



COMMUNITY PARTNER ASSESSMENT

2025

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Acknowledgements

We extend our sincere gratitude to all of the community partners who took the time to complete the Community Partner Assessment. Your insights, perspectives, and ongoing commitment to improving the health and well-being of Henry County are vital to the success of this work.

A special thank you to Sharon Meece, former Director of Community Health Services, for her leadership in developing and collecting the data that forms the foundation of this assessment.

Purpose

The Community Partner Assessment (CPA) is one of the three MAPP 2.0 assessments that helps tell the community story of health and well-being. It evaluates community partners in two distinct aspects:

1. Their individual systems, processes, and capacities to address health needs; and
2. The collective capacity of the network of partners to address health needs.

Identifying strengths and areas for improvement in these two aspects can support efforts to build, engage, and strengthen partnerships and partner capacity.

Methods

Henry County Health Department’s Director of Community Health Services utilized the MAPP 2.0 Community Partner Assessment Handbook to complete the process. The modified version of the CPA survey was distributed to Henry County Health Partners via Survey Monkey. Survey questions were adjusted or removed based on Henry County’s specific demographics and partner landscape. The survey was emailed to over 150 individuals within the Henry County Health Partners Coalition in September 2024, and a total of 51 responses were collected.

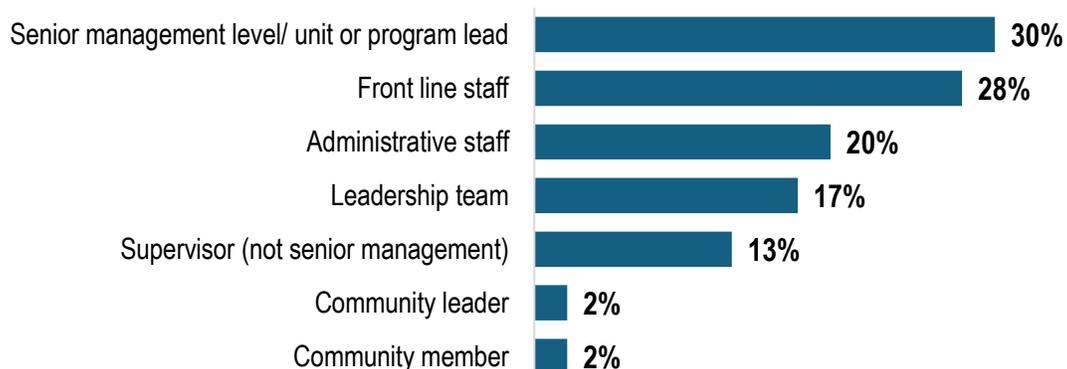
About Partner Organizations

The 51 CPA responses represented 31 different organizations across Henry County. Respondents were from a variety of different sectors including:

- Community organizations
- County and state government
- Education
- Faith-based
- First responders
- Healthcare
- Mental or behavioral health
- Non-Profit
- Social services

These organizations serve a variety of populations, including low-income individuals, older adults (65+), people with disabilities, individuals with chronic diseases, youth, individuals with limited English proficiency, veterans, employers, and the general Henry County population.

Responses By Organizational Position



Key Findings

- **Strong Existing Partnerships and Engagement**
 - Over two-thirds of organizations who responded have experience working in coalitions to improve health and/or implement programs. This shows a solid foundation of collaboration in Henry County. Nearly all respondents are currently active in the Henry County Health Partners Coalition, with many serving on a community health improvement workgroup. This is a strength as many partners have established working relationships reducing barriers to collaboration.
- **Diverse Approaches and Program Areas**
 - Respondents utilize a broad range of strategies to serve residents of Henry County, such as providing services, communication and education to the public, organizing, coalition-building, and advocacy. They also focus on a variety of health initiatives including mental health, healthcare access, nutrition, medical services, and substance use. With a variety of strategies and initiatives being done by partners, this shows a strength of increased capacity to improve the health of all residents.
- **Increased Focus on Policy and Expanding Cross-Sector Partnerships**
 - The survey showed a limited use of policy and systems changes by partners, representing an opportunity to build capacity and comfort in this area through training and support. Additionally, the survey showed a lack of partnership with groups that focus on arts and culture. By bringing these organizations to the table, it would broaden the coalition membership and enrich strategy development.

Partnership Strengths and Areas of Opportunity

According to the CPA survey, the top three reasons why individuals want to be a part of a community health improvement partnership like Henry County Health Partners are:

1. To improve health for those who live in Henry County (70%)
2. To obtain or provide services for the community (61%)
3. To pool resources to improve health (59%)

These reasons reflect a strong commitment to community health and provide a solid foundation for collaboration across organizations working to improve health in Henry County. Respondents were also asked about the benefits to their agency as a member of the coalition.

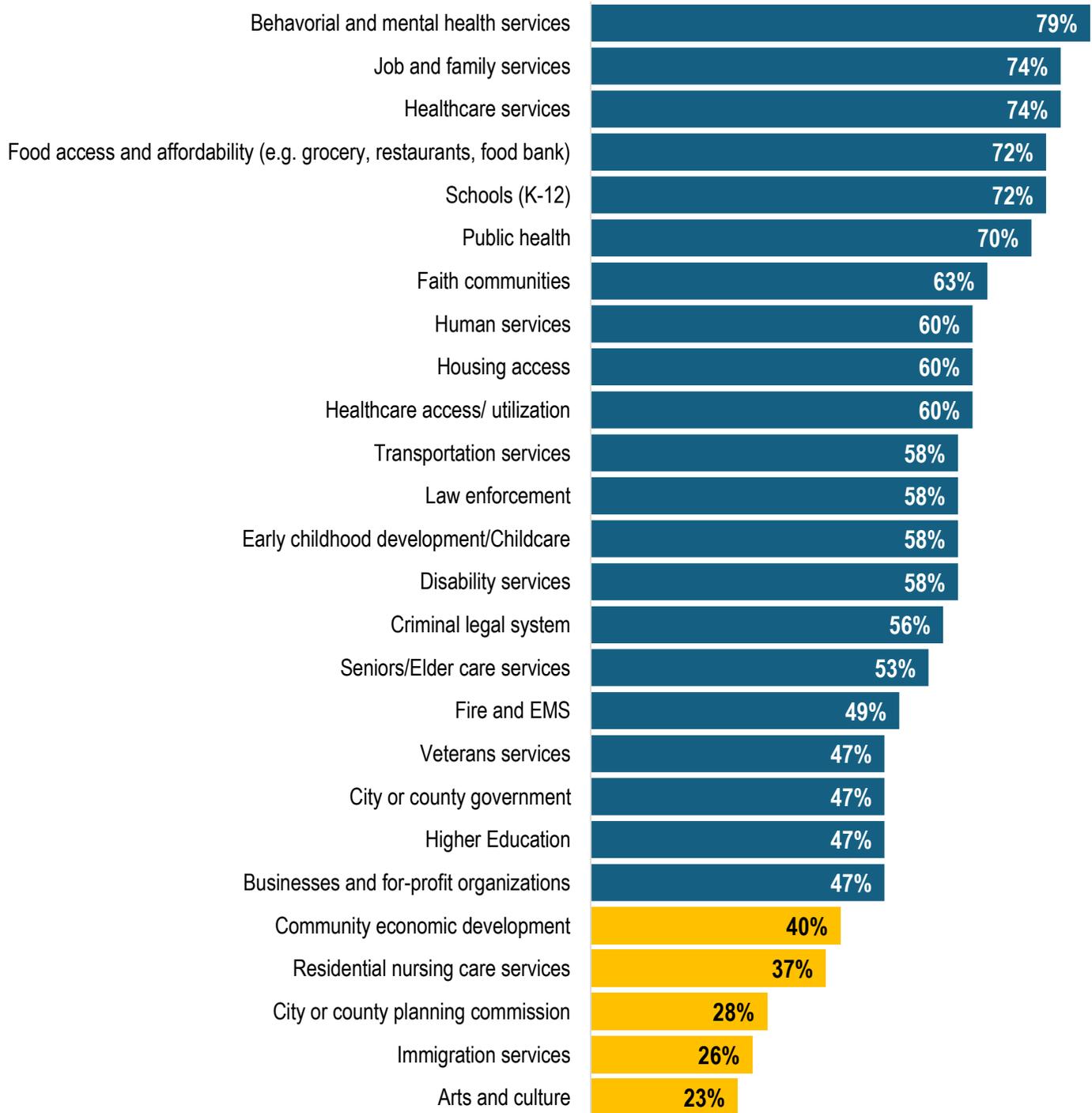
The top three benefits to being a part of Henry County Health Partners included:

1. Connections to other organizations (96%)
2. Improving health conditions for the community (85%)
3. Access to data and positive publicity (54%)

These findings together indicate an overall strength for the Henry County Health Partners Coalition with members recognizing both community-wide and organizational benefits from coalition involvement. This shows that respondents are committed to being a part of the coalition and willing to work together to complete strategies to improve the community's health.

More than two-thirds of organizations reported experience in organizing and implementing policy, actions, or programs. Additionally, 90% of respondents are either members of the Henry County Health Partners Coalition or actively participate in at least one of the four CHIP workgroups (substance misuse, housing, healthcare access, and/or mental health). This strong current involvement and experience in implementation shows the coalitions strong capacity to complete the health improvement plan and other work even as priorities shift.

Percent of Partners Who Work With Specific Sectors

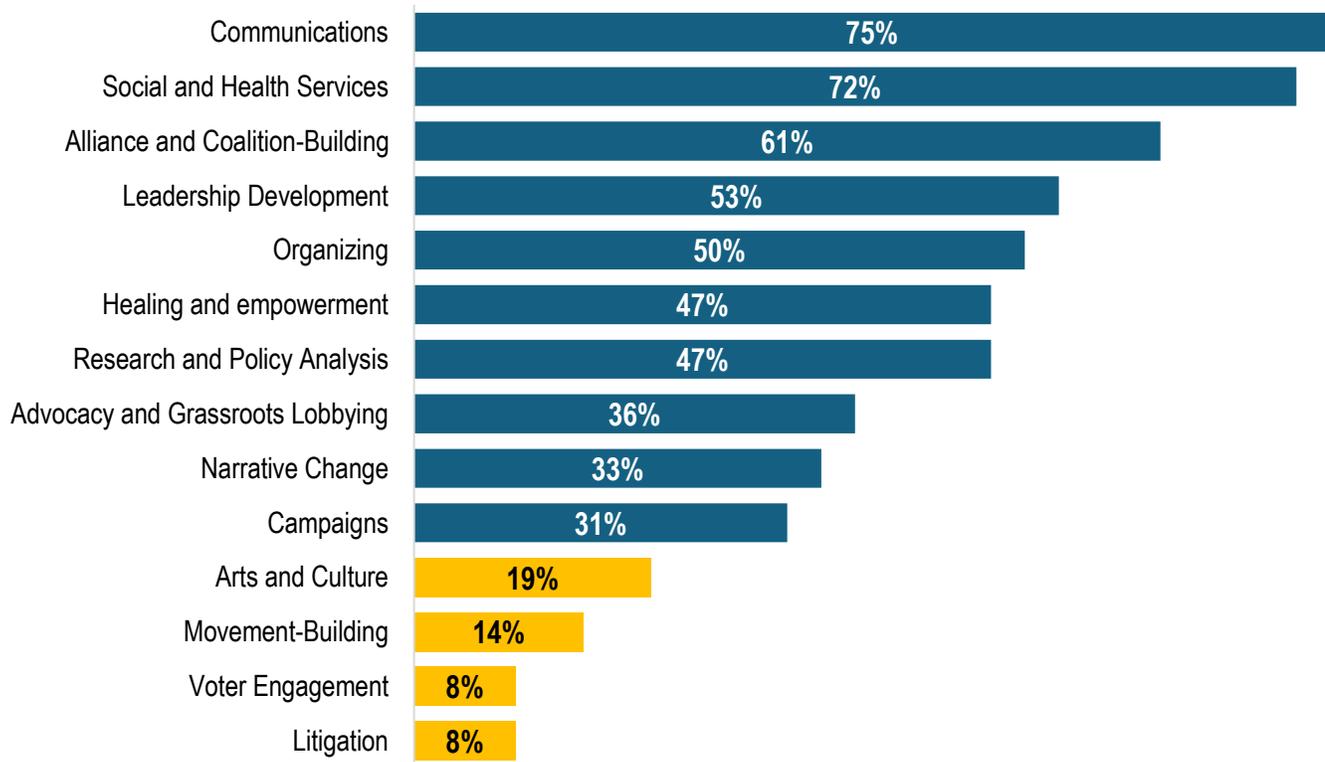


It is important that the coalition work to improve the health of Henry County by working across many sectors. While respondents represent a variety of sectors, opportunity still exists to engage those $\leq 40\%$. These include arts and culture, immigration, residential nursing care services and city or county planning commission. Engaging these partners could bring new insights and resources to the coalition's efforts.

Within the survey, partners were asked which strategies they utilize to perform their work within the community.

- **Communications:** Messaging that resonates with communities, connects them to an issue, or inspires them to act.
- **Social and Health Services:** Providing services that reach clients and meet their needs (including clinical and healthcare services)
- **Alliance and Coalition-Building:** Building collaboration among groups with shared values and interest.
- **Leadership Development:** Equipping leaders with the skills, knowledge, and experiences to play a greater role within their organization or movement.
- **Organizing:** Involving people in efforts to change their circumstances by changing the underlying structures, decision making processes, policies, and priorities that produce inequities.
- **Research and Policy Analysis:** Gathering and analyzing data to create credibility and inform policies, projects, programs, or coalitions.
- **Healing and empowerment:** Addressing personal and community trauma and how they connect to larger social and economic inequalities.
- **Advocacy and Grassroots Lobbying:** Targeting public officials either by speaking to them or mobilizing constituents to influence legislative or executive policy decisions.
- **Narrative Change:** Harnessing arts and expression to replace dominant assumptions or stigmas related to a community issue.
- **Campaigns:** Using organized actions that address a specific purpose, policy, or change.
- **Arts and Culture:** Nurturing the multiple skills of an individual through the arts and encouraging connection through shared experiences.
- **Movement-Building:** Scaling up from single organizations and issues to long-term initiatives, perspectives, and narratives that seek to change systems.
- **Litigation:** Using legal resources to reach outcomes that further long-term goals.
- **Voter Engagement:** Connecting, organizing, and voter-management strategies to build a strong base during election cycles.

Percent of Organizations Using Strategies to Perform Work



Respondents are clearly skilled in many different strategies, a key strength in the health improvement planning process. However, fewer partners reported using systemic policy change, legal advocacy, or arts and culture approaches. Targeted recruitment and training in these areas could strengthen the coalition's reach and impact.

Nearly all respondents reported collecting data about their clients or services. The top areas of data collection included:

1. Demographic information (76%)
2. Social determinants of health data (65%)
3. Evaluation or performance data (62%)

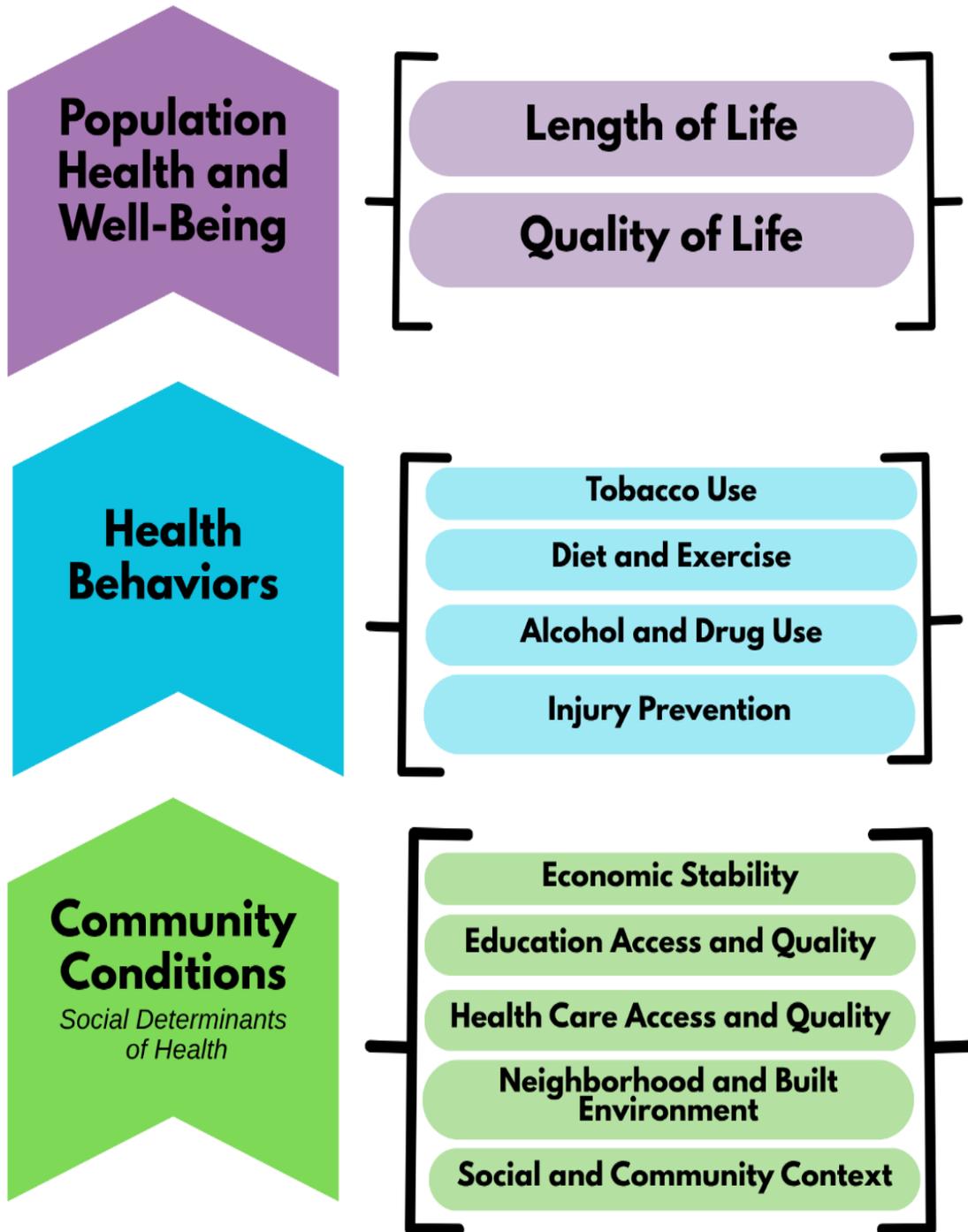
This level of data collection supports evidence-based planning. However, data sharing remains a challenge, with 45% of respondents unsure whether they could share data with the partnership. This highlights a key area for improvement.

Framework Strengths and Areas of Opportunity

Partner organizations have a variety of strengths across the three areas that shape our health:

1. Population Health and Well-Being,
2. Health Behaviors, and
3. Community Conditions (also referred to as, Social Determinants of Health).

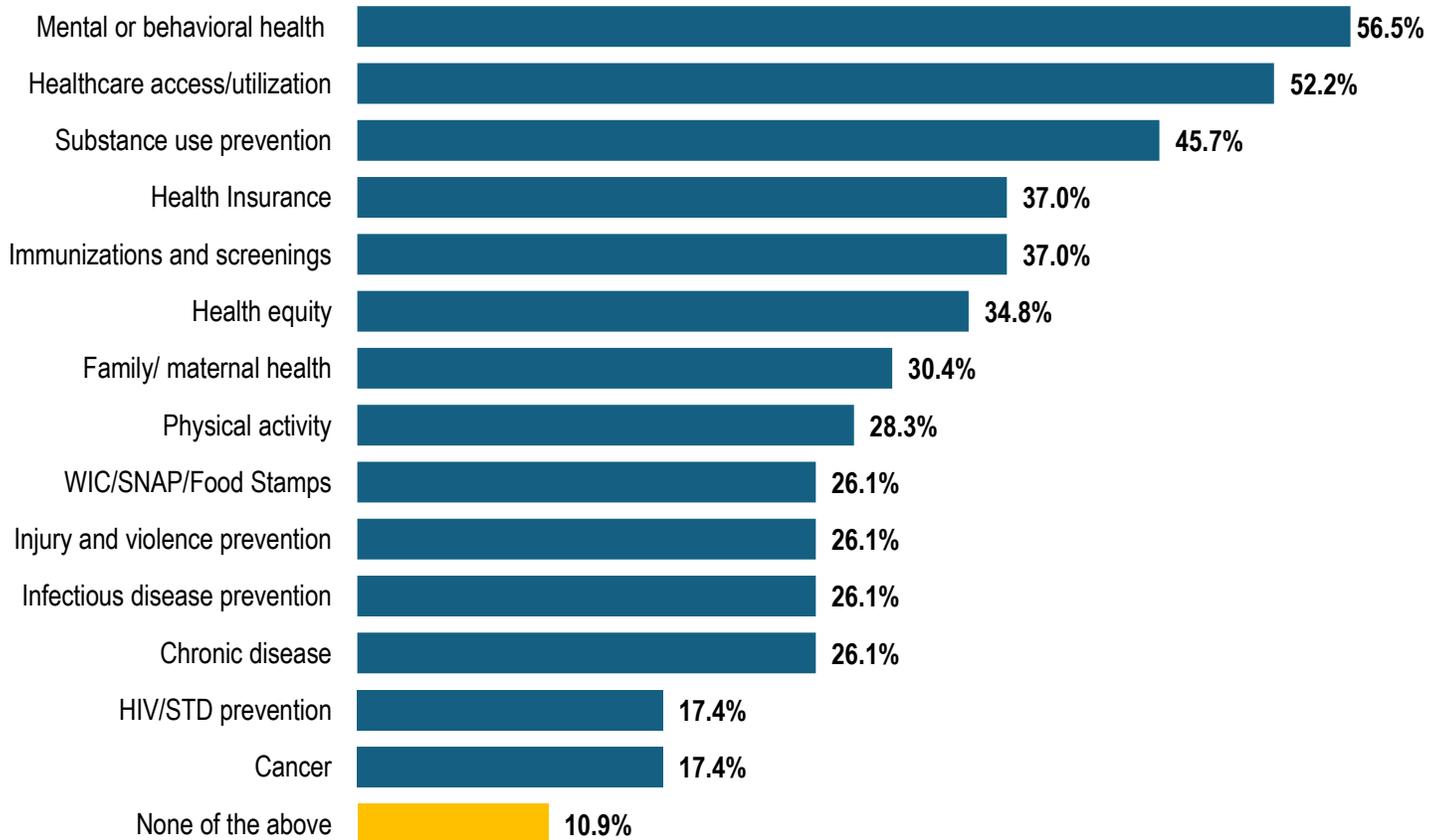
This model of health broadens the understanding of the forces impacting the health of all residents.



One notable strength is that the responding partner organizations are engaged in a wide range of health topics across the overall framework. Over half reported focusing on mental health and/or healthcare access, demonstrating that the coalition is not limited to a single issue but brings diverse perspectives to addressing the health needs of Henry County residents.

This variety allows for expertise across multiple health areas, enabling each organization to contribute toward the shared goal of a healthier Henry County. It's important to note that partners were able to select more than one focus area in the survey.

Partner Organization's Health Initiatives



While many organizations were able to select a specific health initiative, an area of opportunity is further investigation of those who selected “none of the above”. These partners may not realize they are engaged in initiatives possibly linked to overall population health and well-being, health behaviors, or community conditions that impact health.

Additionally, respondent trends may be due to the current health improvement planning focus areas (substance misuse, mental health, healthcare access, and housing), suggesting another area of opportunity is to recruit outside of the coalition’s priorities.

When asked questions on the framework area of Community Conditions, or Social Determinants of Health (SDOH), partners rated their focus on each domain using a scale from 0 to 100, where:

- 100 = Strong focus
- 50 = Some focus
- 0 = No focus

For reporting consistency, a score of 70 or higher (70±) indicates a strong organization focus on that domain.

Organizational Focus on Social Determinants of Health



Most respondents reported a strong focus across all five domains: Economic Stability, Education Access and Quality, Health Care Access and Quality, Neighborhood and Built Environment, and Social and Community Context. Social and Community Context had the strongest emphasis with 78% scoring 70±. Although Education Access and Quality had the lowest percentage at 59%, it still received meaningful attention from respondents.

Moving ahead, an opportunity for improvement to raise scores across all SDOH domains include more focused trainings.

Next Steps

The results of the Community Partner Assessment will be incorporated into the Henry County Community Health Assessment report to highlight the coalition’s strengths and opportunities and guide the future community health improvement priorities to ultimately build a more effective coalition to improve the health of Henry County.