



2020-2021 COMMUNITY HEALTH CONTRACT (CHC) Q3 GRANT IMPACT REPORT

Organization Name: D'Vine Path, Inc
Program Title: Life I Can Healthy Lifestyle
Person submitting the report: Lenila Batali Executive Director

Ages: List the percentage and total number served of your program participants' ages who received services during this reporting time frame:

	Percentage served	Total Number Served
Children (infants to 12)		
Young Adults (13-17)	0	0
Adults (18-60)	100	25
Seniors (60+)	0	0
Unknown		

Gender: List the percentage and total number served of your program participants' gender identification who received services during this reporting time frame:

	Percentage served	Total Number Served
Female	45	12
Male	55	13
Non-binary		
Unknown		

Income: List the percentage and total number served of your program participants' income limit category of those who received services during this reporting timeframe:

	Percentage Served	Total Number Served
Extremely Low-Income (ceiling of \$32,100)	100	
Very Low (50% Income (ceiling of \$53,500)		
Low (80%) Income (ceiling of \$85,600)		

	Percentage Served	Total Number Served
Higher than listed limits		
Unknown		

How many District residents directly benefited (participant/client) from this program in this reporting quarter? 300

GOALS & OBJECTIVES

Please provide the Goal 1 statement from your application. Discuss the actions within each objective and provide your outcome data accordingly.

Goal 1: Reduce social isolation and increase social interaction in young adults with autism, Aspergers and other intellectual disabilities in Fallbrook, Bonsall and Rainbow.

Objectives:#1 D'Vine Path will provide two 3 hour dances to 50 people with Autism, Asperger's and other intellectual disabilities These events serves its goals by helping participants reduce social isolation, anxieties and depression.

Outcomes: By April 1, 2022, 95% of our participants have attended two of the three dances. All of our participants have stated they love dancing and have made so many new friends.

Please provide the Goal 2 statement from your application. Discuss the actions within each objective and provide your outcome data accordingly.

Goal #2: Teach adults with Autism, Aspergers and other disabilities to live a healthy lifestyle.

Objective#1: D'Vine Path will provide 12 monthly educational hands on workshops on the importance of staying physically active.

Outcomes: By April 2022, more than 75% of the participants are able to do 50% of the exercises and Identify 3 core strengthening moves.

PARTICIPANT SUCCESS STORY

Participant Success Story:

We have many success stories of our participants, but one of the stand outs of this year is one of our fitness expert, Patty. She is a yoga therapist and teaches our students the fine art of relaxation and mindfulness. Every Monday morning she arrives with a smile on her sweet face and excited to share her calming personality with students. Last month she confided in me about her anxieties from covid and from the world's strife. But Patty says when she arrives at the program she is overwhelmed by the love and gratefulness of our students she feels more hopeful that the world is still a place full of joy and happiness. The students have learned so much from her yoga practices and have shown marked improvement in their yoga stretches.

The funds we are awarded for this Life I Can Healthy Life program makes it possible for our students to collaborate with the community in healthy practices that translate to happier and more joyful lives. Thank you for your generosity!

Participant Success Story:



ACKNOWLEDGEMENT

Please describe how the Fallbrook Regional Health District's Community Health Contract - Grant investment toward this program was acknowledged during this reporting timeframe.

We acknowledged the Fallbrook Health District's Community Health Contract-Grant investment in the SD Union Tribune article "in the February 2022 issue.

<https://www.sandiegouniontribune.com/north-county-community-news/story/2022-02-24/dvine-program-expands-into-battali-ranch-film-site-for-inn-love>

Please upload one example of how the District's support for this program was publicly acknowledged.



BUDGET

Please upload a copy of the program budget you submitted with the application. Fill in the Q3 column demonstrating the current utilization of grant funds.



Please sign your form:

A handwritten signature in black ink that reads "Leticia".