SALIENT FINDINGS FROM

COMMUNITY DISCUSSIONS ABOUT

PLANNING FOR

THE LAKEWOOD WELLNESS FOUNDATION

Prepared by

The Community Engagement Subcommittee of

The Lakewood Wellness Foundation Task Force

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INTRODUCTION

PURPOSE

This report summarizes the salient findings from discussions held to better understand local perceptions about the planning process for the new Lakewood Wellness Foundation. [1] The discussions took the form of one-on-one interviews and small group discussions (referred to as "panels" in this report).

The intention of the discussions was to promote community engagement in the Lakewood Wellness Foundation planning process at an early enough point to ensure that comments and suggestions were taken into account from the beginning of the planning process. It was agreed by the Task Force that this was to be only a first step in communicating with the public, to be followed by additional opportunities for community engagement.

We remind the reader that what follows is qualitative, not quantitative market research. Therefore, in this report there won't be numbers or percentages such as would be seen in, for example, a political or product survey; the sample size is much too small for a reliable measurement of that sort. Nor are cross-tabulations possible.

What is included in this report, however, are a series of themes and patterns of thinking that came through quite clearly. To the extent possible, also included is an indication of frequency of mention, which sheds some light on the importance of a particular response to participants.

The Lakewood Wellness Foundation is deeply appreciative of the graciousness, time and insights offered by so many of the people that were contacted.

METHODOLOGY

The Community Engagement Subcommittee's primary concern in developing the list of people to be interviewed/on a panel was to ensure that as many segments of the Lakewood community as possible were included. To that end, a list of sixteen population/issue groups was developed; organizations and people representing or affiliated in some way with these Lakewood groups were then added to the list. Those who were interviewed (referred to as

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[1] This may or may not be the name of the new Foundation; it is the name being used until plans are final.

"participants" in this report) were promised that no names would be attached to specific comments.

One appendix includes a list of the sixteen population/issue groups; a second appendix lists the Lakewood organizations that were represented. If you don't see a particular organization on the list of participants, it is very likely that efforts were made to schedule them, but with no success; for example, they may have been out of town, tied up on an important project, or otherwise unavailable.

The difference between one-on-one interviews and panels was more a matter of practicality than any other factor. That is, if it was feasible to put together a group of people representing a particular population/issue group that was done, largely to make the number of discussions more manageable. The same set of questions was used in both types of discussions. One-on-one interviews tended to last about one-half hour, while panels typically ran for an hour or more.

The discussions were led by volunteer members of the Community Engagement Subcommittee. These members are: Phyllis Osol Dykes (Chairperson), Michael Bentley, Daniel Cohn, Martha Halko and Brittany O'Connor. Also facilitating some interviews/panels was Randell McShepard, consultant to this phase of planning.

RESULTS

In total, this report reflects the salient findings from:

>   47 interviews and panels. There were 35 one-on-one interviews and 12 panels.

>   58 organizations were represented, and there were also about 10 individuals who were not representing a particular organization.

>   A total of 87 people participated in either a one-on-one interview or on a panel.

MEANINGS OF "WELLNESS" AND "HEALTH"

Participants were asked what the terms "health" and "wellness" mean to them. There were many connotations, pointing to the need for The Lakewood Wellness Foundation to define these terms if they're used in the Foundation's name, mission or other important communications.

There were, however, a few things that just about everyone agreed on:

> **"Health" and "wellness" are interconnected and interdependent, but they're not the same thing.**

> **"Wellness" was frequently defined as "bigger" than "health," encompassing more, and going beyond the body's medical condition.** Health was perceived as being one's current medical condition, while wellness is "a goal to be the best I can be." Some expressed the perception that wellness is less quantifiable and more related to well-being than health.

Looking more closely at what participants said about **"wellness,"** a generally agreed upon pattern emerges as to what the term means to most participants:

> It's holistic, encompassing mental, social and physical health.

> It refers to quality of life, achievement in life.

> Proactive prevention measures and chronic disease management are the foundation of wellness.

> Several participants expressed their belief that wellness promotes good health.

> The most frequently given examples of what constitutes wellness included: lifestyle; safety; physical activities; drug, alcohol and tobacco use; environment; housing; jobs; and economic resources.

"Health" generally was perceived as being:

> The body's physical or medical condition.

> Most agreed it is doctor-related, and requires health care services at certain points in life.

> Some said health includes behavioral health, while others did not agree.

> Some perceived health as being the absence of illness, while others defined it as illness-related.

Some participants made the point that whether wellness or health was the focus, there are certain **maxims that hold true for both:**

Basic needs must always be taken into account when considering wellness or health.

Cultural competence and linguistic appropriateness are required in either case.

There are quite a few unconnected "pockets" or "enclaves" in the Lakewood community, and the degree of social disconnection should be greatly reduced.

GREATEST HEALTH AND WELLNESS CHALLENGES

Participants agreed that there are quite a few health and wellness challenges in Lakewood, and they focused on eight. They also agreed that while many efforts are being made to address the city's health and wellness challenges, there are gaps in the programs and services being offered.

Following are the most frequently mentioned health and wellness challenges, listed in the approximate order of frequency of mention:

Substance abuse -- This was mentioned in about half of the interviews/panels, with frequent reference to opioids and alcohol and drug addition.

Negative effects of low income and poverty, particularly as they relate to overall impact on wellness, lack of health insurance and access to preventive and chronic illness care.

Mental health issues.

Senior age-related issues, particularly isolation, access to doctors, and aging in place.

Lack of motivation to be healthy and educated about health, including importance of physical activity and detrimental impact of obesity.

Lack of coordination between programs and services -- Here or elsewhere in their discussions, several participants remarked that Lakewood needs a clearinghouse-type organization to help residents locate programs and services. They said there's no single place for residents to go to learn about all of the city's programs and services; instead, they have to search out programs and services one by one. For residents with mobility,

child care, linguistic, aging or transportation issues, as examples, the lack of a clearinghouse often proves to be an insurmountable problem.

"Disconnectedness" of refugee populations

Condition of some housing stock, including lead remediation.

PERCEIVED PURPOSE OF
LAKEWOOD WELLNESS FOUNDATION

All participants were asked what the purpose of the new Foundation should be. The responses varied, as might be expected when people are approaching an abstract concept for the first time. The overall lack of information about the Lakewood Wellness Foundation, however, indicated the importance of the Task Force establishing a communications program as quickly as possible, particularly because community input into the planning process is going to be sought.

No purpose was mentioned in a majority of the interviews/panels.

The most frequent response regarding purpose was that the new Foundation should improve and promote the health and wellness of all Lakewood residents. This was mentioned in about a third of the interviews/panels, spread fairly equally among the three major population/issue group segments (Demographic, Health-Related and Civic Influencers). [2]

Throughout many discussions, participants appeared to be favoring a purpose related to wellness, rather than health. (As previously reported, participants viewed health and wellness as inter-related, but different.) Some participants went so far as to say that the new Foundation shouldn't provide funding for health care services. We advise at least some caution in this matter, however. While a wellness focus appeared to be preferred, the name currently being used (i.e., Lakewood Wellness Foundation) could be influencing this inclination. This issue would be better resolved through quantitative research (that is, a survey).

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[2] These segments are explained in greater detail in Appendix I.

Often accompanying the above purpose or mentioned independently was **education and prevention as a means to promoting wellness**.

Some interviewees mentioned either **collaborating or partnering with other organizations, <u>not</u> duplicating existing services**. In conjunction with this, one idea suggested by some was establishing **a coordinating "clearinghouse"** to help Lakewood residents become aware of existing health and wellness opportunities; this concept was particularly well-liked in the health-related groups.

No other purpose was mentioned in more than a few discussions. These were: assessing and prioritizing the needs of the Lakewood community; helping a specific group such as families, seniors, refugees, youth and/or minorities; and building and maintaining a recreational/civic center such as ones in surrounding communities.

CONCERNS ABOUT THE NEW FOUNDATION

Many participants expressed concerns, or questions they'd like to have answered, about the Lakewood Wellness Foundation. In almost all instances, the questions raised are very reasonable, and the Lakewood Wellness Foundation Task Force will probably want to address these issues in communications with Lakewood residents.

In about one-third of the interviews/panels, the following three issues were mentioned at least once. The three issues are listed in the approximate order of frequency of mention.

> **What will the Foundation's decision-making process be?** Participants were interested in several aspects of the Lakewood Wellness Foundation's decision-making process. Most commonly mentioned issues were: Who will control the decision-making process? What process will be used to appoint a board? What assurances will there be that the board will be diverse and representative of the Lakewood community? Will the board make sure that both the board and services/ programs that are funded include marginalized members of the community such as refugees and lower income residents? How will the Task Force make sure it has a clear focus? What type of metrics will be used to ensure that grantees are accountable? How much control will the Cleveland Clinic Foundation have? Will Lakewood City Council have some type of oversight role?

The issue of decision-making was particularly important in the Health-Related and Civic Influencers categories.

How will the Lakewood Wellness Foundation be "different" from other organizations? Participants were quite concerned about duplication of efforts by the new Foundation. Those who talked about this issue indicated they want the Foundation to have a clear and unique purpose and focus. Several people expressed concern about what they perceived to be a "potential conflict" with the former Lakewood Hospital Foundation, which is currently being restructured. Some wanted to know why it's necessary for Lakewood to have two different foundations. A few worried that the two foundations might ultimately "comingle" their funds and that the only-Lakewood focus would be lost. Both the Demographic Segments and Health-Related categories were particularly concerned with the issue of duplication.

Are the Foundation's finances going to be a problem now and over time? Some participants wondered how much money the Foundation will be able to disburse each year, and what measures will be taken to ensure fiscal responsibility. Interestingly, participants' primary concern revealed an assumption that many participants seemed to be making at some point in the discussion with them. That is, participants wanted to know what type of fundraising arm will be developed for the new Foundation, and how the new Foundation will sustain itself, thus expressing the supposition that the Foundation will be sustained, rather than spending down its resources and closing. Several participants complained that often programs are established, become depended upon, and then are closed down because money runs out. They didn't want to see this happening in Lakewood. The issue of finances was very strong in the Civic Influencers category.

Other concerns that were expressed by several people were:

Is there a communications plan that addresses the issues of the new Foundation's development, transparency, unrealistic expectations and accountability? Both at this and other points in their discussions, participants were adamant about the need for communications with Lakewood residents. They want to know what the Task Force and then the new Foundation will do to make sure operations are transparent and accountable. Some mentioned that it's important to address the misperceptions and unrealistic expectations of many Lakewood residents, and it was evident in some of the discussions that misunderstandings do indeed exist. As just a few examples, some

people wanted to know what services will be provided by the new Foundation, and whether they'll be free, at least to low income and senior groups. Other participants suggested that the new Foundation's funds be used to build and maintain a recreation center for Lakewood. Yet others wanted to know what medical services would be offered at the Wellness Foundation.

How can the new Foundation avoid being dragged down by "politics" or infighting? Here, the operative point was that the closing of Lakewood Hospital could continue to be a divisive issue that could derail the best intentions for the Lakewood Wellness Foundation.

What assurances are there that the new Foundation will be embedded in the Lakewood community and coordinated with other services? Some participants also worried that at some point in the future, the new Foundation will merge with the former Lakewood Hospital Foundation, resulting in its funds being used for purposes outside of Lakewood.

There were other concerns and questions mentioned by participants, each mentioned only once and not representing a theme that emerged from the discussions.

In almost a fifth of the interviews/panels participants remarked that they don't have any concerns about the new Foundation, saying they trust the people on the Task Force to make good decisions and indicating that this is "a great opportunity for the city."

ENGAGING THE COMMUNITY IN THE DISCUSSION

It is very important to The Lakewood Wellness Foundation Task Force to engage as much of the community as possible in the planning process for the new Foundation. Therefore, participants were asked several questions about how the Task Force might best do this.

IMPORTANT POPULATION/ISSUE GROUPS TO TALK WITH

When asked what are the most important population or special interest groups for the Task Force to be in touch with, many participants agreed that "everyone is important." When pressed, there were seven groups that were mentioned most frequently, listed below in the

approximate order of frequency of mention. As it happened, all of these groups had been slated for contact by the Community Engagement Subcommittee.

Participants tended to talk more about the first two groups below, and that is why the balance of groups don't have additional comments.

Seniors -- Seniors were mentioned in almost half the interviews/panels, which is about twice as many times as the other groups that were mentioned. Seniors are perceived as a very important group in Lakewood, and several participants mentioned the difficulties seniors are facing as they try to "age in place" and find affordable transportation for doctors' visits and necessary shopping. Some said that the long-term importance of attracting millennials to Lakewood creates a competition for resources between the millennials and seniors.

Refugees -- Those who mentioned refugees generally described them as living in small groups that are socially disconnected from the rest of the city. It was generally agreed that the refugee population in Lakewood is both larger and also more in need of assistance than most realize.

Families

Children and Youth (including the Lakewood Schools)

Marginalized people of all types

Low income residents

Those suffering from (or treating) **mental health and/or addiction problems**

There were several other specific groups mentioned a few times, but almost all of them had been contacted for interview or panel discussions by the Community Engagement Subcommittee.

BEST WAYS TO ENGAGE RESIDENTS IN THE PLANNING PROCESS

Participants had many suggestions on how to engage Lakewood residents in the planning process for the Lakewood Wellness Foundation. Many people pointed out, however, that the Task Force won't be successful in engaging residents if a "one size fits all" communications approach is taken, their point being that different people respond to different stimuli.

Following are the most frequently suggested ways to communicate with and engage residents:

Gatherings of people -- This was mentioned in more than half of the interviews/ panels. Examples included: community meetings and forums; school events; community events or festivals; and neighborhood or block parties. Some suggested additional ways to entice people to attend the gatherings such as serve free food; offer child care; make it fun; and hold it at a church or other trusted organization.

On line -- This included social media such as Facebook and Twitter and other sites frequented by targeted groups. Email was mentioned, but not often. Some people agreed they tend to scroll through their email, deleting all but the ones that are from family, friends, or business contacts. Websites were also included in the discussions, but again not by many people. Market research has indicated that most people only go to a website if they want a specific piece of information or product. Some participants who talked about websites said they usually need a stimulus for going to a website (e.g., needing information, seeing an interesting ad for the website, wanting to buy a particular product). No one mentioned the Mayor's website and this omission, coupled with the participants' general lack of information about the Lakewood Wellness Foundation, seemed to indicate that if the Task Force wants to use this website to inform residents about the new Foundation, it will have to bring into play other communications vehicles to promote its use.

Direct personal contact -- This was a favored strategy by some participants and included: one-on-one discussions; door knocking; and coffee chats. A few people suggested that hiring a community organizer could go a long way toward boosting engagement.

During this and other parts of their discussion, several participants suggesting forming a Community Advisory Group.

Additional strategies mentioned by a few people each were: the water bill; newspapers and newsletters, surveys and focus groups, text messages, billboards and the US mail.

MOST IMPORTANT MESSAGES TO BE CONVEYED

Participants were asked what messages should be conveyed by the Lakewood Wellness Foundation Task Force. Their responses are listed below in the approximate order of frequency of mention:

We're inclusive -- We want everyone represented at the table. We want multiple, diverse and new voices.

We're listening to you

The Wellness Foundation is for everyone in Lakewood -- The new Foundation belongs to the residents of Lakewood, and the Foundation is for them only.

We're committed to transparency, communications and frank and frequent progress reports from the start and throughout the planning process.

Purpose and process of new Foundation -- What the Lakewood Wellness Foundation hopes to attain and why those goals were chosen. How this will help residents. How the Foundation will operate. How success will be measured.

Health and wellness are crucially important -- What they are and how they impact you.

Promote civic engagement -- Why it's important to become involved. Offer positive messages about Lakewood: unique, united, accepting, safe; and now it has the Lakewood Wellness Foundation to help with health and wellness strategies.

Foundation has limited resources -- Even though resources are limited, they can make a difference if put to good use. There will have to be compromises.

This process is more than "window dressing" or token inclusion

Know the facts about a target audience before addressing them

BUILDING TRUST

Participants offered many helpful suggestions on the best ways for the Task Force and later the new Foundation's board to build trust. In the approximate order of frequency of mention these recommendations were:

Communicate about the process on a regular basis and through various media; facilitate access to information (e.g., language interpretation, transportation); have someone "on the ground"; use as many media as possible; start (now) and then keep on being visible

Be transparent and credible; have open meetings; make information easily accessible; have information to back up claims

Engage all segments of the community; be inclusive; don't tokenize; make sure the composition of the board reflects the composition of the community; add some new faces

Don't allow what happened in the past to negatively impact future plans; work to engage people unhappy with the hospital closing; remember that everyone will never be happy; distance the new Foundation from the Cleveland Clinic to reduce antipathy about the past

Really listen to what people are saying; don't approach the planning process with preconceived notions; have forums for questions and feedback; give the people who opposed the hospital closing reasons to get on board

Set and communicate goals and show results that are positive for the Lakewood community; tell success stories

Follow through and be accountable; share details relating to funds

Find a unifying person to be the "face" of the organization; choose leadership very wisely

Be consistent

Be patient, building trust doesn't happen overnight

Hold some public meetings outside of City Hall; use convenient locations

WHAT THE TASK FORCE MUST KEEP IN MIND

At the conclusion of each discussion, participants were asked what are the most important things for the Lakewood Wellness Foundation Task Force to keep in mind as it moves through the planning process. Listed below are the responses, again in the approximate order of frequency of mention.

Be transparent

Be inclusive and promote diversity

Communicate the goals, the process, the results

Engage the community throughout the process

Don't duplicate existing programs

Determine the best way to use funds

Try to provide the social and emotional resources that the hospital provided, but that aren't there now

Analyze and review priorities periodically

Accept that some people will not embrace the new Foundation

Remember that Lakewood has a unique opportunity to be a "wellness community"

APPENDIX I: POPULATION/ISSUE GROUPS

The Community Engagement Subcommittee was committed to talking with as many population/issue groups as possible. A list of 16 of these groups was developed, and the Subcommittee, the Lakewood Wellness Foundation Task Force, and people who were interviewed suggested organizations and people who could represent the population/issue groups and provide helpful input.

For purposes of analysis, the groups were combined into three categories: demographic segments of the community (e.g., seniors, low income); those that are health-related (e.g., behavioral health and physical activity/recreation); and civic influencers (e.g., business, the faith community).

Demographic Segments:
- Diverse Races/Ethnicities
- Early Childhood
- LGBTQ Community
- Low Income
- Seniors
- Women
- Youth

Health-Related Segments:
- Behavioral Health
- Health
- Lakewood Hospital
- Physical Activity/ Recreation

Civic Influencers:
- Business
- Cultural
- Elected Officials
- Faith Community
- Philanthropy

APPENDIX II: PARTICIPATING ORGANIZATIONS

The Lakewood Wellness Foundation is deeply appreciative of the graciousness, time and insights offered by so many of the people that were contacted. The following list summarizes the organizations and people who participated in the interviews/panels.

Active Living Task Force

ADAMHS Board

Aids Funding Collaborative

Asia Inc.

Barton Center, Fedor Manor and Westerly Apartments

Beats Cycle and four additional businesses who wished to remain anonymous

Bike Lakewood

Build Lakewood

Catholic Charities

Cleveland Clinic Foundation

Cornucopia

Cuyahoga County Opioid Task Force

Early Ages, Healthy Stages

Elected Officials serving Lakewood (9 people)

Equality Ohio

Greater Cleveland Congregations (GCC)

H2O

HHS/City of Lakewood

Invest in Children (Cuyahoga County)

L.E.A.F.

Lakewood Alive

Lakewood Chamber of Commerce

Lakewood Community Services Center

Lakewood Congregational Church

Lakewood Division of Community Development

Lakewood Health & Human Services

Lakewood Outdoor Basketball Committee

Lakewood School District

Lakewood Senior Citizens Corp.

LECPTA (Lakewood Early Childhood Parent-Teacher Association)

Legal Aid

LGBT Center

Murtis H. Taylor Multi Service System

Neighborhood Family Practice

Northeast Ohio Black Health Coalition

Nueva Luz Urban Resource Center

Planned Parenthood

Policy Matters Ohio

Recovery Resources

Refugee Services Collaborative of Greater Cleveland

Save Lakewood Hospital/Keep Lakewood Strong

Senior Center/Division of Aging

Senior Transportation Connection (STC)

The West Temple

Turkish Cultural Center

U.S. Commission for Refugees and Immigrants

YMCA

Additionally, at least 10 Lakewood residents who were not representing a particular organization