



Indiana
Department
of
Health

**ENHANCING COMMUNITY
ENGAGEMENT IN NEEDS
ASSESSMENTS:
A COLLABORATIVE EXPLORATION**

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10/22/2024

OUR MISSION:

To promote, protect, and improve the health and safety of all Hoosiers.

OUR VISION:

Every Hoosier reaches optimal health regardless of where they live, learn, work, or play.




Session Objectives



Facilitate a collaborative conversation among attendees to explore and understand the best approaches for achieving effective community engagement for the Title V needs assessment.



The goal is to collectively identify challenges, share experiences, and brainstorm strategies to enhance community involvement.



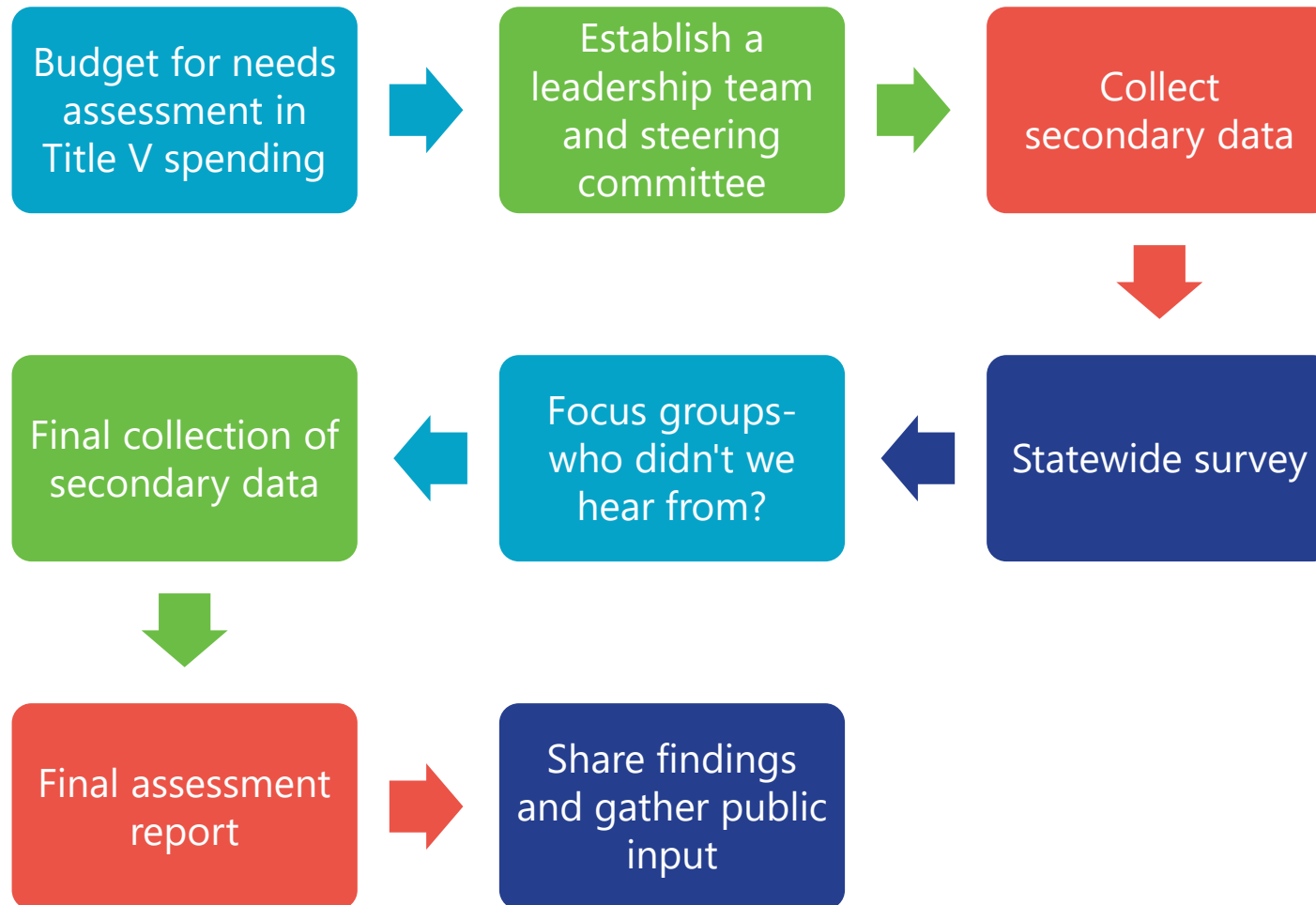
Indiana 2025 Title V Needs Assessment



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Indiana Title V Needs Assessment

Needs Assessment Structure



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Indiana Title V Needs Assessment

Title V Needs Assessment – Timeline (Draft)

	2023												2024									
	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O
Task 1: Meetings & Communication (Ongoing)																						
Launch Meeting, Leadership Team, & Steering Committee			*			*	*	*				*		*		*			*	*		
Task 2: Secondary Data Documentation & Analysis (Apr – Jun 2023)																						
2.1-2.4: Identification, Collection, Analysis, Reporting																						
Task 3: Statewide Survey (Apr 2023 – Mar 2024)																						
3.1: Survey Design & Planning																						
3.2: Survey Pilot – August 2023 <i>(with survey changes made in Sept 2023)</i>																						
3.3: Survey Administration & Dissemination																						
3.4: Survey Analysis & Reporting																						
Task 4: Focus Groups (Apr – Aug 2024)																						
4.1: Focus Group Design																						
4.2: Focus Group Questions																						
4.3: Focus Group Partners, Coordination, & Participant Recruitment																						
4.4: Focus Group Facilitation																						
4.5: Focus Group Transcription, Analysis, & Reporting																						
Task 5: Secondary Data Updated Analysis (Jun – Aug 2024)																						
5.1-5.4: Identification, Collection, Analysis, Reporting																						
Task 6: Fact Sheets (Sept – Oct 2024)																						
Fact Sheets																						
Task 7: Final Needs Assessment Reporting (Oct 2024)																						
Final Compiled 2025 Needs Assessment Report																						

***Leadership Team:** March 2023 (Launch Meeting), June 2023, September 2023 (earlier), February 2024, April 2024 (mid), June 2024, September 2024 (later)

***Steering Committee:** July 2023, September 2023 (later), February (end)/March (start) 2024, October 2024



Partners and Providers

- Prioritize Partnerships
 - Non-traditional
 - Grantees
 - Medicaid
 - Home-visiting
- Asked partners
 - Share data, community needs assessments, host focus groups and share survey
 - Utilize state agencies to share the survey
 - State Library, BMV, Workforce Development Center
- Labor of Love Summit 2024
 - Created a short survey for provider feedback about the needs of the communities they serve



IDOH Title V Survey Response Tracker



Total Respondents: 9138

English Survey Respondents: 8855

Spanish Survey Respondents: 283

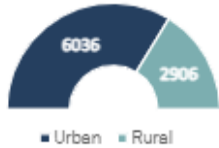
Location of Respondents

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Respondents by IHA Hospital District		
Central	2679	32%
Northeastern	856	10%
Eastern	780	9%
Southern	681	8%
Western	611	7%
Southwestern	602	7%
Northwestern	559	6%
Southeastern	558	6%
Central Southwestern	541	6%
Northern	521	6%
Midwestern	355	4%

Respondents by Emergency Preparedness District		
District 5	2528	28%
District 6	1036	12%
District 3	849	9%
District 1	776	9%
District 8	733	8%
District 9	684	8%
District 4	651	7%
District 10	617	7%
District 7	541	6%
District 2	528	6%

Number of Respondents by Urban/Rural Designation



Population Characteristics

Respondents by Gender			
Woman	7629	84%	
Man	1335	15%	
Non-Binary	55	1%	
Prefer not to say	56	1%	
Prefer to Self-Describe	10	0.1%	

Respondents by Race			
White	7584	86%	
Black or African American	836	10%	
Prefer not to say	308	4%	
American Indian or Alaska Native	204	2%	
Asian	163	2%	
Another Race	151	2%	
Middle Eastern or North African	30	0.3%	
Native Hawaiian or Other Pacific Islander	28	0.3%	

Respondents with Children by Age Group			
Baby (less than 1 year old)	571	6%	
Young Child (1-5 years old)	1918	21%	
Child (6-12 years old)	2886	32%	
Teen (13-17 years old)	2237	24%	
Young Adult (18-25 years old)	1846	20%	

Respondents by Ethnicity			
Hispanic or Latino/a	760	8%	
Non-Hispanic	8060	89%	
Prefer not to say	246	3%	

Families with someone who has Special Healthcare Needs			
Yes	1900	21%	
No	6647	75%	
Unsure	322	4%	

Families with someone who is pregnant			
Yes	342	4%	
No	8259	95%	
Unsure	51	1%	

Family Characteristics

Do you and your household currently have health insurance?	
Yes, we all do (n=6495)	85%
Only some of us do (n=935)	12%
No one has insurance (n=185)	2%
Unsure (n=69)	1%

Respondents that have medicaid	
Medicaid (n=2909)	40%

Focus Groups

Formal

- IDOH staff was not present
- Consulting group conducted each group
- Population specific groups (moms, caregivers, youth)
- Local partners hosted and recruited
- Indiana Youth Advisory Board
- English and Spanish speaking participants

Informal

- IDOH staff will be present unless stated not to be
- Community discussions hosted by local partners
- Focused on populations that were missing from the survey
- Haitian Creole, Burmese, Spanish, Amish
- Women in the Leath Unit in the Indiana Women's Prison

Importance of Community Engagement

Informed Decision-Making

- Community members have first-hand knowledge of their challenges, priorities, and strengths. Involving them leads to a more accurate understanding of needs and ensures that solutions are relevant and effective

Building Trust and Ownership

- Engaging the community builds trust between state agencies and residents. When people feel their input is valued, they are more likely to support and participate in programs, ensuring long-term success and sustainability

Tailored Solutions

- Community engagement allows for culturally and contextually appropriate initiatives that reflect the unique dynamics of the population

Empowerment and Capacity Building

- Engaging communities empowers individuals and groups by giving them a voice in shaping programs. It also helps build community capacity to identify and address their own needs in the future

Improving Equity

- Involving marginalized or underserved groups, community engagement helps reduce disparities and ensures that the most vulnerable populations are not left out of the discussion and decision-making processes

Successes

Engage with Trusted Community Leaders

- Collaborate with local influencers, leaders, and organizations that have community trust to facilitate introductions and encourage participation
- Example: Haitian Association of Indiana

Tailor communication

- Adjust messaging to be culturally relevant and use languages that resonate with the community
- Break down groups to what is relevant for certain individuals
 - Broke down groups by population domain

Provide Compensation

- Offer financial incentives, stipends, or other forms of compensation (e.g., gift cards) to participants, especially if they are dedicating a significant amount of time or effort

Successes

Offer Multiple Participation Channels

- Provide a mixture of in-person and virtual methods allowing for flexible engagement options

Meet People Where They Are

- Conduct outreach in spaces where people already gather (churches, community centers, local events) rather than expecting them to come to formal meetings

Provide Childcare

- Offering free childcare for in-person events can eliminate logistical barriers that prevent some from participating

Leverage Digital Platforms

- Use social media, mobile apps, and online platforms to reach a broader audience

Leverage Partnerships

- Use new and current partners to reach a broader audience (i.e., The Leath Unit, BMV, Department of Workforce Development)

**10-Minute
Table
Share**



Challenges

Bigger Picture

- Community members don't often understand the 'why' behind their involvement

Limited Trust

- Communities can be skeptical or distrustful of organizations due to past experiences

Cultural and Language Barriers

- Engaging in diverse populations can be difficult if cultural sensitivities, values, or languages are not understood and addressed.

Time and Resource Constraints

- Community members may have limited time to participate due to work, family obligations, or lack of compensation for their involvement
- Organizations may lack resources to conduct comprehensive engagement

Access Issues

- Physical distance, lack of transportation, or digital barriers can limit community members ability to participate in engagement efforts

**10-Minute
Table
Share**



Key Findings

Combination of Survey and Focus Groups = Abundance of Information

- 175-page survey data analysis from consulting company

Consistent Top 3

- Physical activity, nutrition, and mental health

Lessons Learned

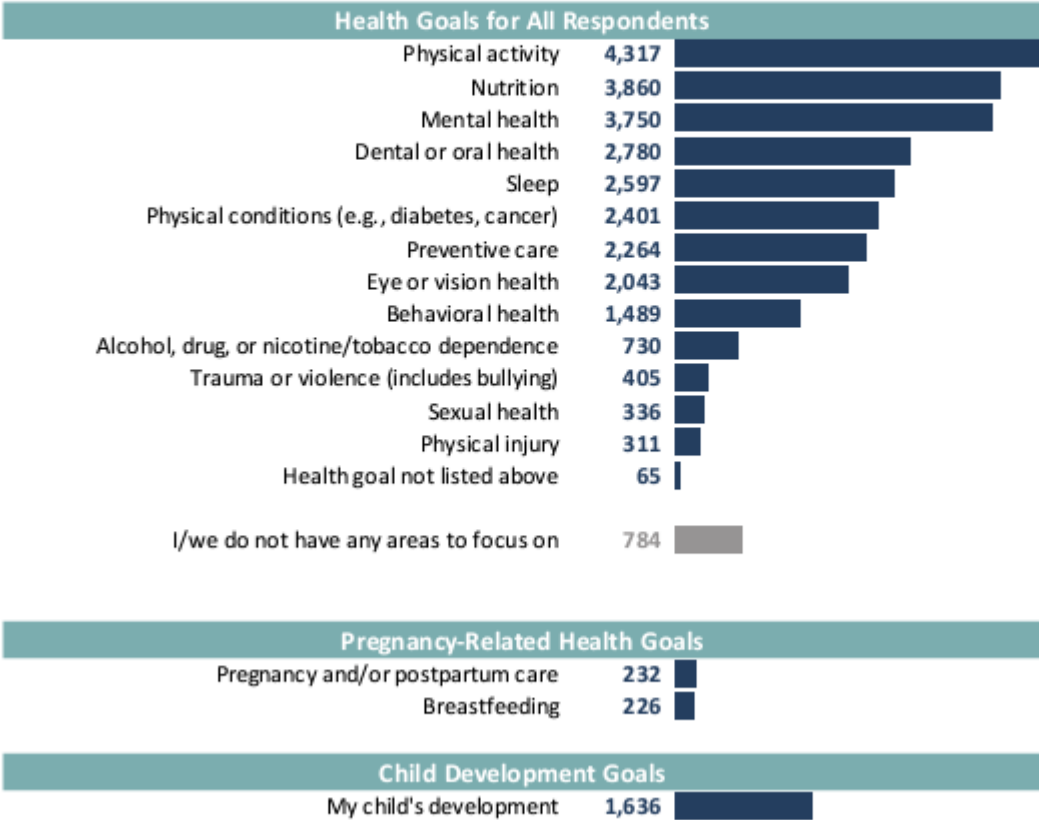
- Bots with compensation, focus group recruitment, and new partnerships needed



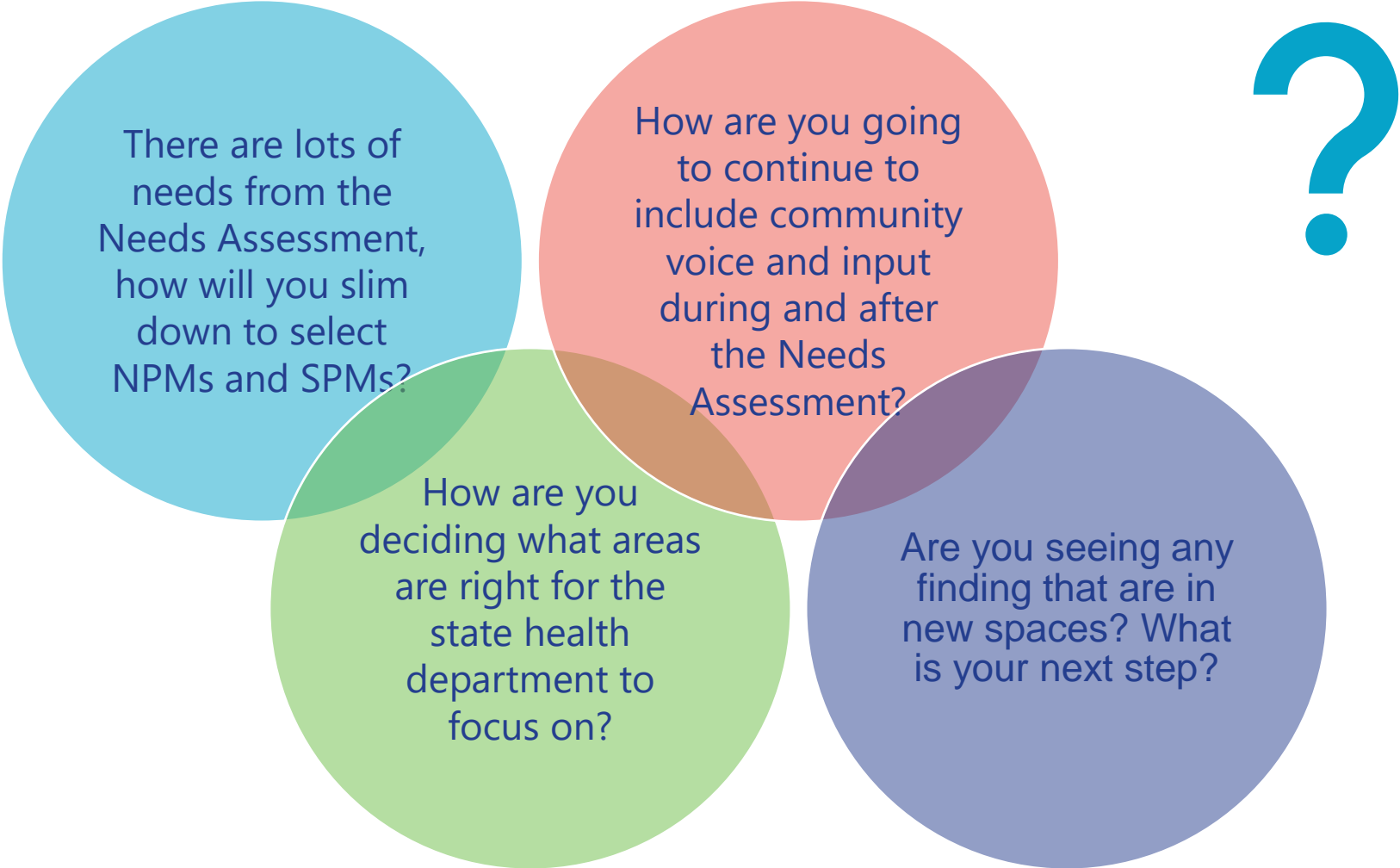
Health Goals

Survey respondents were asked which areas of health they would like to improve or maintain for themselves and/or their household. Respondents could select up to five areas that were the most important.

Figure 1: Health Goals – Overall Survey Population



Moving Forward – Community Engagement Post Needs Assessment



Questions?

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INDIANA TITLE V: ADDRESSING HOUSING AND NEEDS THAT IMPACT HEALTH

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MELANIE ROBERTS
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10/22/2024

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Agenda

Introductions

Title V Structure & Needs Assessment

- Discussion Questions

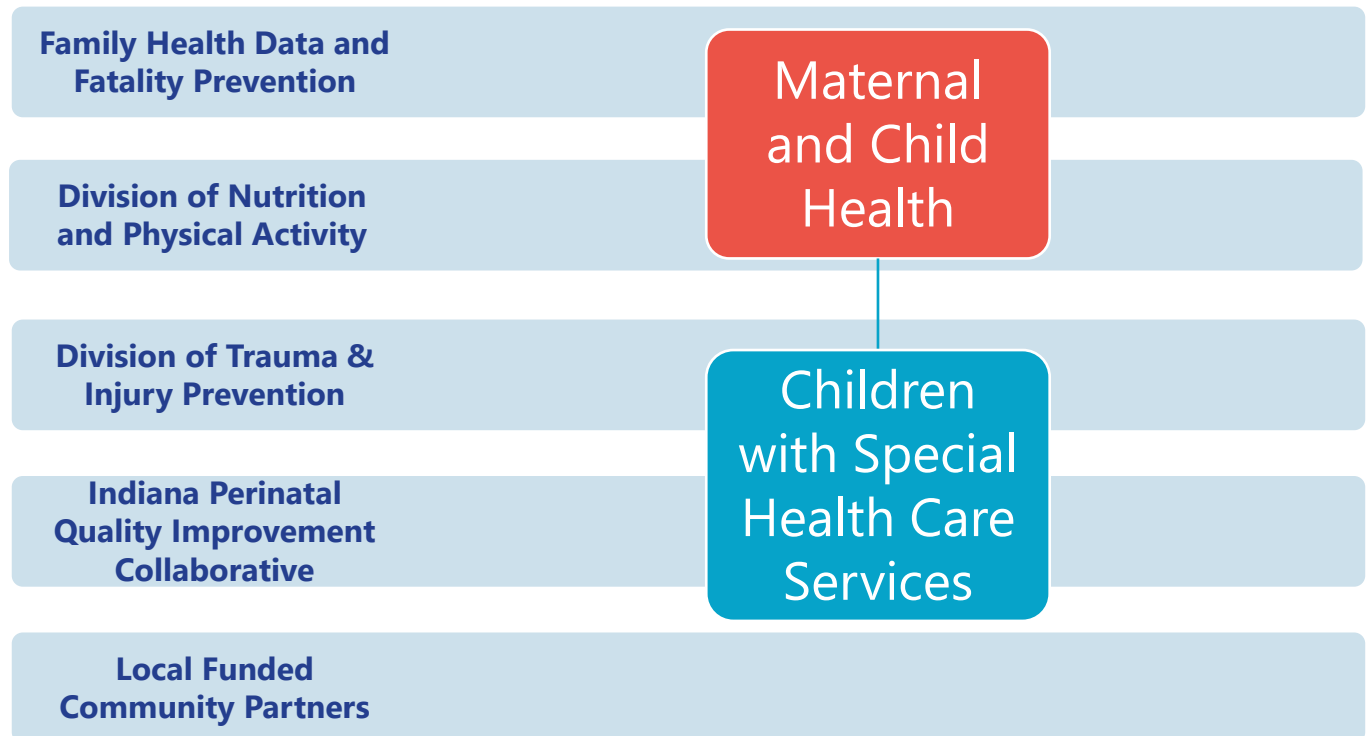
Current Initiatives in SDOH spaces, specifically housing


- Discussion Questions

Questions

Structure of Title V in Indiana

- Distribute to internal partners who have the programmatic expertise on select NPMs/SPMs
- Portion of funding granted to sub-awardees through competitive application process
 - Generally, non-profits, community-based organizations, and a few local health departments.





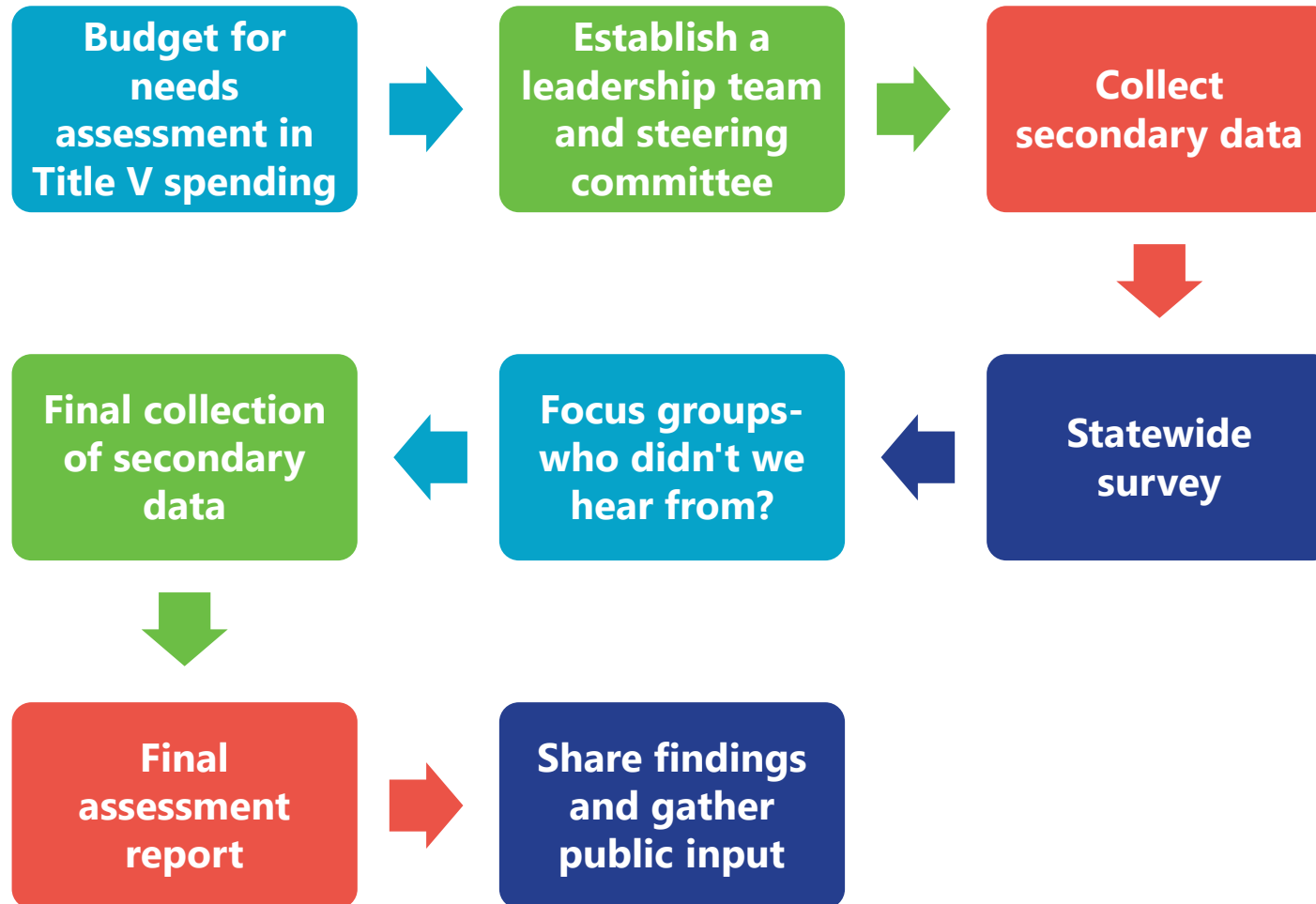
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Needs Assessment Structure



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Title V

Needs Assessment

- Indiana completed a statewide survey with 9,138 authentic responses
- Initial findings have "safe and affordable housing" as a high need for Hoosiers
- Partners in the Title V program and beyond are seeing housing needs becoming more and more prevalent

Next Steps

- Completing formal and informal focus groups to ask further questions on initial findings including housing
- Doing a final secondary data analysis
- Working to understand IDOH and Title V's role and capacity in housing



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Needs Assessment Overall

Supporting Resources for All Respondents



Needs Assessment Survey Findings

Women



Pregnant Women

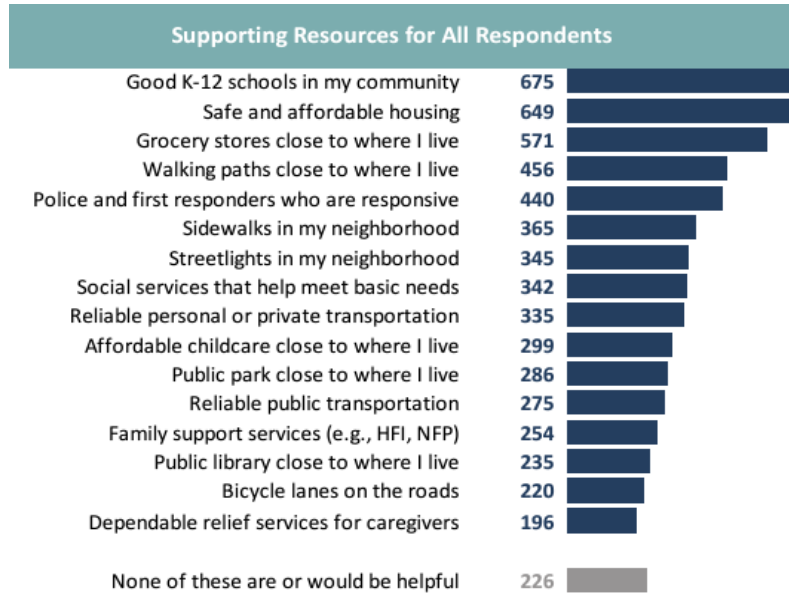


Needs Assessment Survey Findings

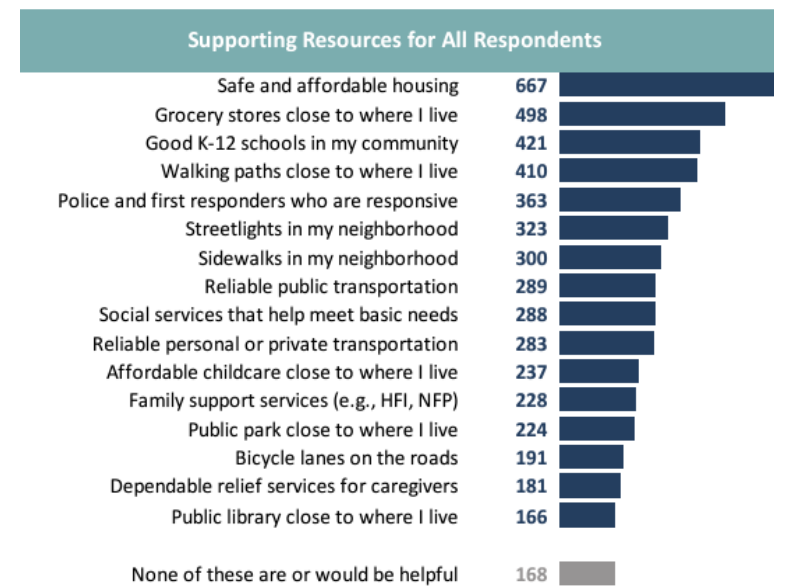
Children (6-12)



Adolescents (13-17)



Young Adults (18-25)



Discussion Questions

How are you collecting data for Social Drivers of Health (SDOH) in the Needs Assessment?

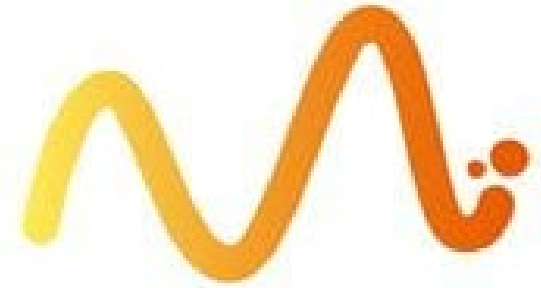
What SDOH are you seeing as a need?

What lessons have you learned from this Needs Assessment cycle?

Current MCH Initiatives

- Before this needs assessment, MCH heard from the community that there is an increased need for support work
- Started projects and new initiatives to help address current and new partners
 - Revamp of the MCH Helpline for navigating resources
 - Diaper Banks
 - Increase home visiting capacity
 - Bereavement awareness
 - Safety initiatives: gun locks, drowning, etc.
 - MCH is looking strategically across funding sources to increase programming
 - We know there is more work to be done, but we must first determine the role of the Department of Health in this work

Mothers on the Rise



MOTHERS ON THE RISE

- IDOH MCH has funded Trustees of IU – Grassroots MCH Initiative to implement Mothers on the Rise through Title V since 2021 to help mothers experiencing incarceration to build a coordinated care system that helps engage, educate, and transition the mothers.
- Indiana is one of nine states with a nursery unit in its women’s prison, the Leath Unit, that keeps moms and babies together for those who meet the requirements.
- At release, mothers are given food security services, healthcare coverage, medication, childcare vouchers, vaccination schedules, car seats and supplies, and further education.

Healthy Beginnings at Home

Noting the housing crisis that their target population and pregnant women in Indiana in general are facing, our partner approached MCH with a housing initiative.

- Using state funds, MCH has been able to fund a new initiative called Healthy Beginnings at Home, an evidence-based housing intervention for pregnant women in Marion County experiencing housing instability.

Healthy Beginnings at Home includes three components:

Rental Assistance

Housing Navigation

Housing Case Management

Trustees of IU – Grassroots MCH Initiative leverage expertise from existing infrastructure program and current housing partners to:

- Administer a flexible pool of funding to address barriers to housing,
- Provide housing program management to support funding administration, and
- Manage rental assistance payments to participating landlords

The program is in its first year and MCH is working closely to collect data and monitor success for future efforts as Title V NPMs are evolving to include housing.

Youth Homelessness System Improvement Grant (YHSI)

- U.S. Department of Housing and Urban Development, Community Planning and Development
- Target population:
 - Youth aged 24 and younger
 - Unaccompanied youth
 - Pregnant or parenting youth
 - Transition age youth – persons between age 18 and 24
- Purpose:
 - Improve existing, or establish and implement, a response system for youth experiencing homelessness
 - Focus on systemic change through projects that:
 - Create and build Youth Action Boards
 - Develop strong leaders within a community
 - Improve the coordination, operation, and administration of homeless assistance projects to better serve youth



YHSI (cont.)

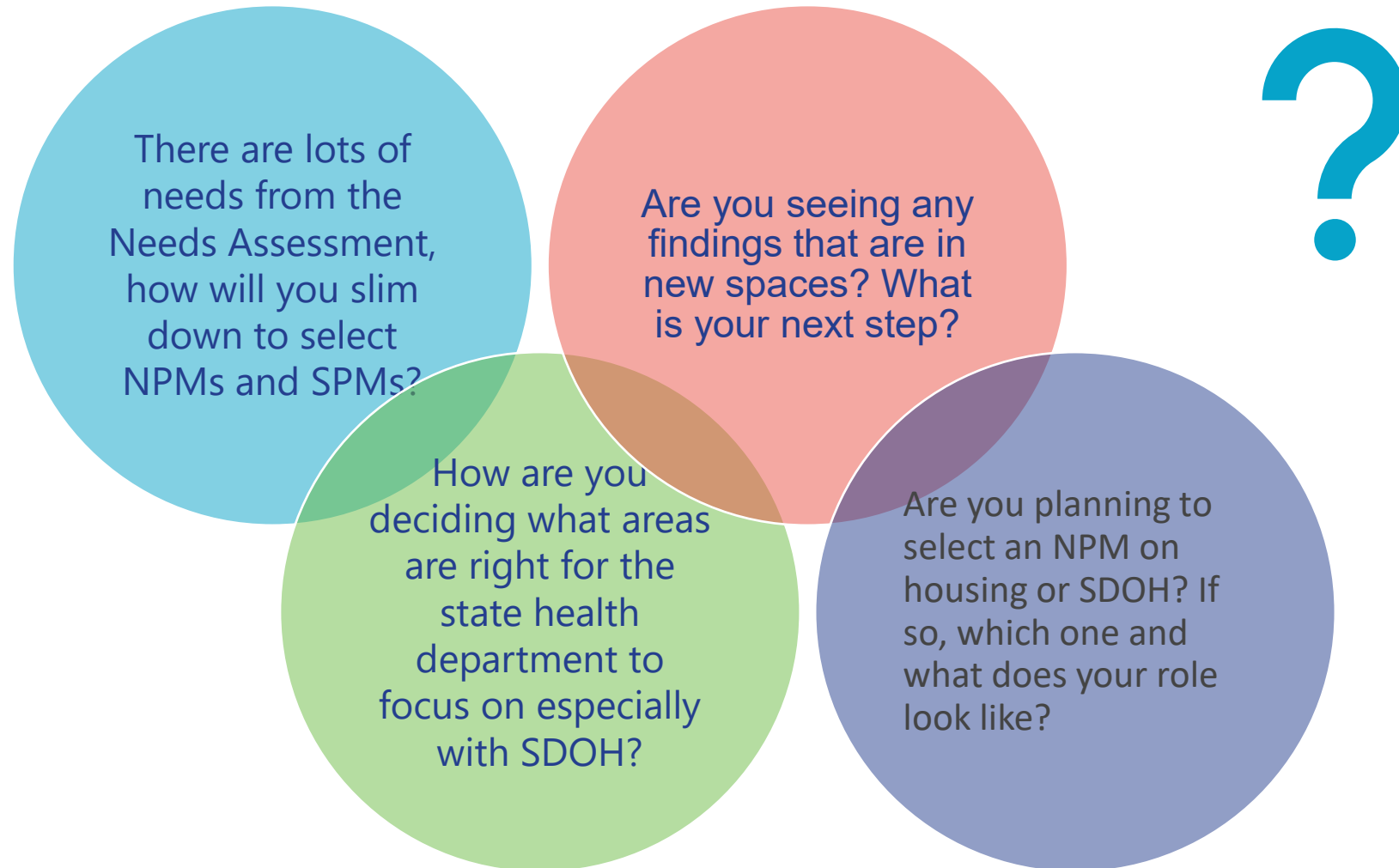
- The Indiana Department of Health partnered with the Indiana Housing and Community Development Authority (IHCDA) on the YHSI
- MCH aims to address the root causes of youth homelessness and improve the overall health outcomes of young people in Indiana by the following activities:
 - Providing expert insight on how housing instability and health differences interact in relation to housing
 - Work with partners to determine health-related outcomes and problems as they pertain to housing instability
 - Facilitate intra-agency collaboration that further IHCDA's housing initiatives
 - Provide local level support through collaborations with LHD's and community organizations
 - Share data findings (PRAMS, YRBS, SHP, Title V Needs Assessment) pertaining to housing and other relevant topics with IHCDA

Tactical Urbanism

Title V Partners with IDOH's Division of Nutrition and Physical Activity

- Fund grants to communities for tactical urbanism demonstration projects and bicycle and pedestrian planning
- These programs:
 - Make temporary traffic safety improvements that lead to long-term permanent changes supporting everyday safe walking and bicycling
 - Prepare and adopt community-wide plans supporting safe routes to everyday destinations
 - Create safer, healthier neighborhoods by promoting active lifestyles and active transportation for children and adults.

Moving Forward – Addressing Needs that impact health



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