

# 2024 Community-Based Organization Survey Results

### **Overall Methodology**

The Long Island Health Collaborative, in partnership with its 2025 CHNA/CHA Work Group participants, deployed a survey to community-based organizations and agencies on Friday, November 15, 2024. The survey was physically distributed by paper, and digitally distributed through SurveyMonkey. The survey garnered 59 responses from November 15 to December 31, 2024. Survey respondents were asked 12 multiple-choice questions about the health and demographics of the communities they serve. Respondents were also asked several questions about their organization's location and service area, and their willingness to participate in key informant interviews in 2025.

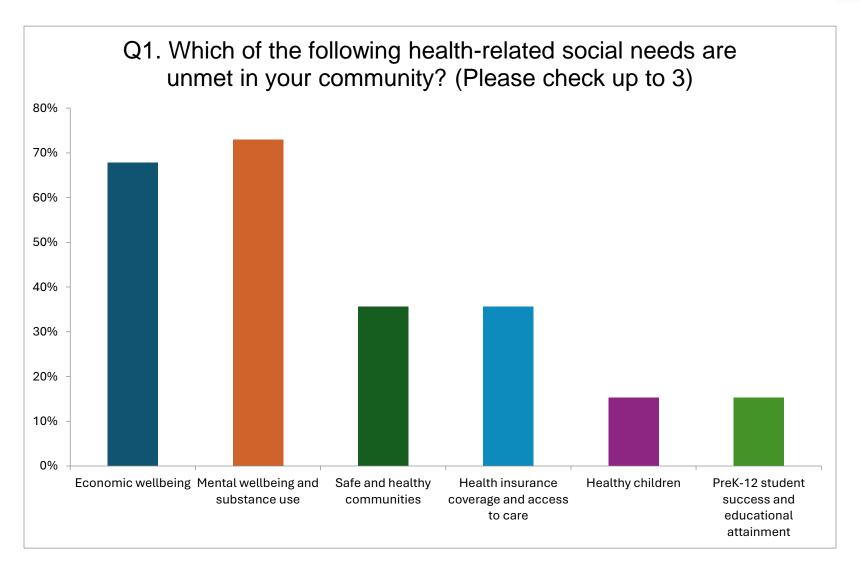
Analysts downloaded all survey responses from SurveyMonkey on January 6, 2025. The following charts reflect the multiple-choice survey responses exported from SurveyMonkey.

#### **Qualitative Analysis Methodology**

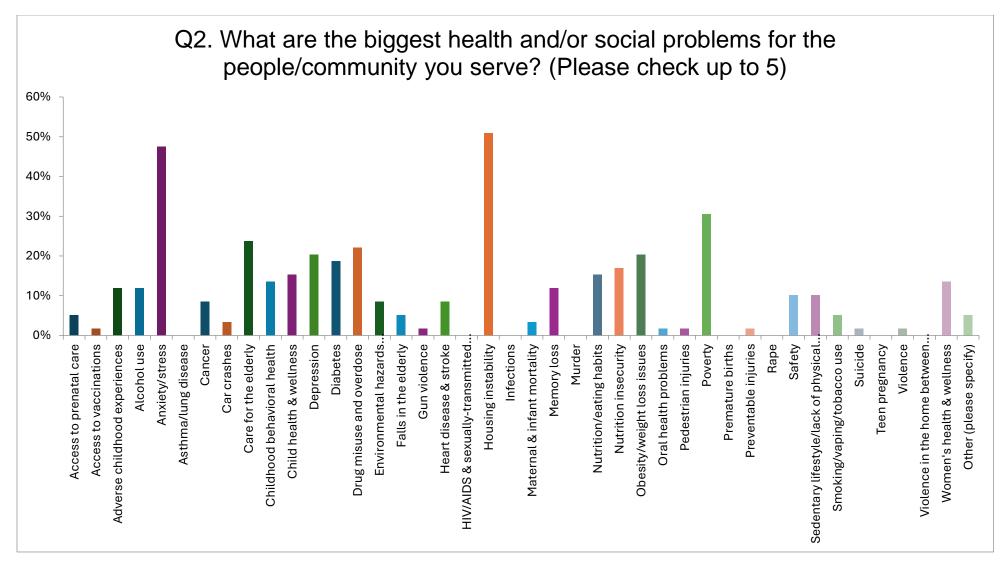
In addition to eight (8) multiple choice questions about the health of the respondent's community, survey respondents were asked one (1) openended question: what makes a community healthy? The qualitative analysis within Appendix A reflects the overarching themes of respondents' open-ended answers about what they think makes a community healthy. Using ATLAS.ti qualitative analysis software, three coders worked simultaneously to assign thematic codes to the survey respondents' direct quotations.

See Appendix B for survey instrument.



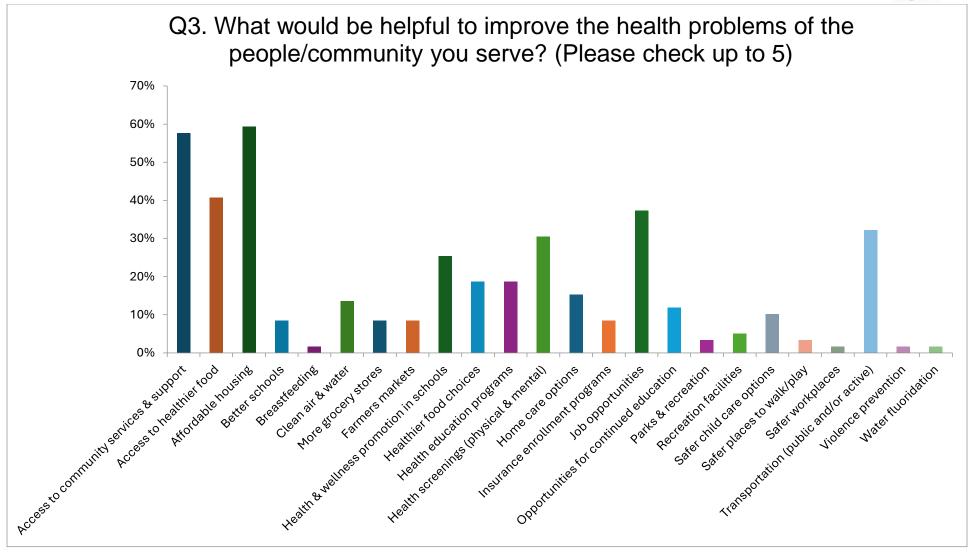






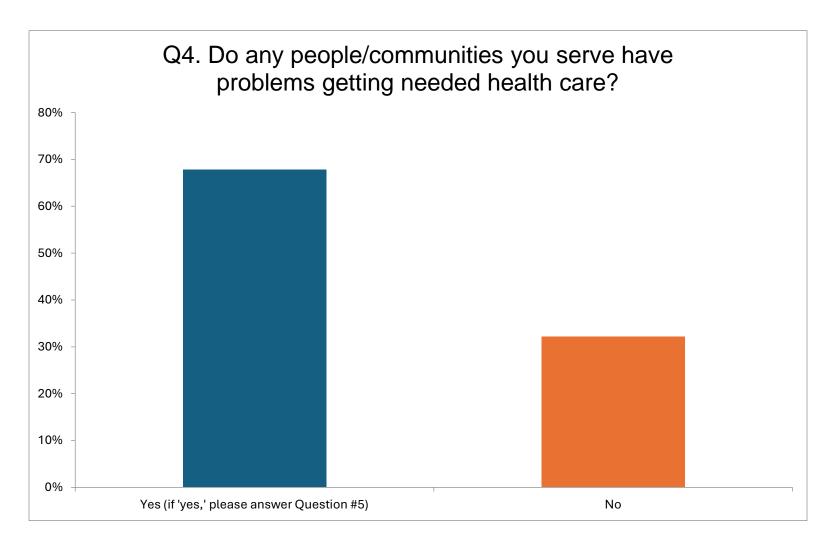
Other answers written in by respondents included: "Transportation to medical care for the senior population," "education," and "money management like budgeting and saving."



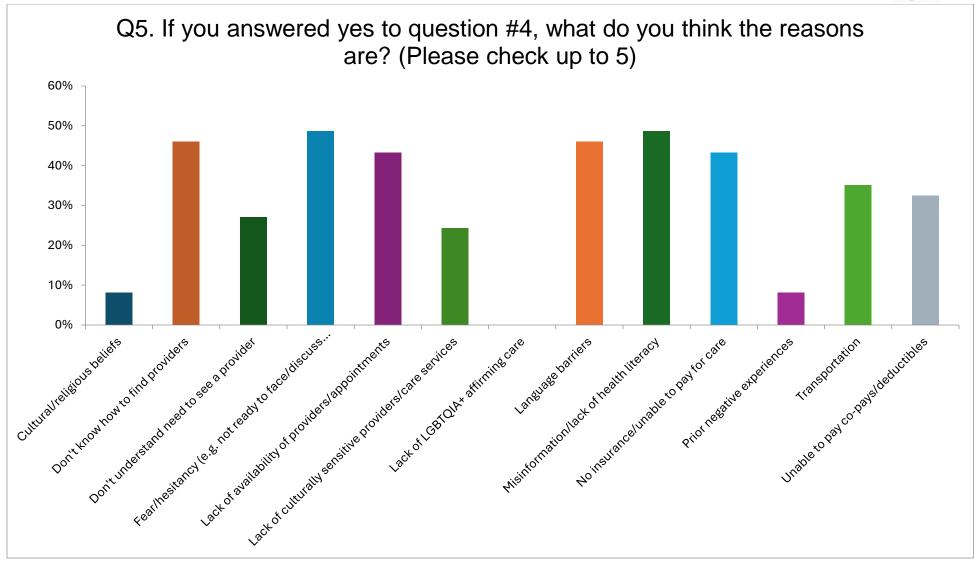


Other answers written in by respondents included: "Women's health, screenings, disease conditions affecting women uniquely compared to men, services and clinicians that can help," and "advocacy and outreach."



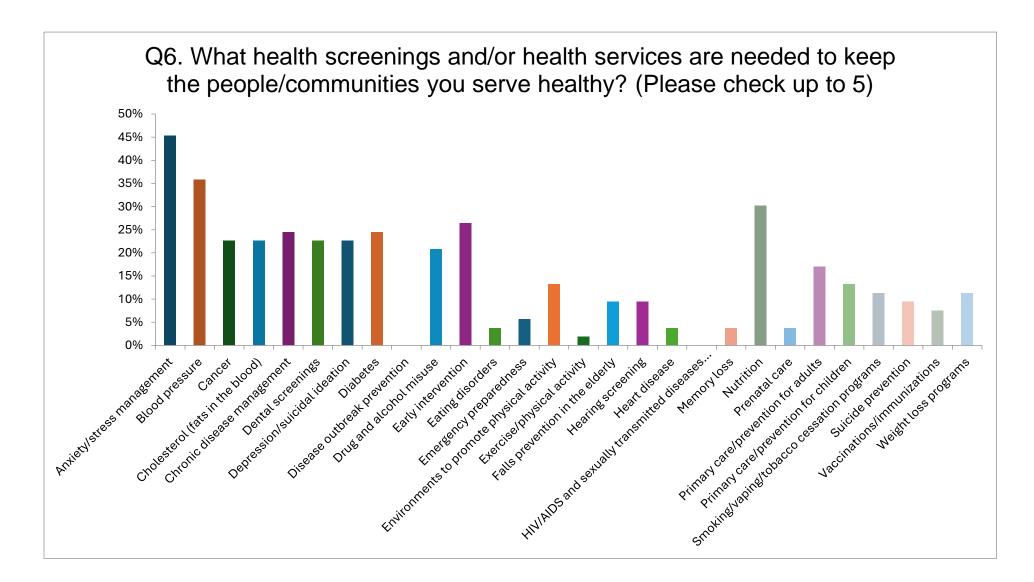






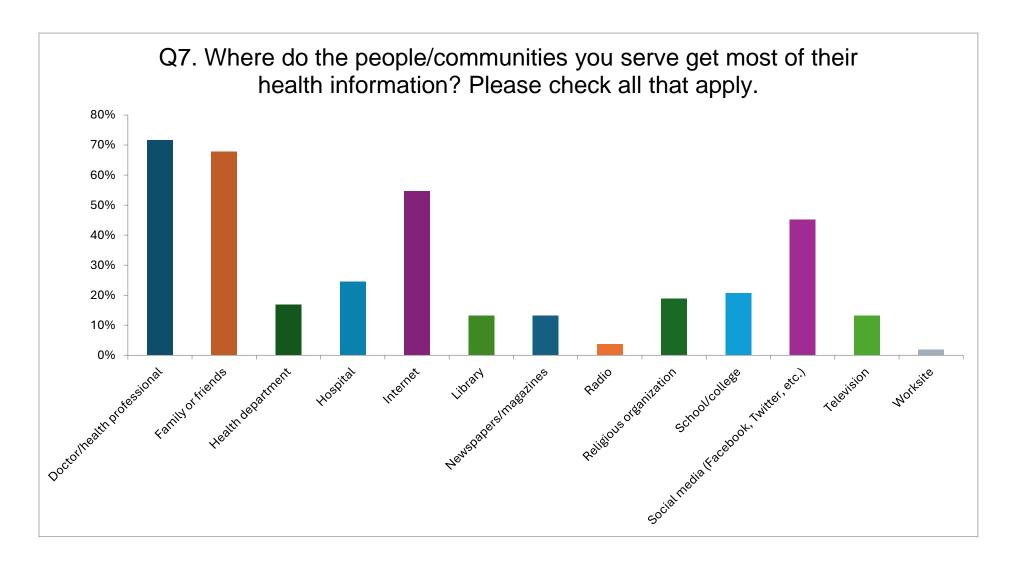
Other answers written in by respondents included: "Lack of information."





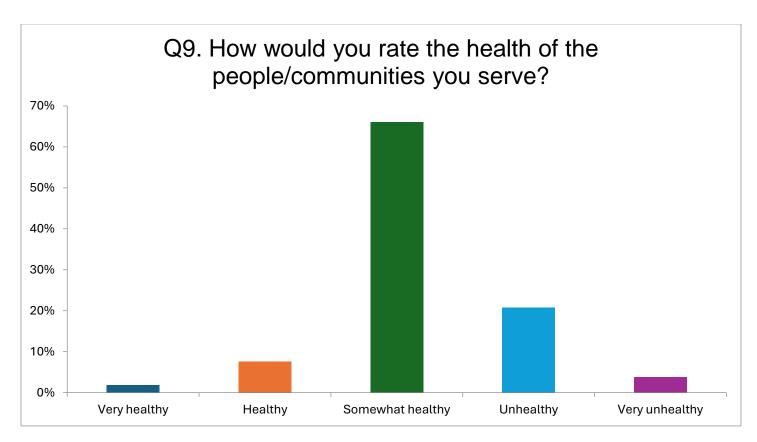
Other answers written in by respondents included: "Low income communities of color."





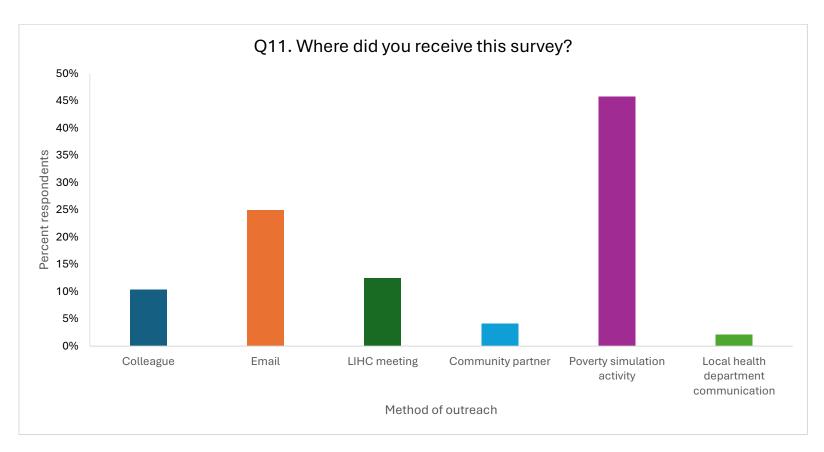
Other answers written in by respondents included: "Unsure... interested in learning more about this," "speakers that come to the senior center," "nursing students during clinical rotations," and "cable TV."







# **Survey Outreach Methods**





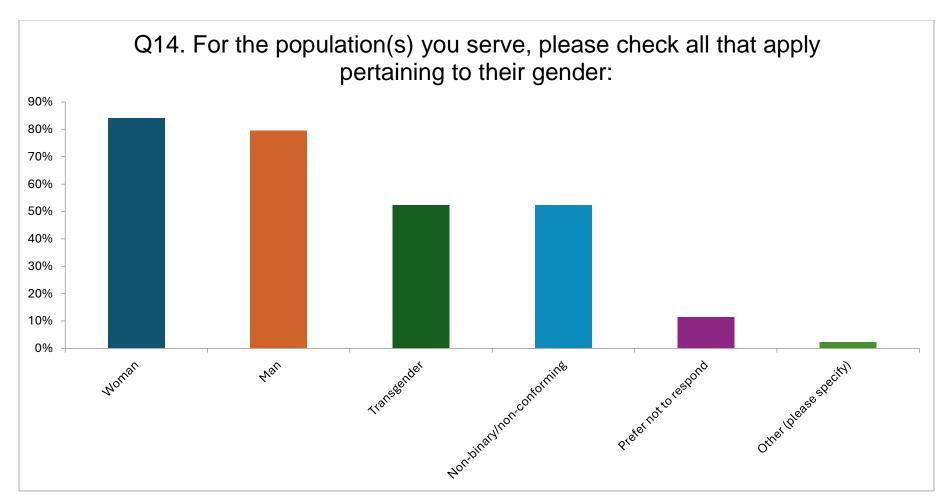
# Respondent Information and Communities Served Q13: What town do you work in?



Total respondents: 48

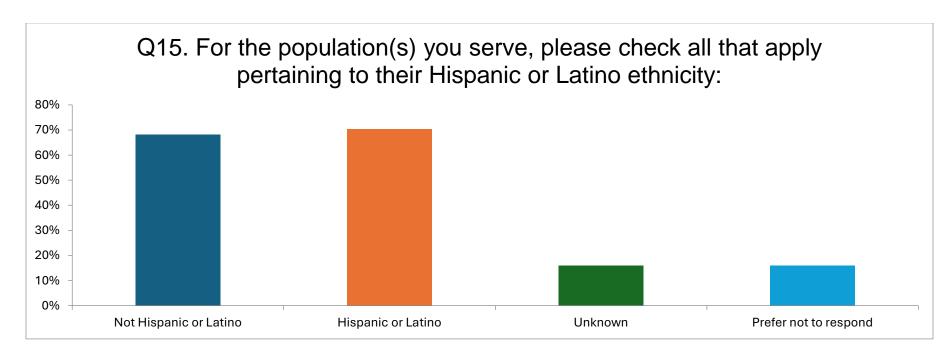
In addition to the answers shown above: three respondents worked throughout all Long Island, one worked in northern Nassau County, one worked in Suffolk County, one worked in Nassau County, and one worked in the east end of Long Island.



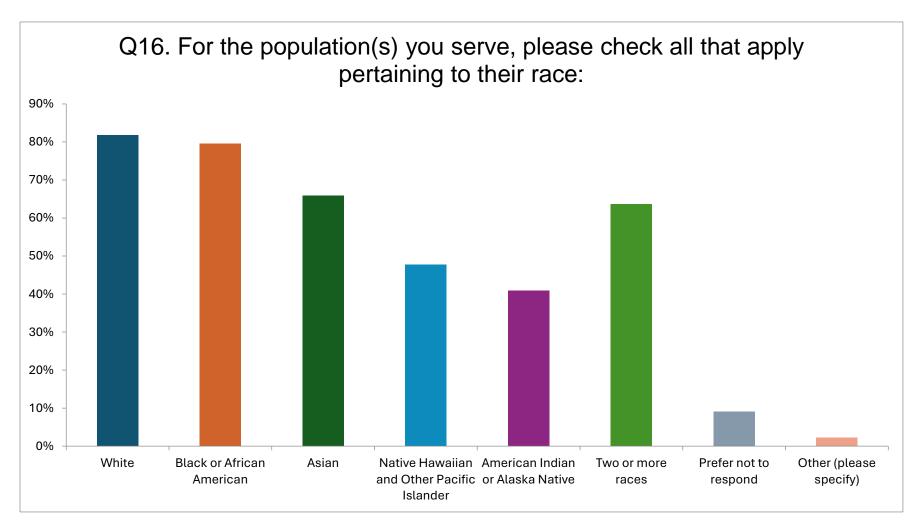


Other answer written in by respondent: "Seniors."



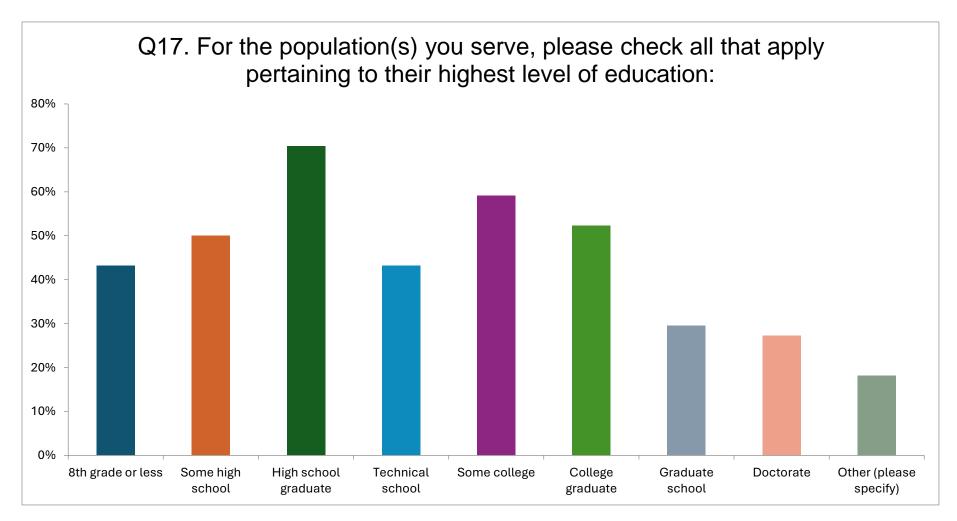






Other answer written in by respondent: "Ukranians."





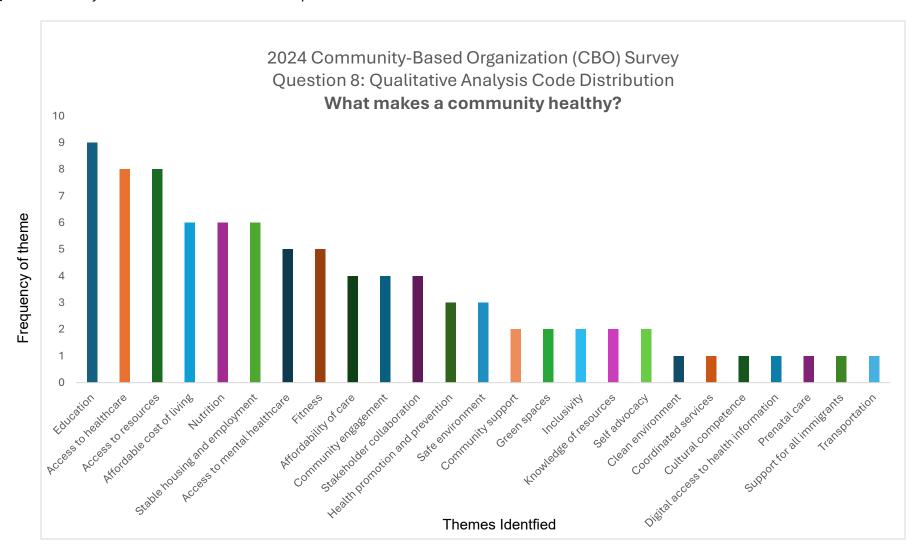
Other answers written in by respondents included: "I don't know," "N/A," "we serve all populations," "we serve the community, so pretty much all of the above," "unknown," "a few are illiterate," and "prefer not to answer."

# Health COLLABORATIVE

### **APPENDIX A**

#### 2024 CBO Survey Question 8: What makes a community healthy?

Qualitative Analysis Code Distribution and Descriptions





#### **Code Descriptions**

**Education** refers to education about all facets of the healthcare system and the foundational pillars of health, including but not limited to the importance of lifestyle and disease prevention factors

Access to healthcare refers to equitable and easy access to medical care for those who require it

Access to resources refers to access to community-based and state-provided social supports and resources

Affordable cost of living refers to the cost of multiple aspects of living, including but not limited to the cost of housing and nutritious foods

Nutrition refers to food security, as well as access to and consumption of nutritious foods

Stable housing and employment refer to an individual's ability to maintain a stable place of residence and a stable source of income

Access to mental healthcare refers to equitable and easy access to mental healthcare for those who require it

**Fitness** refers to physical activity and subsequent fitness

Affordability of care refers to reasonably affordable mental and medical healthcare services

**Community engagement** refers to a community's engagement with not only each other, but with the systems that affect the community, socially and civically

**Stakeholder collaboration** refers to coordinated collaborative efforts among all entities who have a stake in affecting a community's health, including but not limited to healthcare systems, legislators, and community-based organizations

**Health promotion and prevention** refers to public health measures that enable people to have control of and improve one's health, with particular consideration of structural and social determinants of health

**Safe environment** refers to safe (inclusive and violence-free) places to work, learn, play, live, and receive care, all of which ultimately contribute to better health outcomes

Community support refers to interdependence among community members in times of wellness and illness

**Green spaces** refer to equitable and accessible natural outdoor environments

**Inclusivity** refers to equitable access to care, programming, and resources for all individuals, including but not limited to the LGBTQIA+ population, minority populations, and immigrants

**Knowledge of resources** refers to an individual's knowledge and awareness of the social and healthcare resources around them so they can appropriately take avail themselves of said resources



Self-advocacy refers to individuals' ability to advocate for themselves as a patient within the healthcare system

**Clean environment** refers to a clean outdoor environment, including but not limited to air and water supply

Coordinated services refer to a complete and consistent continuum of care between all providers, across healthcare and social services

Cultural competence refers to care providers' ability to understand a patient's culture and deliver culturally informed care

**Digital access to health information** refers to individuals' access to health information through digital pathways and platforms, including but not limited to the internet access and social media platforms

Prenatal care refers to equitable and adequate healthcare for mother and baby prior to birth

**Support for all immigrants** refers to systemic support for documented and undocumented immigrants

**Transportation** refers to equitable and easy access to affordable, reliable transportation



# **APPENDIX B**

**2024 Community-Based Organization Survey Instrument** (see next two pages)

#### **LONG ISLAND HEALTH SURVEY FOR ORGANIZATIONS AND AGENCIES**

The county health departments (Nassau and Suffolk), local hospitals, and other community partners are in the process of deciding what health problems we will focus on for the next few years. We would like to find out what problems are vital to the persons and community you provide care/services to. We will use these results, along with other information, to plan to improve the health of persons in Nassau and Suffolk counties. Please give us your input by filling this out and sending it back by mail or email. Or complete the survey online (preferred method) through this link: https://www.surveymonkey.com/r/LIHC-CBO2024. The return information is listed at the end of this survey. Thank you.

3. What would be helpful to improve the health problems of

1. Which of the following health-related social needs are

□ Women's health & wellness□ Other (please specify):

unmet in your community? (Please check up to 3)	the people/community you serve? (Please check up to 5)
□ Economic wellbeing	□ Access to community services & support
□ Mental wellbeing and substance use	□ Access to healthier food
□ Safe and healthy communities	□ Affordable housing
☐ Health insurance coverage and access to care	□ Better schools
□ Healthy children	□ Breastfeeding
□ PreK-12 student success and educational attainment	□ Clean air & water
	□ More grocery stores
2. What are the biggest health and/or social problems for the	□ Farmers markets
people/community you serve? (Please check up to 5)	□ Health & wellness promotion in schools
	□ Healthier food choices
Access to prenatal care	□ Health education programs
□ Access to vaccinations	□ Health screenings (physical & mental)
□ Adverse childhood experiences	□ Home care options
□ Alcohol use	□ Insurance enrollment programs
□ Anxiety/stress	□ Job opportunities
□ Asthma/lung disease	<ul> <li>Opportunities for continued education</li> </ul>
□ Cancer	□ Parks & recreation
□ Care for the elderly	□ Recreation facilities
□ Childhood behavioral health	□ Safer childcare options
□ Child health & wellness	□ Safer places to walk/play
□ Depression	□ Safer workplaces
□ Diabetes	□ Transportation (public and/or active)
□ Drug misuse and overdose	□ Violence prevention
□ Environmental hazards (water/soil/air pollution, lead, etc.)	□ Water fluoridation
□ Falls in the elderly	□ Other (please specify):
□ Heart disease & stroke	
☐ HIV/AIDS & sexually transmitted diseases (STDs)	4. Do any people/communities you serve have problems
□ Housing instability	getting needed health care?
□ Infections	
□ Maternal and infant mortality	□ Yes (if 'yes,' please answer question #5) □ No
□ Memory loss	
□ Nutrition/eating habits	5. If you answered 'yes' to question #4, what do you think
□ Nutrition insecurity	the reasons are? (Please check up to 5)
□ Obesity/weight loss issues	
□ Oral health problems	□ Cultural/religious beliefs
□ Poverty	□ Don't know how to find providers
□ Premature births	□ Don't understand need to see a provider
□ Preventable injuries	□ Fear/hesitancy (e.g. not ready to face/discuss health problems
□ Car crashes □ Pedestrian injuries □ Other:	immigration status; etc.)
□ Safety	<ul> <li>Lack of availability of providers/appointments</li> </ul>
□ Sedentary lifestyle/lack of physical activity	□ Lack of culturally sensitive providers/care services
□ Smoking/vaping/tobacco use	□ Lack of LGBTQIA+ affirming care
□ Suicide	□ Language barriers
□ Teen pregnancy	☐ Misinformation/lack of health literacy
□ Unemployment	□ No insurance/unable to pay for care
□ Uninsured or underinsured	□ Prior negative experiences
□ Vaccine preventable diseases	□ Transportation
□ Violence	□ Unable to pay co-pays/deductibles
□ In the home between partners	□ Other (please specify)
□ Guns □ Murders □ Rape □ Other:	



6. What health screenings and/or health services are needed to keep the people/communities you serve healthy? (Please	If you are able, please complete the following:  Your organization:
check up to 5)	Where did you receive this survey?
□ Anxiety/stress management	where did you receive this survey?
□ Blood pressure □ Cancer	Zip code where you work
□ Cholesterol (fats in the blood)	
□ Chronic disease management	Town where you work
□ Dental screenings	For the population(s) you serve, please check all that apply
□ Depression/suicidal ideation	pertaining to their gender:
□ Diabetes	persuming to mon genuer.
□ Disease outbreak prevention	□ Woman □ Man □ Transgender
□ Drug and alcohol misuse □ Early intervention	□ Non-binary/non-conforming □ Prefer not to respond
□ Eating disorders	First constitution (No. 1991)
□ Emergency preparedness	For the population(s) you serve, please check all that apply
□ Exercise/physical activity	pertaining to their age:
□ Falls prevention in the elderly	□ Under 18 □ 18-24 years □ 25-34 years □ 35-44 years
□ Hearing screening	□ 45-54 years □ 55-64 years □ 65+ years
□ Heart disease	2 .0 0 . your
□ HIV/AIDS & sexually transmitted diseases (STDs)	For the population(s) you serve, please check all that apply
□ Memory loss	pertaining to their Hispanic or Latino ethnicity:
□ Nutrition	
□ Prenatal care	□ Not Hispanic or Latino □ Unknown
□ Primary care/prevention for adults □ Primary care/prevention for children	□ Hispanic or Latino □ Prefer not to respond
□ Smoking/vaping/tobacco cessation programs	
□ Snioking/vaping/lobacco cessation programs □ Suicide prevention	For the population(s) you serve, please check all that apply
□ Vaccination/immunizations	pertaining to their race:
□ Weight loss programs	□ White
□ Other (please specify)	□ Black or African American
,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	□ Asian
7. Where do the people/communities you serve get most of	□ Native Hawaiian and Other Pacific Islander
their health information? (Please check all that apply)	□ American Indian and Alaska Native
	□ Two or more races
□ Doctor/health professional	□ Prefer not to respond
□ Family or friends	□ Other (please specify)
□ Health department	First Control of Contr
□ Hospital □ Internet	For the population(s) you serve, please check all that apply
□ Library	pertaining to their highest level of education:
□ Newspaper/magazines	□ K-8 grade
□ Radio	□ Some high school
□ Religious organization	□ High school graduate
□ School/college	□ Technical school
□ Social media (Facebook, Twitter, etc.)	□ Some college
□ Television	□ College graduate
□ Worksite	□ Graduate school
□ Other (please specify)	□ Doctorate
8. What do you think makes a community healthy?	□ Other (please specify)
	Your name:
	Phone:
	Email:
	Would you be willing to participate in a 15-minute
9. How would you rate the health of the people/	phone/Zoom call in the early part of 2025 to delve deeper into the health and social support issues concerning Long
communities you serve?	Islanders? These narrative responses will be analyzed in the
	aggregate for key themes and focus areas and will become
<ul><li>□ Very healthy</li><li>□ Healthy</li><li>□ Somewhat healthy</li><li>□ Unhealthy</li><li>□ Very unhealthy</li></ul>	another primary data source.   Yes   No