location (rather than an apartment or townhome). A total of 23.0% of Tribal Members would like a 3-bedroom home to accommodate future needs, while 10.8% would like 4 bedrooms, and 25.7% would like 5 bedrooms. The CDFI would provide access to funding would help Tribal Members purchase homes that meet their family's current and future needs.
Restructure of Hoopa Development Fund	<ul style="list-style-type: none"> CNA data did not directly address this type of project.
Tribal College Feasibility Study <i>Assess the potential creation of a Tribal College</i>	<ul style="list-style-type: none"> According to the Community Needs Assessment, a total of 65% of Hoopa Valley Tribal Members do not have a college degree, yet 30% of that group started college but did not finish. Support for Tribal Member students attending a Tribally run college may reduce this gap in educational achievement. The Community Needs Assessment provides support for a Tribal College Feasibility Study in other ways as well. Demographic data indicate that almost 50% of annual Tribal Member household incomes fell below \$40,000, which may be an artifact of the low education levels leading to skill-limited jobs or unemployment by Tribal Members. Findings from the Community Needs Assessment indicate that over 40% of community members are managing multiple health diagnoses, and the most frequent health concerns are diabetes, weight, high blood pressure, anxiety, depression, and eye health. Student achievement in post-secondary education reduces negative chronic, infectious, and mental health outcomes. Given the health disparities that affect those from lower income backgrounds or levels of education, the

	investment in student housing to improve educational outcomes will positively impact the community's health and mental health.
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Infrastructure Projects

Project	Selected CNA Data Supporting Project
<i>Upgrade Roads Plan</i>	<ul style="list-style-type: none"> CNA data did not directly address this type of project.
<i>Microgrid Development</i>	<ul style="list-style-type: none"> Responses to a Community Needs Assessment Survey indicated support for microgrid development. Within the comments section of questions about individuals' current housing situation, many Tribal Members said an improvement to their residence would be "solar and alternative power options." When asked about needed housing improvements, 14.1% of Tribal Members said they need better energy efficiency. About 55% of community members do not have access to a generator or power source to keep the power on in the event of an emergency, but approximately one-fifth have medications requiring refrigeration, which requires a power source. Write-in comments in the Community Needs Assessment indicated a need for "access to solar energy or power."
<i>Backhaul Capacity Expansion Expansion (Microwave) to support Tribal Broadband Connectivity</i>	<ul style="list-style-type: none"> Results of the Community Needs Assessment show that the internet/online, TV, and social media are primary sources of information for community households, and 61.5% connect to the internet via WIFI, 30.0% use their cell phone only, and 18.7% use their cell phone as a hotspot. Approximately 10% do not have internet access via WIFI, cell phone, or broadband. This data reveals a gap in digital access that could be alleviated by the Backhaul Capacity Expansion to support Tribal Broadband connectivity. Tribal broadband connectivity for Members would also alleviate the cost of a cell phone or additional WIFI by community members from low-income households; Community Needs Assessment demographic data indicate that almost 50% of annual household incomes fell below \$40,000, which suggests paying WIFI

	<p>may be a financial challenge.</p> <ul style="list-style-type: none"> Improved broadband access could support the improvement in healthcare access among Tribal Members. Improved access was prioritized within the Community Needs Assessment, with many asking for “better medical and dental care.” Although the Tribal Health Center is currently available for medical or dental services, 9.3% have transportation barriers to receiving care, 8.5% have a lack of childcare, 17.2% had a lack of time, and 28.3% reported it was hard to get an appointment. Virtual health care (telehealth) through Tribal Broadband connectivity may address these barriers, especially because about 50% of community members would like to start or continue virtual health care services.
<p>Development of more Building space Develop more building space for Government and/or Business</p>	<ul style="list-style-type: none"> CNA data did not directly address this type of project.
<p>Utility Cybersecurity</p>	<ul style="list-style-type: none"> CNA data did not directly address this type of project.
<p>Domestic Systems Radio Telemetry Upgrades</p>	<ul style="list-style-type: none"> CNA data did not directly address this type of project.
<p>Hydrant & Valve System Maintenance</p>	<ul style="list-style-type: none"> CNA data did not directly address this type of project.
<p>Trinity River Intake (Protection)</p>	<ul style="list-style-type: none"> In qualitative data from the Community Needs Assessment, Tribal Members mentioned issues related to water, such as the need for “access to clean drinking water.” The intake system is a crucial part of the Tribes irrigation system as it provided direct access to water to maintain system usability. When asked about barriers to producing their own food, 23.6% of Tribal Members said they do not have adequate access to irrigation, and 25.7% said the cost of water is too high, which limits them from wanting to produce their own food. The continued operation of the intake systems is critical to ensuring continued water flow to the system in order to address these issues and continually provide water to the community. In assessing community emergency preparedness, only about 50% of community members had access to a 3-day supply of water for each person. However, it is difficult to support members in times of emergency if



	<p>there are issues in bringing water into the system. Ensuring water intake is operating support the need for greater access to safe drinking water in ensuring emergency readiness and address the 50% of members who do not maintain a supply of fresh drinking water.</p>
<i>Trojan UV-Algae (Safe Drinking Water)</i>	<ul style="list-style-type: none"> • In qualitative data from the Community Needs Assessment, Tribal Members mentioned issues related to water, such as the need for “access to clean drinking water.” • When asked about barriers to producing their own food, 23.6% of Tribal Members said they do not have adequate access to irrigation, and 25.7% said the cost of water is too high, which limits them from wanting to produce their own food. • In assessing community emergency preparedness, only about 50% of community members had access to a 3-day supply of water for each person (47.5%) or a 3-day supply of perishable foods for each person (52.1%). However, it is difficult to promote water storage when it is unsafe to drink. Greater access to safe drinking water would be the first step in emergency readiness awareness campaigns for storing drinking water as emergency provisions.
<i>Irrigation System Upgrades/Maintenance</i>	<ul style="list-style-type: none"> • While irrigation needs were not directly assessed in the Community Needs Assessment, Tribal Members frequently mentioned issues related to water, such as the need for “access to clean drinking water.” When asked about barriers to producing their own food, 23.6% of Tribal Members said they do not have adequate access to irrigation, and 25.7% said the cost of water is too high, which limits them from wanting to produce their own food. • Investments made in irrigation system upgrades may have the long-term benefit of improved health of community members who can utilize water for growing non-processed foods. Investments in irrigation systems reduce costs associated with water by reducing leaks or inefficiencies in the irrigation system that result in high cost(s) to users. • Lastly, in assessing community emergency preparedness, only about 50% of community members had access to a 3-day supply of water for each person (47.5%) or a 3-day supply of perishable foods for each person (52.1%). Improved irrigation may support additional access to water for home gardening.
<i>Septage Treatment Facility</i>	<ul style="list-style-type: none"> • CNA data did not directly address this type of project.
<i>New Transfer Station (Trash Dump) Construct New Transfer Station</i>	<ul style="list-style-type: none"> • Qualitative data from the Community Needs Assessment identified an additional need of the community to be “Trash Clean Up.” The construction of a new transfer station will help address this need by providing additional resources for trash disposal.



Culture, Language, & Community Projects

Project	Selected CNA Data Supporting Project
<i>Develop Cultural Museum New Cultural Museum</i>	<ul style="list-style-type: none"> The Community Needs Assessment did not directly address this need, but 78.9% of Tribal Members were interested in cultural classes and 69.6% in language classes, which are programming that could be offered within the Cultural Museum building during the evening hours.
<i>Buy Back Ceremonial Grounds Ceremonial Land Acquisition Planning</i>	<ul style="list-style-type: none"> CNA data did not directly address this type of project.
<i>Community Garden and Food Sovereignty</i>	<ul style="list-style-type: none"> According to the Community Needs Assessment, about 6% of individuals in the Hoopa Valley community participate in a community garden currently, and 22% would like to. However, many barriers were identified to participating in community gardening, such as not having enough time (19.0%), not knowing about the garden (13.7%), or not knowing how to start/the rules (19.2%). Nearly 80% of those who participated in the Community Needs Assessment were interested in producing their own food or are already producing their own food, but the most frequent barrier to home gardening were costs (garden, supplies, water) and limited access to water for irrigation. Others reported that they need education on gardening, do not have space for home gardening, or do not have time. Demographic data from the community needs assessment indicate that almost 50% of annual household incomes fell below \$40,000, which suggests many individuals are food insecure. Approximately 35% of Tribal Members have sometimes, often, or always not had enough food to eat or money to buy food for their family, and the top health concerns of the community are diabetes, high blood pressure, weight, depression, anxiety, and eye health. Low-income levels and food insecurity are risk factors for homelessness, substance abuse, and poor health and mental health outcomes. Community gardening and food sovereignty efforts will reduce negative physical and mental health outcomes and improve food security. Tribal initiatives in this area should be focused on education about community gardening and sovereignty, including how to garden; providing gardening supplies including tools and raised beds; and showcasing the health and time savings of gardening versus purchasing from convenience or grocery stores. Food sovereignty programs should also focus on educating about and/or increasing access to traditional Native foods, as less than half of Tribal Members have access to them. This may be because they do not



	<p>know the benefits of the foods or simply do not have a way to access them. For example, 49.6% of individuals who participated in the Community Needs Assessment had access to fish, 44.0% to berries, 39.4% to animal-based meats, 34.7% to wild mushrooms, 31.2% to acorns, and 25.9% to eel.</p>
<i>Emergency Preparedness</i>	<ul style="list-style-type: none">• The Community Needs Assessment indicated that approximately 50% of community members did not have access to any of the following: (1) a 3-day supply of water for each person; (2) a 3-day supply of perishable foods for each person; or (3) 7-day supply of medication/insulin for each person that needs it.• About 55% of residents did not have access to a generator or energy source to keep the power on and 35% did not have access to flashlights or batteries. Priorities for planning and programming involve public education about the importance of emergency preparedness and the distribution of needed supplies.• When asked why they might not evacuate in the case of an emergency, write-in reasons provided included a lack of trust in public officials, no well-publicized evacuation plan, worries about personal safety and property, a desire to not leave pets behind, and a perception that “there’s nowhere safer than [our] own mountains.”• Emergency preparedness programming should focus on awareness of evacuation routes and the importance of emergency response, publicizing Tribal security efforts to protect resident homes during emergencies, and evacuation shelters that allow pets.