

INTRODUCTION

In June 2019, Cook County Family Connection received funding from The Urban Institute and Robert Wood Johnson Foundation through the Powering Healthy Lives initiative to utilize data from the U.S. Small Area Life Expectancy Estimates Project (USALEEP) in a manner that would have meaningful implications for the community. Cook County Family Connection (CCFC) designed a research plan that would utilize USALEEP data as the catalyst for spearheading meaningful conversations and generating community action to address health equity in eleven rural communities scattered across Georgia. The eleven rural counties targeted for this research included: Appling, Chattooga, Clay, Cook, Decatur, Early, Elbert, Hancock, Haralson, Lumpkin, and Miller. Those counties were selected because they are included in an existing cohort—the Two Georgias Initiative—funded by Healthcare Georgia Foundation to pilot a five-year community-based process to identify and address the root causes of local health inequities. In each of those eleven counties, community health partnerships had been formed where local leaders work together to research and understand local health disparities; to conduct strategic planning processes to improve equity around the social determinants of health; to participate in trainings to understand the dynamics of social justice and health equity; and to mobilize community leaders around issues of health equity. The research team from CCFC recognized that, in order to create meaningful change, the leaders and partners in these eleven community health partnerships must fully understand their local-level data, and the correlations between life expectancy and the social determinants of health across their communities. That is where the CCFC research project was designed to serve a critical function by using USALEEP data as the nexus for compiling, analyzing, and sharing local-level health data with these eleven emerging collaborative partnerships.

METHODOLOGY/APPROACH

The CCFC Powering Healthy Lives project was designed to accomplish four primary objectives during the period of June 2019 to May 2020 as follows:

- **Data Collection and Publication of Data Reports** – to map life expectancy estimates by census tract across the eleven target communities; to collect secondary data by census tract to examine correlations between life expectancy and social determinants of health indicators; and to compile that data into detailed health data reports and supporting graphics/visuals for each of the eleven rural health partnerships.
- **Dissemination of Findings** – to host a USALEEP Data Workshop(s) for at least 30 cohort partners for purposes of sharing the findings, and teaching partners how to examine, utilize, and correlate their local life expectancy data to issues of health equity in their respective communities. Target audience was designed to include 30 partners—at least two key leaders from each of the eleven rural cohort communities, plus at least two key leaders from Healthcare Georgia Foundation, the Partnership for Southern Equity, Emory Prevention Research Center, and Georgia Health Decisions.
- **Cohort Follow-Up** – to maintain monthly contact with leaders from the eleven community health partnerships to document the on-going impact and local significance of the USALEEP data as they are using it within their counties; and to provide technical assistance/guidance to those communities upon request.
- **Aggregate Findings and Evaluation Report** – to compile and publish an aggregate data report that will compare and contrast life expectancy and health data indicators among the eleven target communities; and to produce a final project evaluation report which will allow the evaluation team, funders, and partners to assess the results, accomplishments, challenges, and findings of this data research project.

The process and outcome results for each of these four objectives are detailed in the following sections of this report.

DATA COLLECTION AND PUBLICATION OF DATA REPORTS

During the period from June to November 2019, the CCFC research team utilized the USALEEP database to map life expectancy estimates for a total of 47 census tracts across eleven rural Georgia counties. That allowed researchers to examine and map differences in life expectancy across individual census tracts, and then to compare those estimates to county-level, state, and national life expectancy estimates. Using the life expectancy data as the primary data point, the research team then collected and compiled secondary data to examine the socioeconomic, behavioral, environmental, and healthcare access correlations for each locale. Their secondary data sources included: Robert Wood Johnson Foundation County Health Rankings, Annie Casey Foundation Kids Count Database, Georgia Family Connection Partnership Census Tract Database, Georgia Department of Public Health OASIS (Online Analytical Statistical Information System), Georgia Bureau of Investigation Crime Report Database, the Foundation for AIDS Research Opioid Database, U.S. Census Bureau County Profiles Database, the Georgia Department of Family and Children Services Child Abuse Database, and cohort health survey findings compiled by a research team from Emory Prevention Research Center. Those secondary data sources, combined with results of locally-administered health assessments and windshield surveys, allowed the CCFC research team to produce detailed data reports examining specific disparities and inequities that lead to lower life expectancy in certain geographic areas of the eleven target counties. The final data reports, averaging 18 to 20 pages each, moved beyond standard health data to incorporate indicators related to multiple social determinants of health that impact life expectancy. For example, each data report began with a county map charting life expectancy data for the various census tracts, and comparing those estimates against county-level, state, and national life expectancy estimates. The remainder of each report then dissected each census tract within each county to examine indicators including poverty, low-literacy, unemployment, homelessness, crime rates, child abuse and family violence, uninsured residents, homeownership, etc. The result was the publication of eleven high-quality, visually-appealing data reports that allow community stakeholders to clearly see the impact of various health inequities on life expectancy by geographic area. Each of the eleven rural

partnerships received thirty printed copies of their county’s data report, along with a USB flash drive that contained their full data report, census tract maps, visuals and graphics, and a PowerPoint presentation to use when sharing their data locally.

DISSEMINATION OF FINDINGS

The original plan designed by CCFC proposed to host one USALEEP Data Workshop for at least 30 cohort partners in a central-Georgia location. However, at the request of the cohort leaders and state partners, two separate workshops were held—one in Cook County for the six community partnerships located across South Georgia, and another in DeKalb County for the five partnerships located across North Georgia. This logistical change proved to be advantageous because: (1) locations were more convenient geographically which allowed more partners to participate in the workshops, (2) eliminating the costs for overnight accommodations allowed the project to allocate that funding to support the eleven partnerships in hosting events within their communities to share the data locally, and (3) discussions within the workshops were more robust and specific because they focused on commonalities of the geographic region (South Georgia versus North Georgia). Between the two workshops, a total of 42 partners participated in at least one workshop—twelve more partners than originally expected.

The South Georgia workshop was held in Cook County on January 8, 2020, with the following 18 attendees representing six of the eleven community partnerships:

Zoe Myers, MS – Cook County Family Connection
Jennifer Lovett – Cook County Two Georgias Initiative
Dr. Chet Ballard – Valdosta State University, Sociology
Stacy Russell – The Partnership for Southern Equity
Dr. Michelle Kegler – Emory Prevention Research Center
Samantha Tucker – Healthcare Georgia Foundation
Karen Wakeford – Georgia Health Decisions
Sheila Freeman – Shape Up Miller County
Leigh Ribolzi – Miller County Family Connection
Rev. Kenneth Ellison – Shape Up Miller County
Addison Mickens – Healthy Appling County
Gwen Houston – Early County Family Connection
Tammy Story – Early Cares Partnership
Dr. Denise Ballard – Early Cares Partnership

Estella Bryant – Collaborative Impact for Decatur County
Dr. Charles Stafford – Collaborative Impact for Decatur County
Pastor Martin Williams – Collaborative Impact for Decatur County
Tara Gardner – Clay County Health Partnership

The North Georgia workshop was held in DeKalb County on January 24, 2020, with the following 26 attendees representing the remaining five of the eleven partnerships:

Zoe Myers, MS – Cook County Family Connection
Dr. Chet Ballard – Valdosta State University, Sociology
Rick Ratliff – Cook County Family Connection
Carl Taylor – Cook County Family Connection
Lisa Medellin – Healthcare Georgia Foundation
Arlene Goldson – Partnership for Southern Equity
Beverly Tyler – Georgia Health Decisions
Catherine Liemohn – Georgia Health Decisions
Dr. Steve Erickson – Georgia Family Connection Partnership
Stacy Russell – Partnership for Southern Equity
Erin Hernandez – Live Healthy Chattooga
Tina Smith – Live Healthy Chattooga
Kendra Stallings – Partnership for Southern Equity, Chattooga County
Alysia Poon – Elbert Partners for Health
Laura Evans – Elbert Partners for Health
Chambree Harris – Hancock Health Improvement Partnership
Ilexis Lindsey – Hancock Health Improvement Partnership
Allison Buhler – Hancock Health Improvement Partnership
Melissa Line – Lumpkin Community Helping Place
Ruth McAffrey – Lumpkin Community Helping Place
Paula Payne – Lumpkin Community Helping Place
Alicia Michael – Live Healthy Haralson
Cossandra Shackelford – Live Healthy Haralson
Denise Taylor – Live Healthy Haralson
Dr. Shade' Owolabi – Emory Prevention Research Center
Dr. Clarise Hernandez – Emory Prevention Research Center

Both of these USALEEP Data Workshops lasted approximately five hours, and were facilitated by the lead researchers from Cook County Family Connection—Dr. Chet Ballard and Zoe Myers, both of whom are experienced sociologists and professional instructors. Partners from Healthcare Georgia Foundation, Georgia Health Decisions, and the Partnership for Southern Equity assisted in steering group discussions that focused on socioeconomic and health inequities. The purpose of the workshops were to

introduce partners to the USALEEP database; to share the findings and comparisons from the research study; to guide partners in utilizing and correlating their local life expectancy data to issues of health equity in their respective communities; and to generate honest dialogue between the partners about the inequities and disparities that affect life expectancy. Both workshops centered around a similar agenda as follows:

- Introduction to USALEEP data and methods of research
- Slide presentation of data findings, comparisons, and observations
- Open discussion session: *What do we see in terms of causation or correlation between social determinants of health and life expectancy estimates? Why are certain areas in our communities faring worse in social and health indicators? How do environmental factors, physical geography, and even heredity also affect outcomes and life expectancy in certain areas of our communities?*
- The role of trauma in health outcomes and life expectancy (including personal trauma, community trauma, and environmental trauma)
- Open discussion session: *How can we use these data findings to generate new strategies in our communities? What is the significance of racial or ethnic inequities within this data? In what ways can we use these findings to spark meaningful conversations among our stakeholders and decision-makers?*

Of the 42 individuals who participated in one (or both) data workshops, 100 percent indicated that the workshop was “*extremely beneficial*” for their work in improving rural health equity; and all eleven directors of the community partnerships committed to using the data findings to steer the efforts and strategies of their work. There was a high level of enthusiasm and robust participation in both workshops, and individual feedback from participants was very positive. Qualitative comments workshop participants are included at the end of this report.

COHORT FOLLOW-UP

During the period from January to May 2020, CCFC project staff maintained monthly contact with leaders from the eleven community health partnerships to document the on-going impact and local significance of the USALEEP data as they were using it within their counties. These contacts were made via conference calls, personal phone calls, electronic communications, and a few face-to-face meetings. The CCFC project staff offered technical assistance to partners upon request, and four of the partnership leaders visited the CCFC research team to delve deeper into their local data and examine issues specific to their communities. By the end of May 2020, all eleven of the cohort partnerships had hosted either a community meeting, lunch-and-learn session, or special gathering to share the data results with their diverse community partners. For example, the Cook County partnership hosted a lunch-and-learn data session for 31 community leaders; the Appling County partnership hosted a “Pie and Charts” gathering to present the data to 28 community leaders; and the Miller County partnership collaborated with Miller County Family Connection to host a Collaborative Data Review for 30 community leaders. Across the eleven-county cohort, at least 308 community leaders and partners participated in some type of data presentation to receive local data reports and review the implications of their data. The efforts to spread and share the data findings more broadly were well underway when the coronavirus pandemic brought social gatherings to a sudden halt in March 2020. For example, the Lumpkin County partnership had shared the data within their collaborative team (about 28 partners), but had also scheduled a larger Lumpkin By The Numbers community presentation that had to be cancelled because of the virus outbreak. A few partnerships were also planning community-wide Census 2020 events where data findings would have been featured, but those events were also cancelled because of health and safety concerns. While these events would have further expanded the reach and impact of the data reports, it is important to note that the 308 community leaders engaged in data presentations was still a slightly higher number than originally proposed. NOTE: Another South Georgia county (Brooks County), which is not included in the eleven-county cohort, had a tremendous interest in this data process and requested that the CCFC research team conduct a technical assistance session for their Family Connection partnership. To

collaborate with this neighboring county, the CCFC team gathered and compiled basic data for that county also and presented a two-hour USALEEP data training for 16 community leaders of the Brooks County Family Connection Partnership. Including those individuals in the total numbers, the project then actually reached a total of 324 rural community leaders across Georgia.

AGGREGATE FINDINGS AND EVALUATION

In May 2020, the CCFC research team compiled and published an aggregate data report that compared and contrasted life expectancy and health data indicators among the eleven target communities. That report was shared electronically with leaders of the eleven partnerships and with state-level partners from Healthcare Georgia Foundation, Georgia Health Decisions, Emory Prevention Research Center, and the Partnership for Southern Equity.

This report serves as the final project evaluation which will allow the evaluation team, funders, and partners to assess the results, accomplishments, challenges, and findings of this data research project. This report is also being shared electronically with state-level partners at Healthcare Georgia Foundation.

The processes and methods of the research compiled, published, and disseminated by Cook County Family Connection is easily replicable, especially for groups who function as cohorts or networks across different geographic areas but share common goals related to health equity. To facilitate replicability, the process of this project was documented through a process notebook that captured all artifacts from project activities and efforts. That notebook includes copies of all communications, meeting minutes, planning session notes, data collection sources, methodologies, project photography, and media. The notebook provides a chronological story documenting the *Who, What, When, Where, and How* of every activity that occurred during this research process. Not only did that notebook allow evaluators and project leaders to easily review the process of this project, but it has the potential to serve as a primer for other cohorts who may wish to replicate the efforts of this project.

QUALITATIVE FEEDBACK

Throughout this project, the CCFC research team collected comments and feedback from leaders of the eleven cohort partnerships, from individuals who participated in data workshops, and from state-level partners engaged in the rural health equity initiative.

Following are some of those candid comments:

- “How impressed I was with your data presentation! To be quite honest, I was not expecting the high level of critical information that you provided for us about our sweet little county. The material was a game changer for sure... you have absolutely motivated us and inspired me to reach for more ways to help our clients and families. What a true inspiration!”
- “You and the Cook County team did an amazing job with this project. The benefits will be long lasting and demonstrate the powerful stories that can be elevated with data and community engagement. Thanks for all the hard you and the Cook County team did to pull off an awesome meeting and remarkable data.”
- “Thank you for such an amazing data workshop! As a researcher, I know it was not an easy task. I came away with lots of notes and websites and numbers. Thank you for the information.”
- “I just wanted to say thank you again for your awesome work on the life expectancy data you shared with us last week. The data is so very interesting and will no doubt prove valuable as we continue health equity work in our county.”
- “This census tract data and presentation should be shared not only with local stakeholders but also with regional and state partners broadly. Using the concept of place and utilizing this micro-level data, we can engage influencers from various census tracts and neighborhoods to carry our messages and serve as trust-builders in our communities.”
- “Understanding census tract data allows us to target specific areas for changes in policies and systems. By knowing, from the data, that the majority of our violent crimes occurred within the same census tract, we can have discussions with law enforcement leaders about new strategies for that area.”
- “Thanks to your team for putting together such a detailed and powerful report for our county. Our partners were moved and even saddened by some of the data, but at the same time motivated to find new solutions.”

- “The fact that you thread issues of trauma into discussions about data and life expectancy is significant—the impacts of trauma are deep and broad, and they affect the health and wellness of individuals, families, and communities.”
- “We are so excited about the data reports you prepared for our county. We have a meeting of our Complete Census Count Committee tomorrow, and this report will be front and center! This data is the prime example of why a complete census count is important for our county.”
- “This data is eye-opening and even heartbreaking. It shows us that people across our county, even living within a few miles of each other, have very different realities and different health outcomes and different life expectancies. Place does matter in terms of opportunities, equities, and outcomes!”
- “The data is helping to shape our local policies and strategies in order to make the biggest impact and close gaps at a root level. It allows us to see problem areas and to focus on challenges that might not be apparent at first glance. The report is a great and quick way to share data with stakeholders and motivate them to create change.”