Healthy Sacramento Coalition
Leadership Team Meeting

February 26, 2014
HSC Member Survey Highlights

Results from the 2012-2013 Member Survey
Purpose of Survey

- Learn perspectives of coalition members
- Inform decisions about coalition operations
- Establish a baseline for future evaluation
- Contribute to report to CDC
Survey Topics

- Organizational benefits or challenges of coalition participation
- Coalition priorities and strategies
- Knowledge and learning
- Leadership and management
- Communication

Source: Coalition surveys by Erin Kenney & Shoshanna Sofaer (2000) and by Pacific Institute for Research and Evaluation (www.udetc.org/surveyandcommunity.asp)
Respondents

- Distributed to 139 members, representing over 70 organizations
- 42% response rate (58 respondents)
Respondents continued

- Diverse organizational members represented
  - Nonprofit (not health-specific) – 16%
  - Health advocacy – 14%
  - Community-based organization—12%
  - Others: under-represented groups, higher education, public health agencies, faith-based organizations, community clinics, other
Benefits of Participation in HSC for You/Your Organization

Greatest “Benefits”

- Being part of an effort to improve health in Sac. Co.: 70%
- Developing collaborative relationships: 47%
- Staying well informed: 47%
- Accessing target populations with whom we previously had little contact: 30%

Least “Benefit”

- Benefits of Participation in HSC for You/Your Organization
  - No Benefit
  - A Little Benefit
  - Some Benefit
  - Great Benefit
  - Not Applicable
Problems of Participating in HSC for You/Your Organization

Greatest “Problems”

- Not taking any meaningful action: 36% (No Problem), 35% (A Minor Problem), 17% (A Major Problem), 12% (Not Applicable)
- Not using my skills and time well: 38% (No Problem), 41% (A Minor Problem)

Least “Problems”

- Competing with my organization for resources: 62% (No Problem), 12% (A Minor Problem), 12% (A Major Problem)
- Not getting enough public recognition: 59% (No Problem), 19% (A Minor Problem), 16% (A Major Problem)
- Often the only voice representing my viewpoint: 59% (No Problem), 17% (A Minor Problem), 19% (A Major Problem)
Do you feel you have adequate knowledge about:

Health disparities: 89% Yes, 11% No
Policy strategies: 77% Yes, 23% No

Has the coalition helped you learn more about:

Health disparities: 67% Yes, 33% No
Policy strategies: 75% Yes, 25% No
Perspectives on Coalition Priorities and Strategies

- Plans have potential to reduce health disparities: 13% Disagree/Strongly Disagree, 4% Agree/Strongly Agree, 5% Don't Know.
- Coalition agrees on coalition priorities: 15% Disagree/Strongly Disagree, 5% Agree/Strongly Agree, 5% Don't Know.
- Coalition shares understanding of the problems we are addressing: 16% Disagree/Strongly Disagree, 5% Agree/Strongly Agree, 5% Don't Know.
- Significant progress could be made without the coalition: 37% Disagree/Strongly Disagree, 12% Agree/Strongly Agree, 12% Don't Know.
Perspectives on Coalition Decision-Making Process

**Most “Agreement”**

- Fair decision-making process: 71%
- Good decisions: 67%
- Clear/explicit procedures for decision-making: 56%
- I have a voice in decisions: 58%

**Most “Disagreement”**

- Fair decision-making process: 13%
- Good decisions: 9%
- Clear/explicit procedures for decision-making: 13%
- I have a voice in decisions: 20%

*Disagree/Strongly Disagree* | *Agree/Strongly Agree* | *Don't Know*
Influence in Deciding Coalition Actions and Policies

- **Steering Committee**
- **SH Foundation**
- **Workgroups**
- **Coalition Members**
- **CDC**
- **Leadership Team**
- **Health Educ. Council**

Legend:
- Don't Know
- No Influence
- Some Influence
- A Lot of Influence
Perspectives on Coalition Leadership

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<tr>
<th>Statement</th>
<th>Disagree/Strongly Disagree</th>
<th>Agree/Strongly Agree</th>
<th>Don't Know</th>
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<tbody>
<tr>
<td>Keeps the coalition focused</td>
<td>4%</td>
<td>84%</td>
<td>13%</td>
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<td>Works collaboratively with coalition</td>
<td>11%</td>
<td>76%</td>
<td>13%</td>
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<td>Is respected in the coalition</td>
<td>6%</td>
<td>75%</td>
<td>20%</td>
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<td>Creates appropriate balance of responsibility</td>
<td>20%</td>
<td>57%</td>
<td>24%</td>
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<td>Advocates strongly for its own opinions and agendas</td>
<td>31%</td>
<td>44%</td>
<td>26%</td>
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The work of the paid staff supports the work of the coalition (74% agree, 18% disagree, 7% don't know).
The coalition is well managed (70% agree, 15% disagree, 16% don't know).
People know the roles of staff as compared to coalition members (43% agree, 38% disagree, 18% don't know).
Perspectives on Coalition Communications

**Most “Agreement”**
- Timely notification of meetings: 92%
- Respect for differing opinions: 89%
- Informative e-newsletter: 87%

**Most “Disagreement”**
- Effective communications with the community: 37%

- Disagree/Strongly Disagree: 7%
- Agree/Strongly Agree: 92%
- Don't Know: 0%

- Disagree/Strongly Disagree: 4%
- Agree/Strongly Agree: 89%
- Don't Know: 7%

- Disagree/Strongly Disagree: 8%
- Agree/Strongly Agree: 87%
- Don't Know: 6%

- Disagree/Strongly Disagree: 37%
- Agree/Strongly Agree: 38%
- Don't Know: 24%
Areas for Celebration

- Sense of common purpose
- Learning about health disparities and policy strategies
- Overall operations
- Internal communication
Areas for Improvement

- Make clearer progress toward goals, making best use of coalition members’ time and skills
- Clarify decision-making and other procedures, including role of staff
- Improve communications with external audiences