

Precision Public Health Approaches to Reduce Disparities in Memory Disorder Screening in Rural Minority Communities



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FLORIDA STATE
UNIVERSITY



HealthStreet... a community engagement program to reduce disparities in healthcare and research through community and other stakeholder engagement.

UF HealthStreet 4 Pillars

DO -Screen for conditions/concerns

FOR -Better health
-Targeted interventions

DO -Give referrals
-Navigate to UF research

FOR -Access and parity
-Quality improvement
-Increased relevance and impact of research



DO -Measure research perceptions and trust

FOR -Breaking down walls
-Becoming a community

DO -Train the next generation
-Provide opportunities for communication within the Learning Health Community

FOR -Building and sustaining the Learning Health Community

UF HealthStreet Pillars

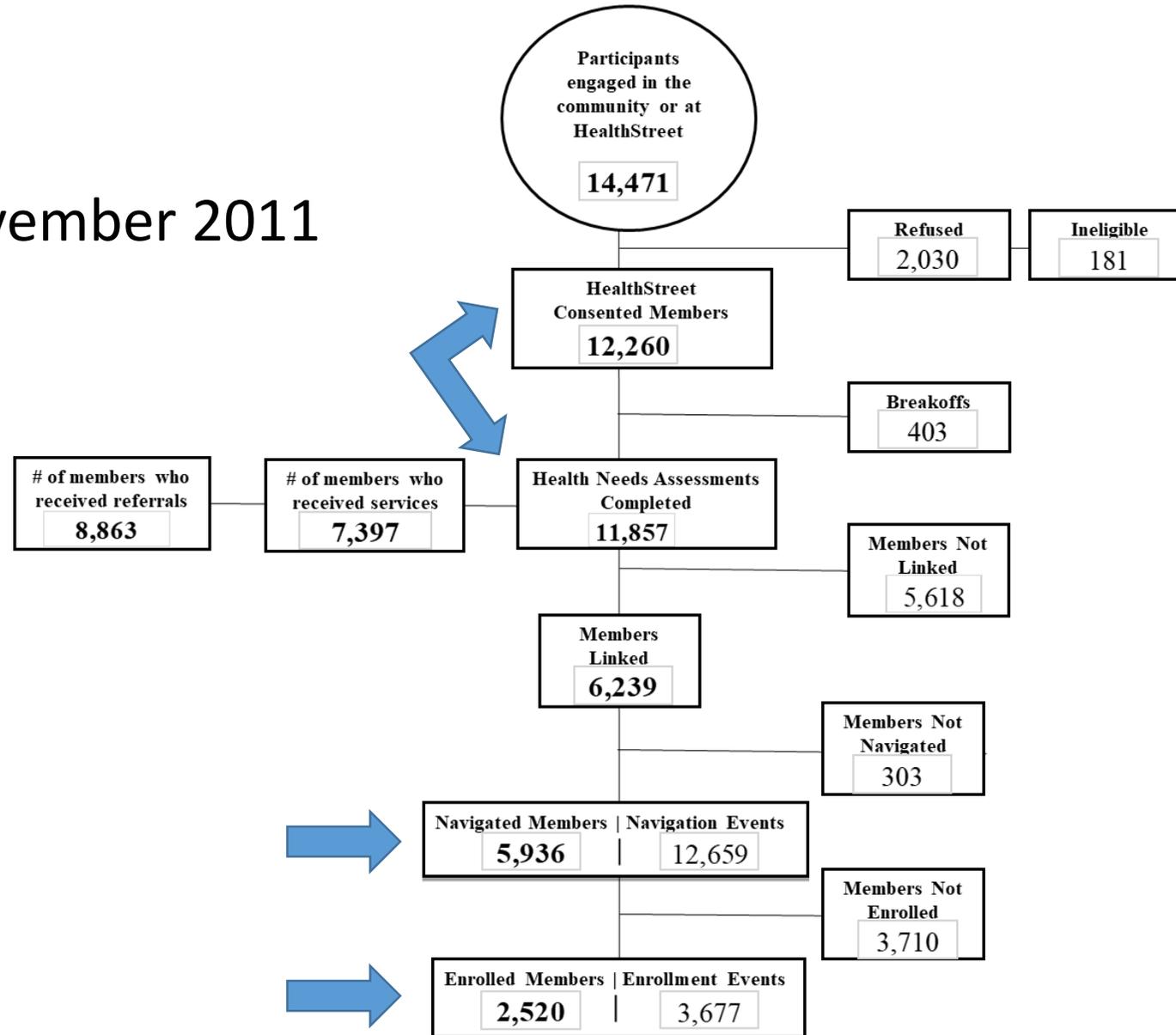
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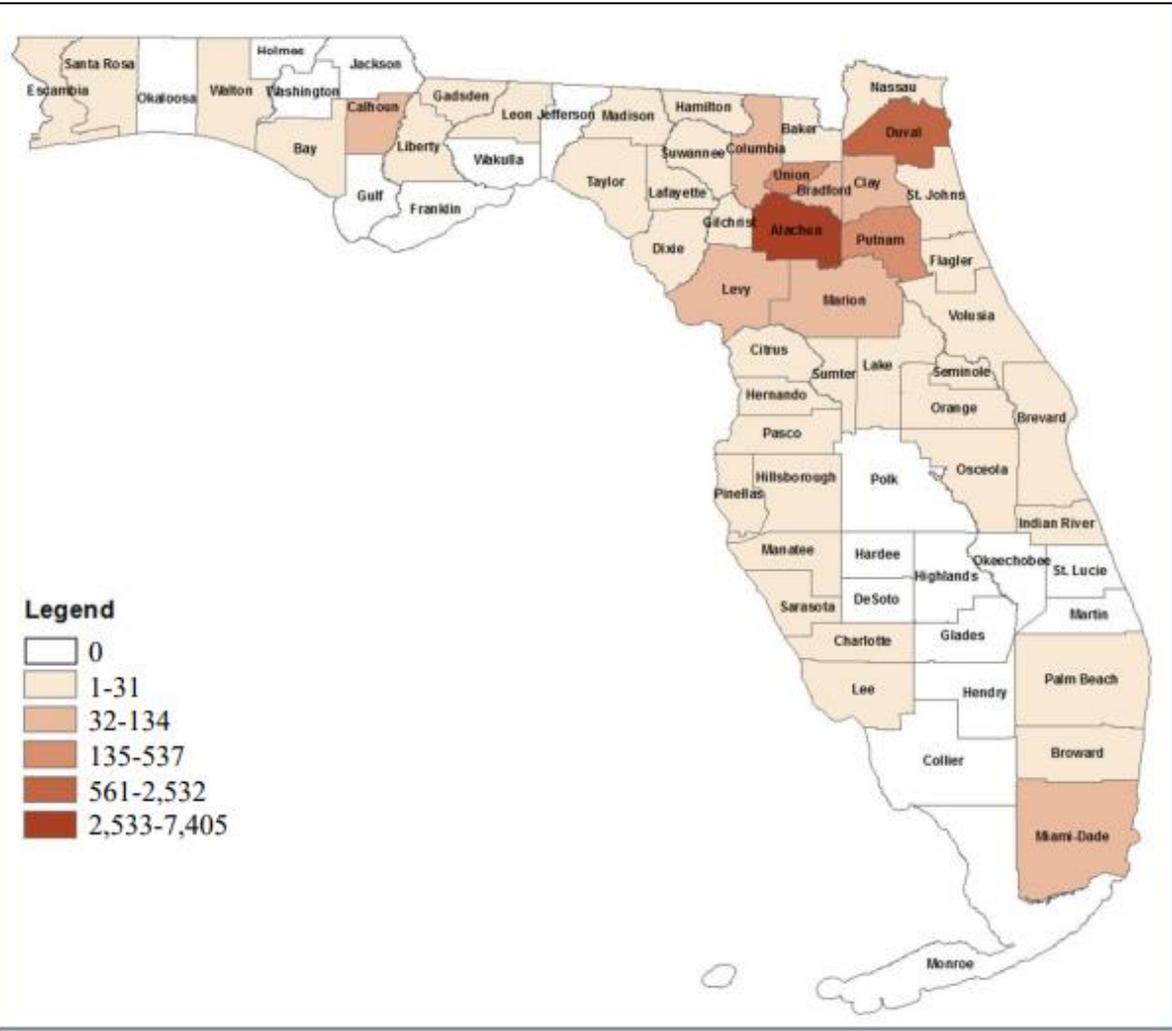


Assessment- Outcomes in HealthStreet

Since November 2011



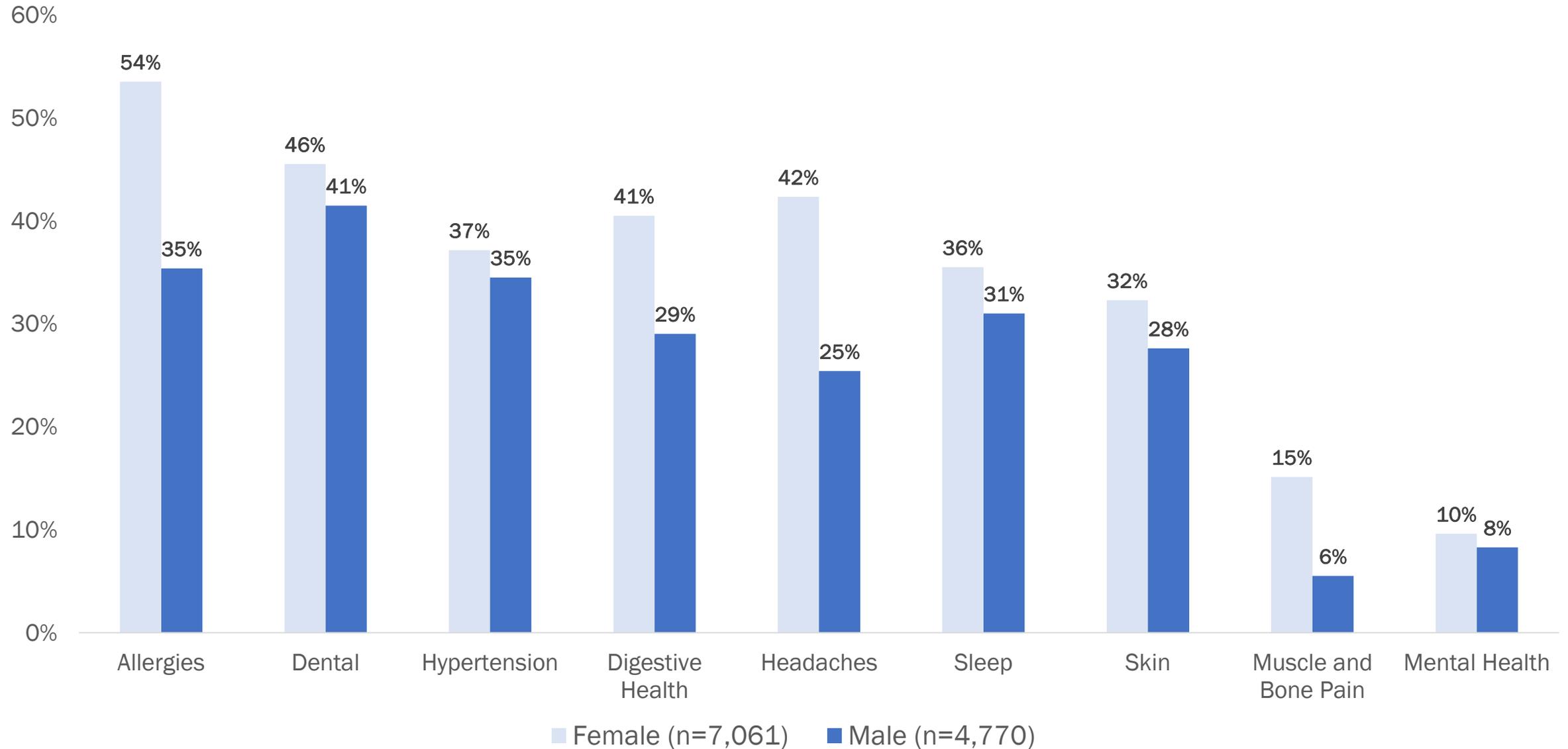
Assessment- Outcomes in HealthStreet Showing Diversity



Demographics			
	60%		BMI >30 38%
	80%		High BP 36%
AA	56%		Current Smoker 32%
	7%		Not Insured 36%
Not working	65%		ED past 6 mos. 32%

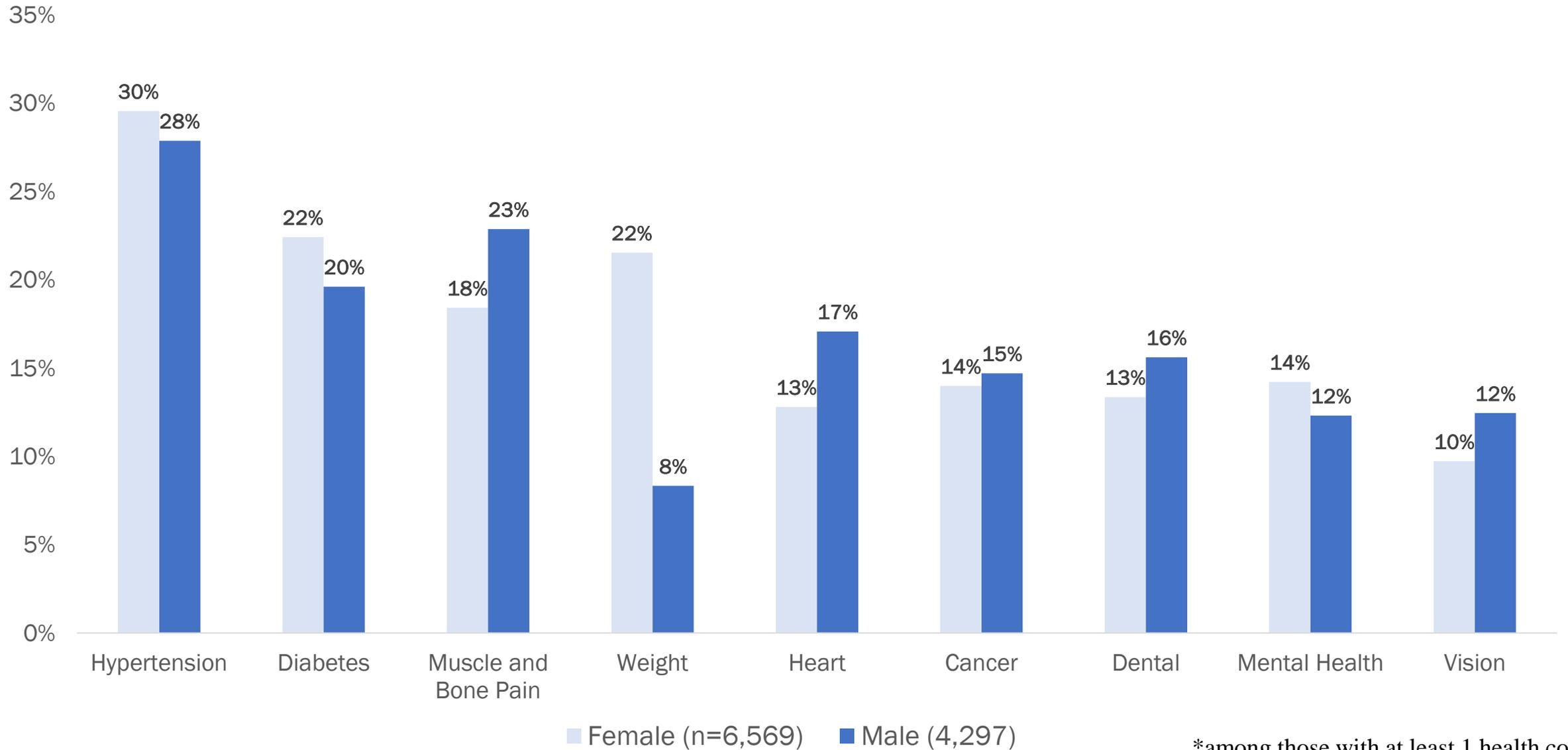
Assessment- Outcomes in HealthStreet

Reported Health Conditions of HealthStreet Members by Gender



Assessment- Outcomes in HealthStreet

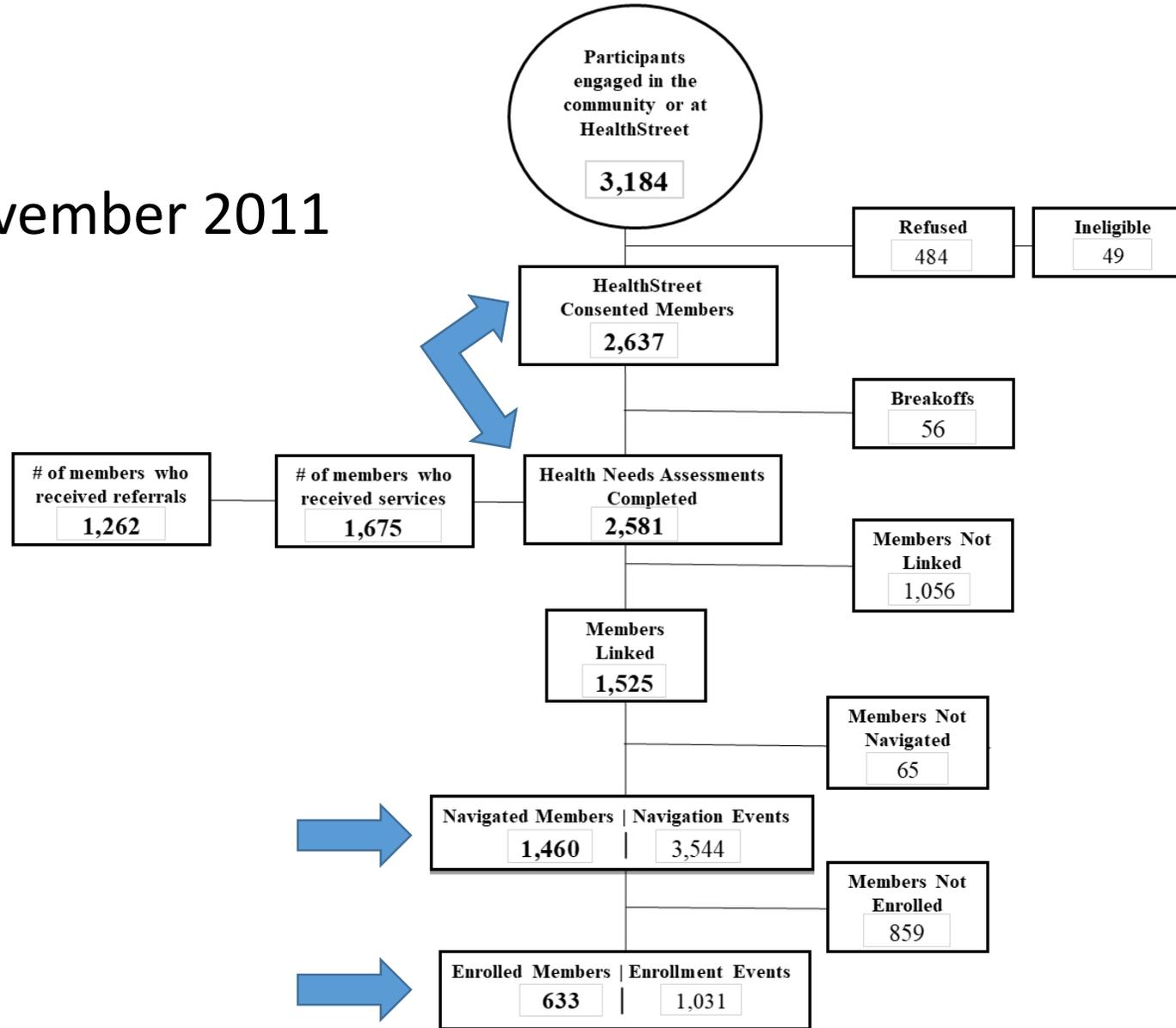
Reported Health Concerns of HealthStreet Members by Gender



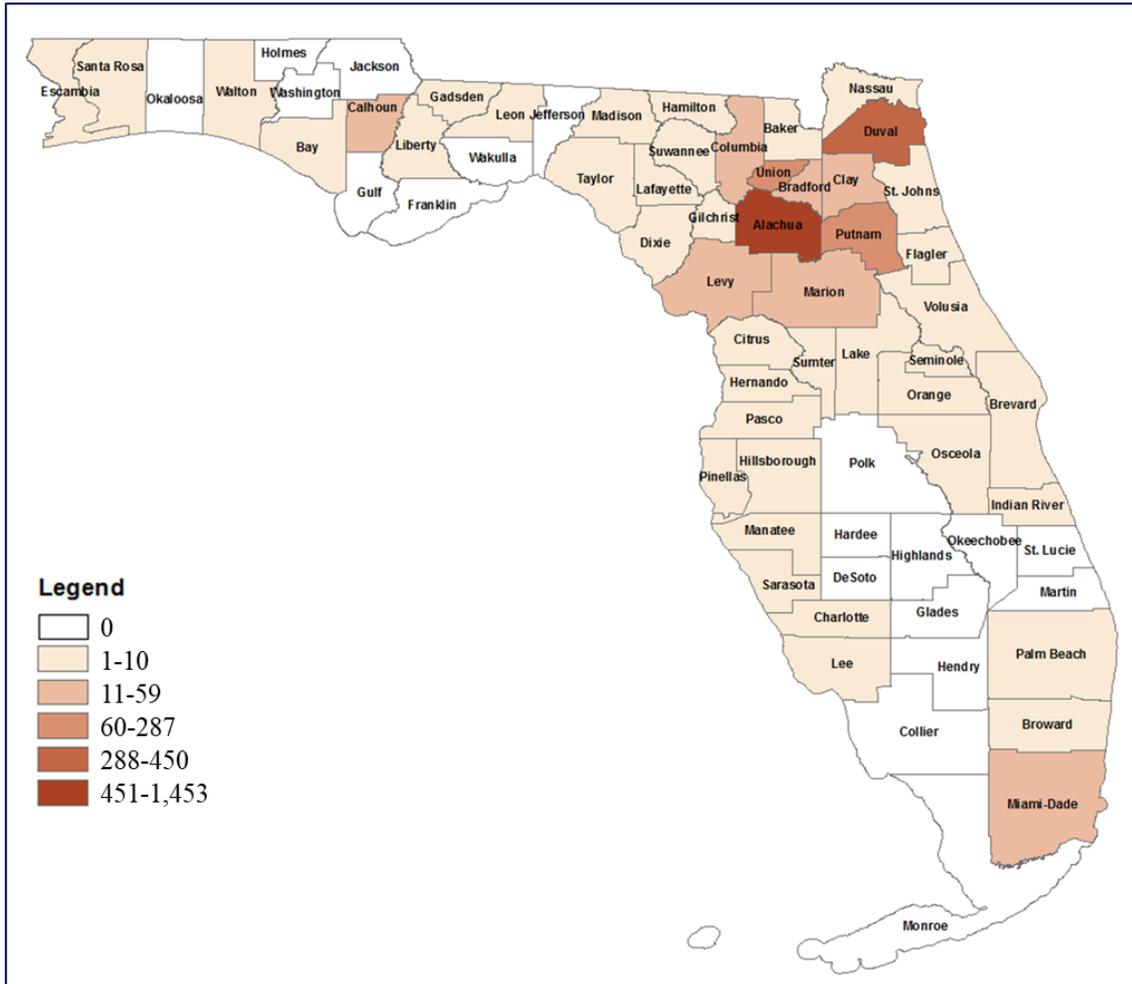
*among those with at least 1 health concern

Assessment- Outcomes in HealthStreet Older Adults

Since November 2011



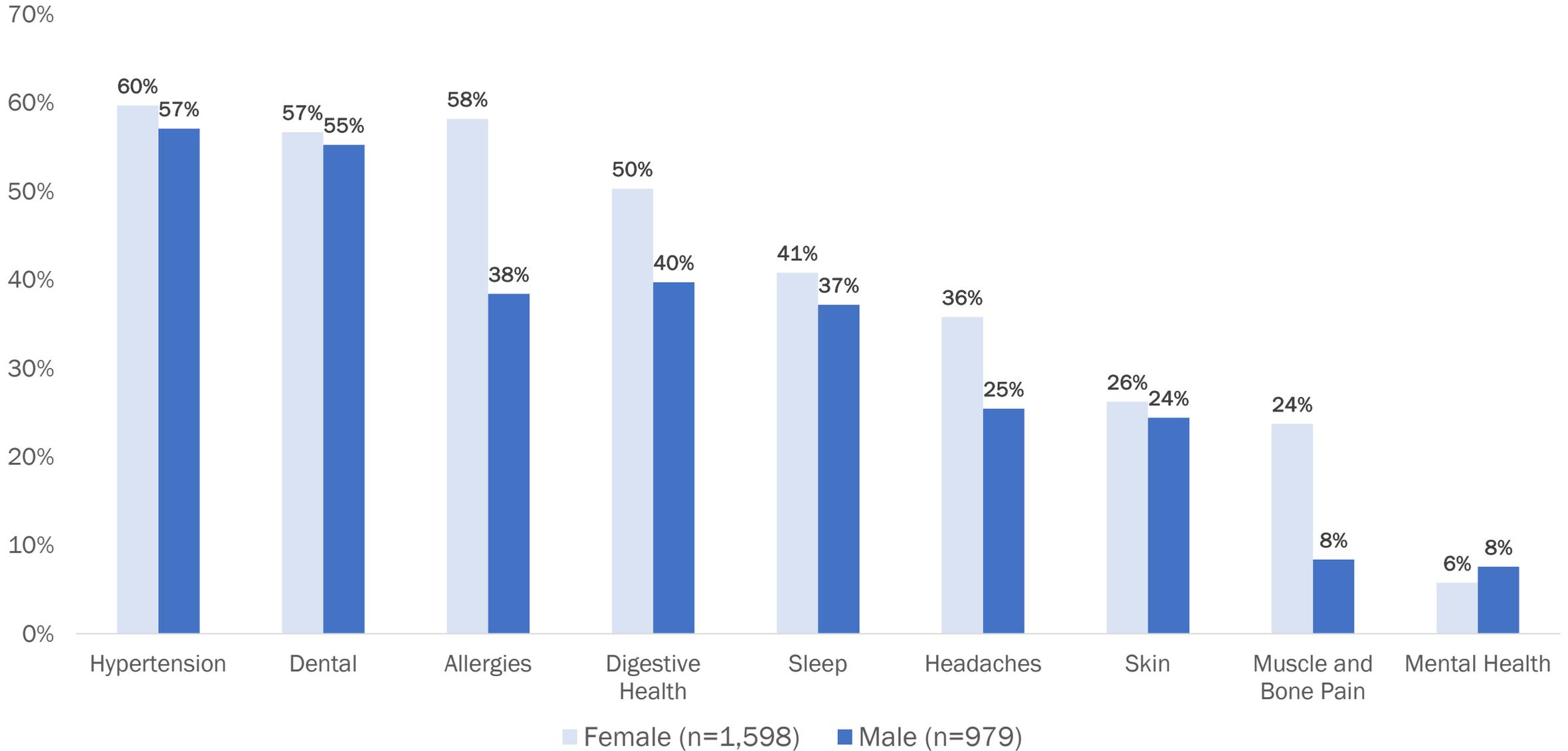
Assessment- Outcomes in HealthStreet Older Adults Showing Diversity



Demographics				
	62%		BMI >30	36%
	84%		High BP	59%
AA	44%		Current Smoker	18%
	7%		Not Insured	14%
Not working	82%		ED past 6 mos.	28%

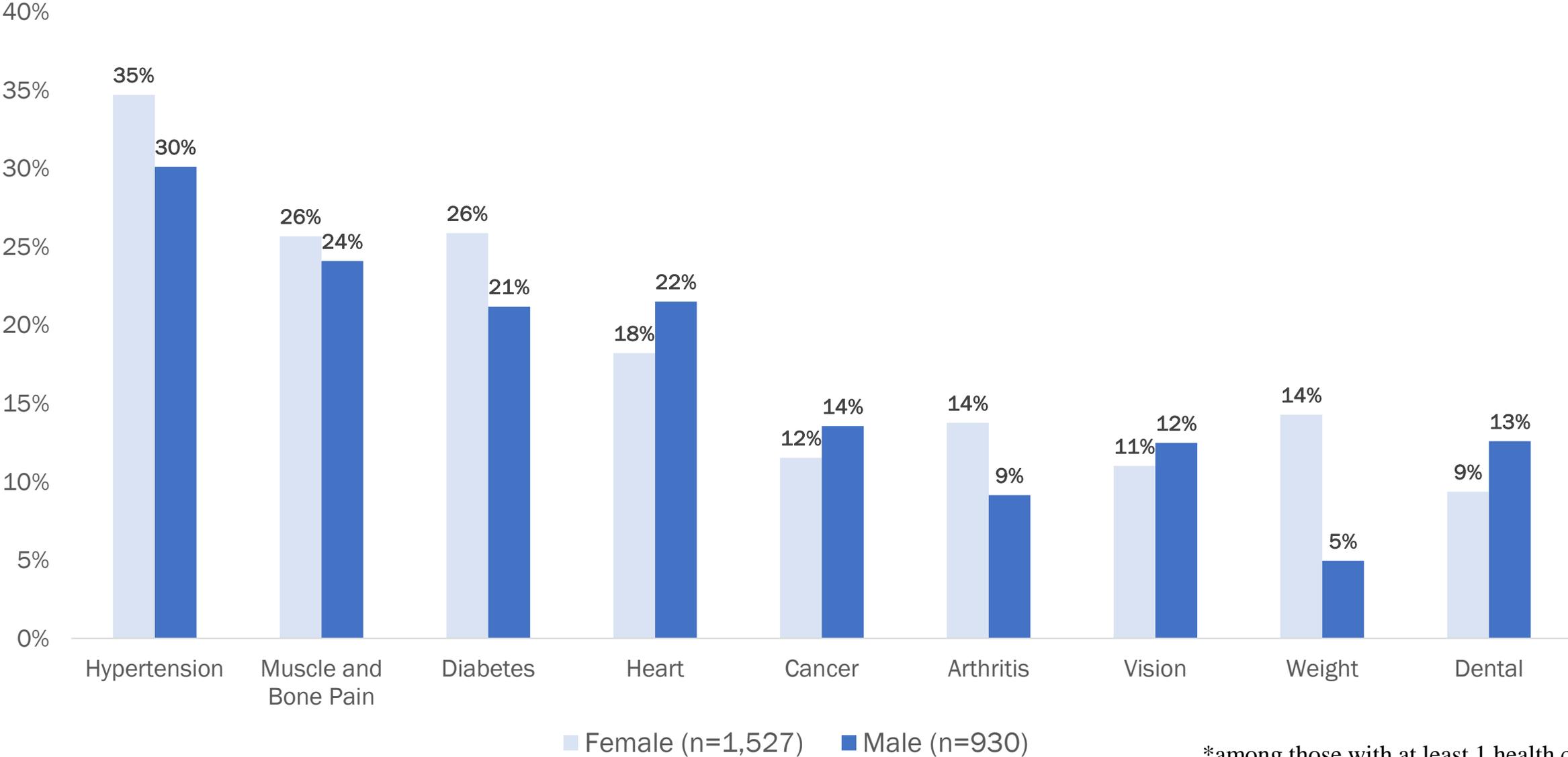
Assessment- Outcomes in HealthStreet Older Adults

Reported Health Conditions of HealthStreet Older Adults by Gender



Assessment- Outcomes in HealthStreet Older Adults

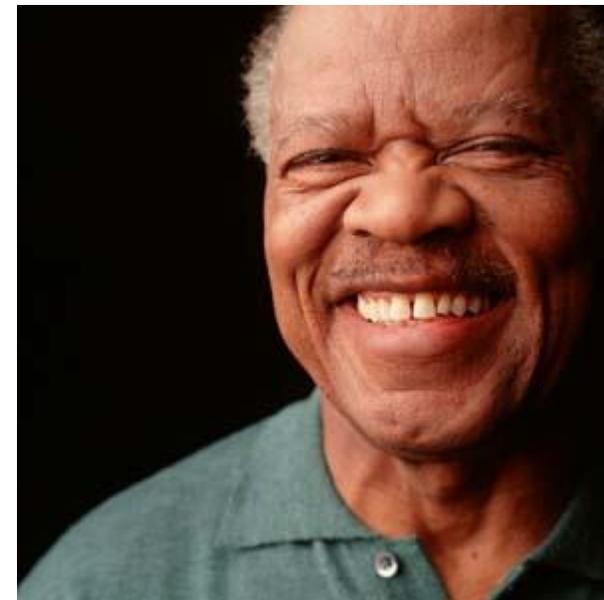
Reported Health Concerns of HealthStreet Older Adults by Gender



*among those with at least 1 health concern

Ed and Ethel Moore Alzheimer's Disease Research Grant Funded Project

- Assess Community Members for Cognitive Impairment
- Link them to Memory Clinics or Tx
- Develop the Older Adult Registry (>60 y/o)
- Train Physicians on Best Practices for MCI and dementia Tx
- 8 Rural Counties with High AD Mortality – working in partnership with FSU and Alachua County (n=9)



Ed and Ethel Moore Alzheimer's Disease Research Grant Funded Project

Total Florida Registry of Community Members Age 60 years and older		
	Target counties (since April 1, 2018)	All counties (since November 2011)
	n= 471	n= 2,581
Gender		
Female	285 (60.5%)	1598 (61.9%)
Male	186 (39.5%)	978 (37.9%)
Average Age		
Female: Mean (SD)	68.6 (7.3)	67.6 (6.9)
Male: Mean (SD)	68.5 (7.3)	66.9 (6.3)
Race/ Ethnicity		
Asian	5 (1.1%)	23 (0.9%)
African-American	124 (26.3%)	1124 (43.6%)
White	318 (67.5%)	1328 (51.5%)
Other	24 (5.1%)	105 (4.1%)
Latino/Hispanic *	24 (5.1%)	149 (5.8%)
Marital Status		
Never Married	58 (12.3%)	366 (14.2%)
Married	139 (29.5%)	775 (30.0%)
Divorced/Separated/Widowed	272 (57.7%)	1427 (55.3%)
BMI		
Female: Mean (SD)	29.3 (7.3)	29.5 (7.3)
Male: Mean (SD)	28.4 (5.3)	27.9 (5.5)
12+ years of education	404 (85.8%)	2169 (84.1%)
Currently Employed	76 (16.1%)	467 (18.1%)
Food Insecure (not enough money to buy food)	179 (38.0%)	993 (38.5%)

Montreal Cognitive Assessment

Older Adult Registry

Currently **2,581**

Members residing in
rural counties = 8.3%

Navigated to research = 1,460

Enrolled in research = 633

Enrolled/Navigated = 43%

MONTREAL COGNITIVE ASSESSMENT (MOCA)
Version 7.1 Original Version

Date: / /

Staff ID:



VISUOSPATIAL / EXECUTIVE		Copy cube	Draw CLOCK (Ten past eleven) (3 points)	POINTS					
		<input type="checkbox"/>	<input type="checkbox"/> Contour <input type="checkbox"/> Numbers <input type="checkbox"/> Hands	___/5					
NAMING									
		___/3							
MEMORY		Read list of words, subject must repeat them. Do 2 trials, even if 1st trial is successful. Do a recall after 5 minutes.	FACE	VELVET	CHURCH	DAISY	RED	No points	
		1st trial							
		2nd trial							
ATTENTION		Read list of digits (1 digit/sec). Subject has to repeat them in the forward order. Subject has to repeat them in the backward order.	[] 2 1 8 5 4			[] 7 4 2			___/2
		Read list of letters. The subject must tap with his hand at each letter A. No points if ≥ 2 errors.	[] FBACMNAAJKLBAFAKDEAAAJAMOF AAB						___/1
		Serial 7 subtraction starting at 100	[] 93	[] 86	[] 79	[] 72	[] 65	___/3	
		4 or 5 correct subtractions: 3 pts , 2 or 3 correct: 2 pts , 1 correct: 1 pt , 0 correct: 0 pt							
LANGUAGE		Repeat: I only know that John is the one to help today. [] The cat always hid under the couch when dogs were in the room. []							___/2
		Fluency / Name maximum number of words in one minute that begin with the letter F [] _____ (N ≥ 11 words)							___/1
ABSTRACTION		Similarity between e.g. banana - orange = fruit [] train - bicycle [] watch - ruler							___/2
DELAYED RECALL		Has to recall words WITH NO CUE	FACE	VELVET	CHURCH	DAISY	RED	Points for UNCUED recall only	___/5
		[]	[]	[]	[]	[]	[]		
Optional		Category cue							
		Multiple choice cue							
ORIENTATION		[] Date	[] Month	[] Year	[] Day	[] Place	[] City	___/6	
© Z. Nasreddine MD		www.mocatest.org		Normal ≥ 26 / 30		TOTAL		___/30	
						Add 1 point if ≤ 12 yr edu			

Alzheimer's Disease Knowledge and Research Interest

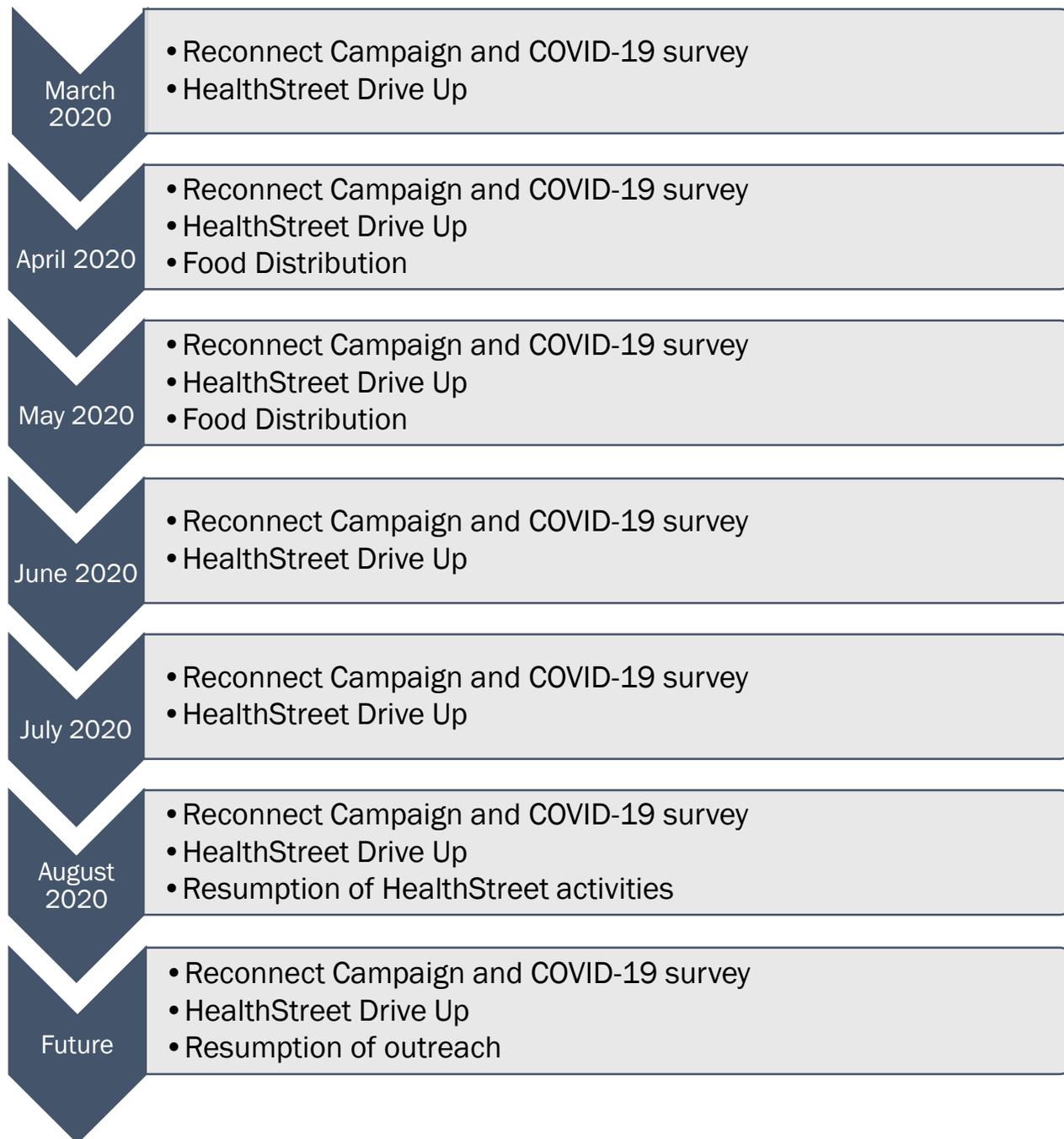
Alzheimer's disease knowledge score by level of education and interest in research

	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Total
	n= 40	n= 70	n= 47	n= 60	n= 70	n= 70	n= 46	n= 15	n= 418
Average Score on AD Knowledge (out of 13)	8.7 (± 2.1)	8.6 (± 2.8)	8.3 (± 2.8)	8.0 (± 3.1)	8.3 (± 2.8)	8.3 (± 2.6)	8.5 (± 3.0)	NA	8.4 (± 2.8)
Education									
<12 years	7.4 (± 2.2)	7.3 (± 1.5)	5.8 (± 3.6)	6.0 (± 5.0)	6.5 (± 2.5)	7.2 (± 3.4)	8.2 (± 2.7)	NA	7.1 (± 2.9)
12+ years	9.0 (± 2.0)	8.6 (± 2.9)	8.6 (± 2.6)	8.1 (± 3.0)	8.7 (± 2.7)	8.6 (± 2.4)	8.6 (± 3.1)		8.6 (± 2.7)
Interest in Research									
Not at all	11.0 (± 0.0)*	9.0 (± 5.7)	7.0 (± 2.0)	8.0 (± 0.0)*	6.2 (± 4.8)	8.6 (± 2.4)	7.4 (± 3.1)	NA	7.8 (± 3.3)
Maybe/ Definitely	8.6 (± 2.1)	8.6 (± 2.8)	8.4 (± 2.8)	7.9 (± 3.1)	8.5 (± 2.5)	8.3 (± 2.6)	8.7 (± 3.0)		8.4 (± 2.7)

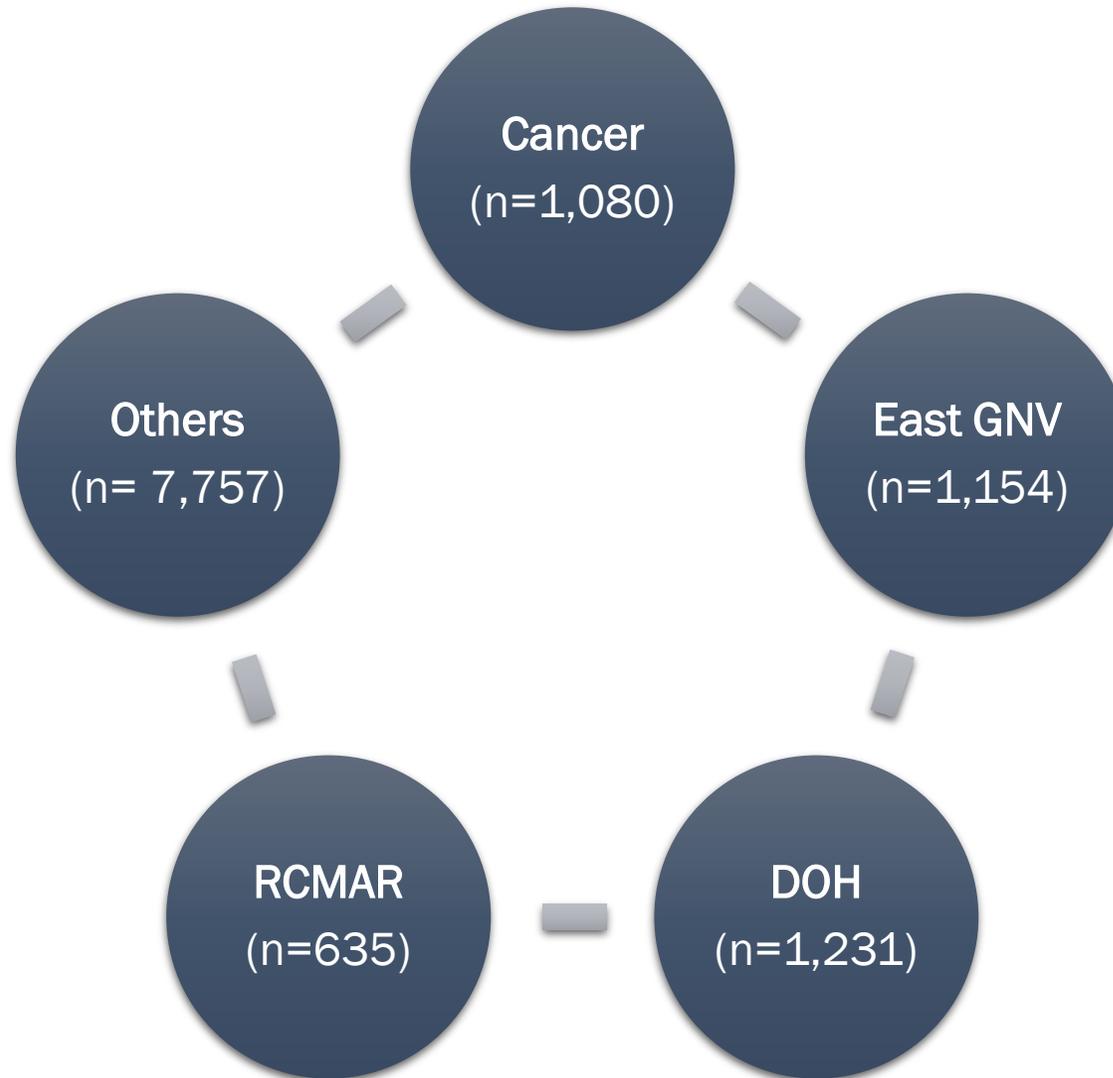
*Reflects one person's answer

Reconnecting throughout Time during the Pandemic
among all members

HealthStreet COVID-19 Timeline



HealthStreet Member Cohorts



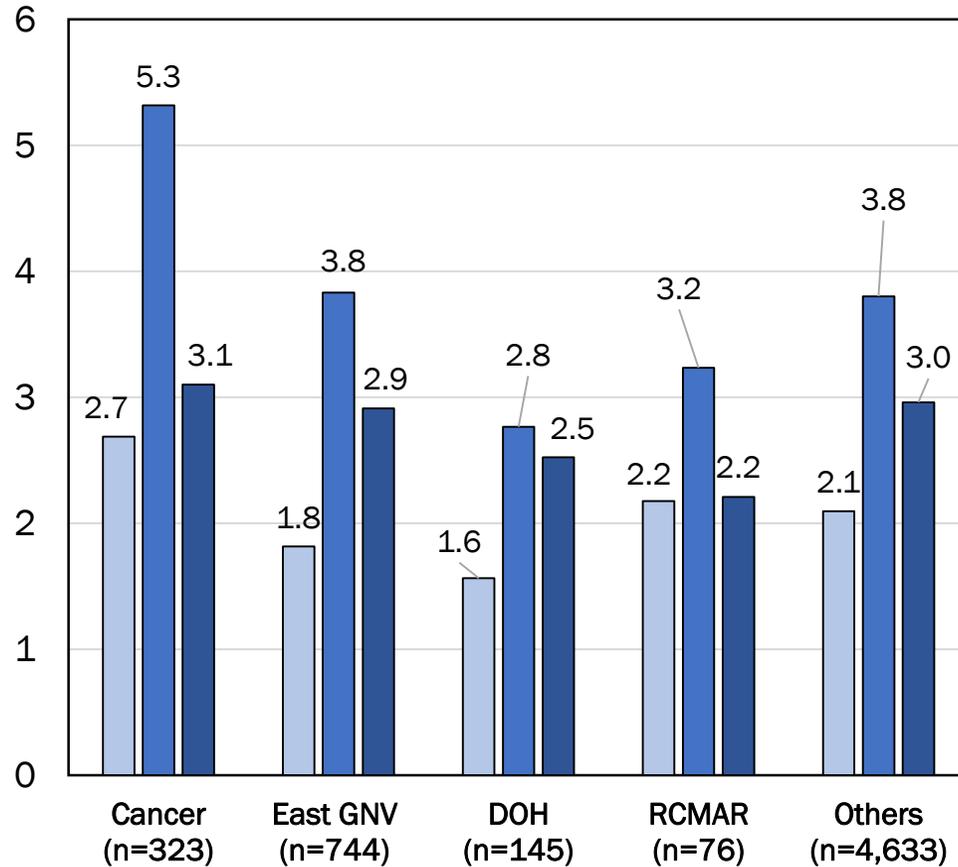
HealthStreet Member Cohorts

1. **Cancer Cohort:** Any HealthStreet member who reported baseline cancer
2. **Howard Bishop Middle School Area (ZIP-32609):** HealthStreet members living in zipcode 32609 except those in #1
3. **DOH:** HealthStreet members aged 60 or older living in Marion, Alachua, Putnam, Bay, Wakulla, Calhoun, Jackson, Washington and Gulf counties except those in #1 and #2
4. **RCMAR:** HealthStreet members aged 60 or older except those in #1, #2 and #3
5. **Everyone Else:** Any HealthStreet member not in #1, #2, #3 or #4.

Funding: Florida Department of Health (DOH); RCMAR Initiative (funded through NIA); FL Blue (April 2016- July 2019); ADRC.

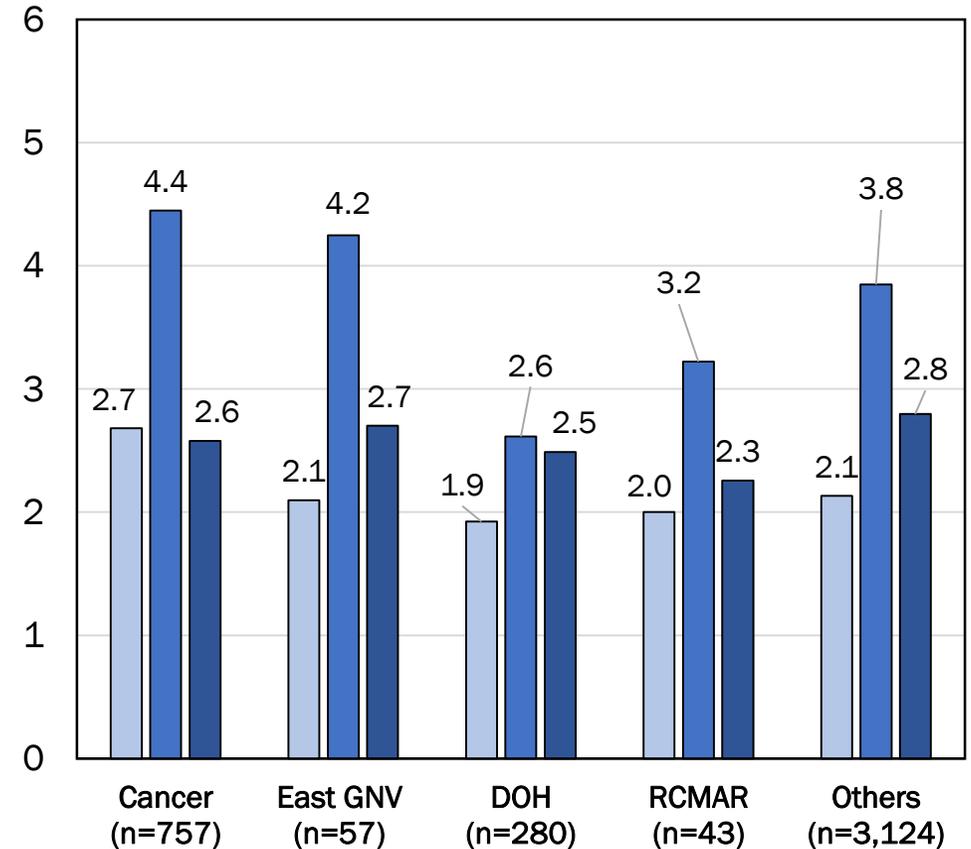
Average Contact Attempts by Race and Cohort

Reconnect Campaign started on March 24, 2020



■ Not Reached Yet (n=3,574)
■ Reached, but Survey Not Completed (n=1,923)
■ Completed Survey (1,099)

Black (n=6,596)

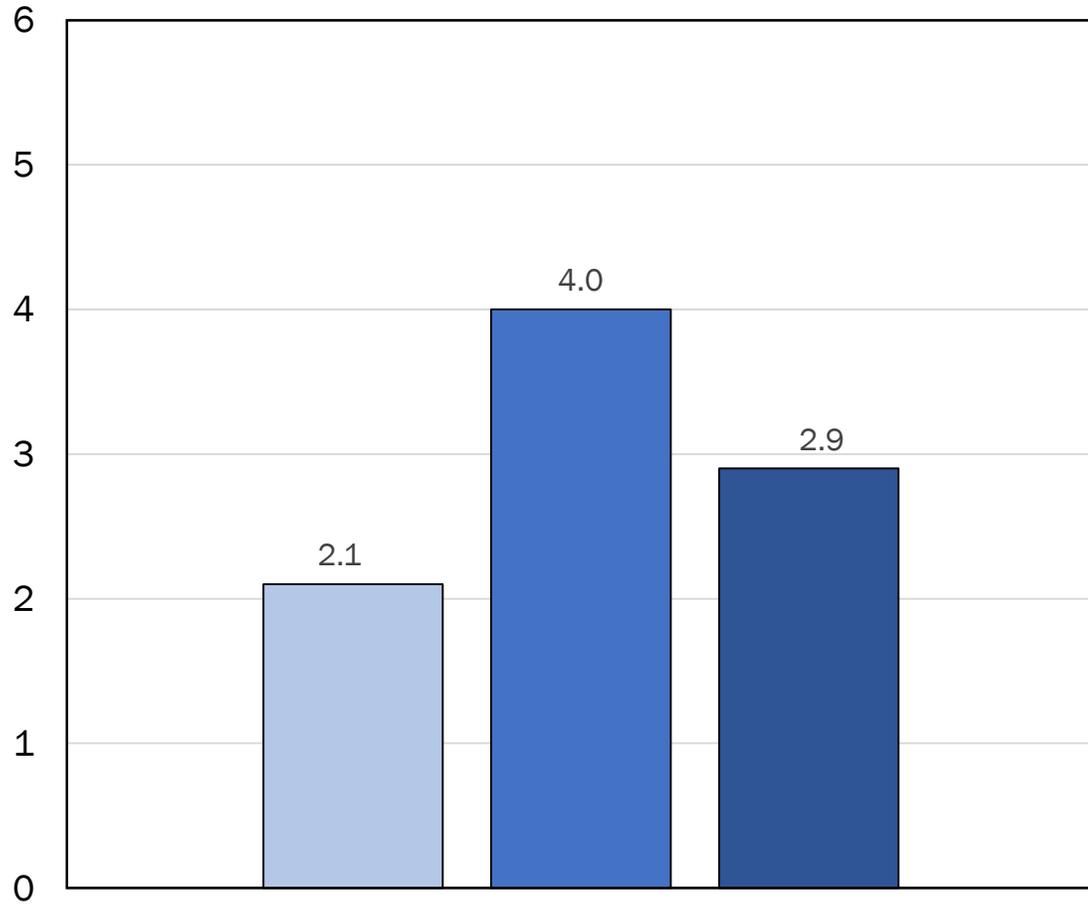


■ Not Reached Yet (n=2,355)
■ Reached, but Survey Not Completed (n=1,648)
■ Completed Survey (1,258)

Non-Black (n=5,261)

Average Contact Attempts by Race and Reconnect Status

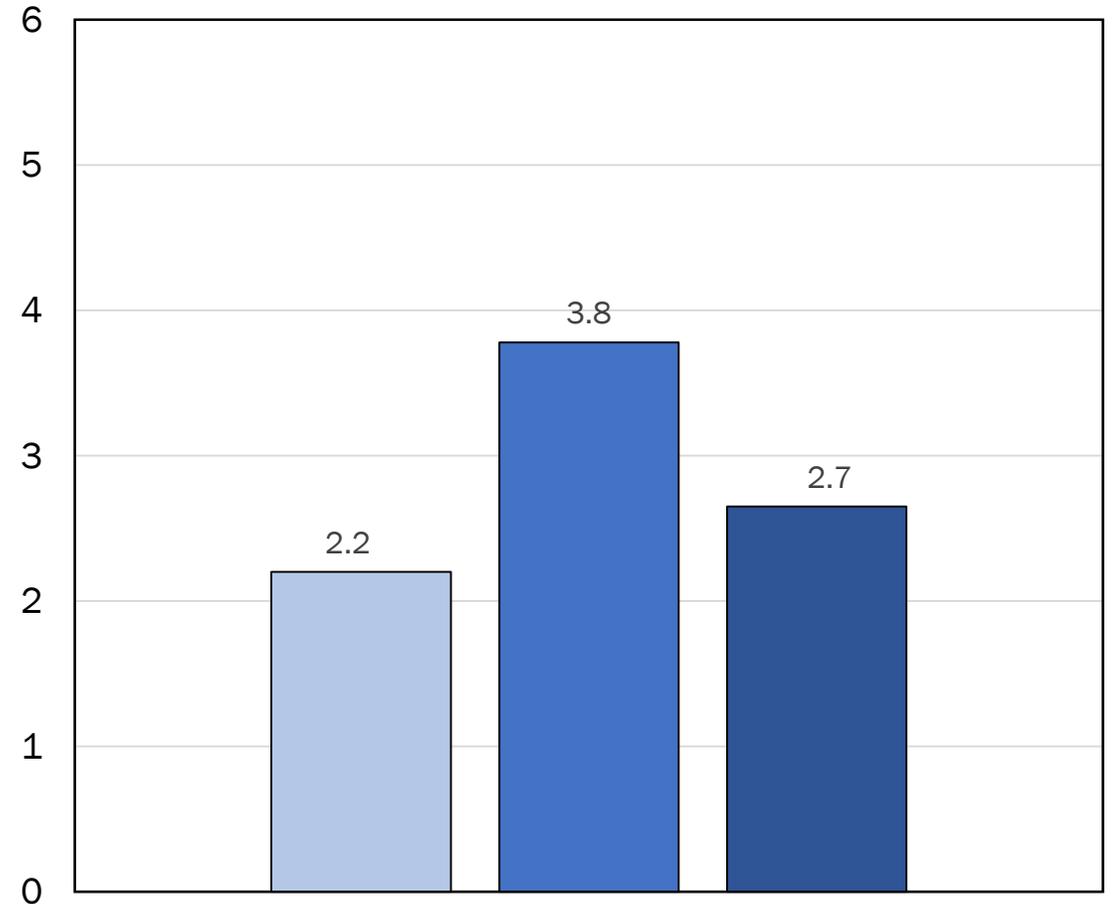
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Total Contact Attempts

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Total Contact Attempts

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- Reached, but Survey Not Completed (n=1,648)
- Completed Survey (1,258)

Non-Black (n=5,261)

HealthStreet Registry Sociodemographics by Reconnect Status

Reconnect Campaign started on March 24, 2020

Not reached yet (n=5,925)

- Mean age: 43.9 years
- 3.1 people in the household
- 55% females; 45% males
- 60% Black; 40% Non-Blacks
- 6% Hispanic/Latino
- 75% have 12+ years of education
- 72% use text messaging/ social media

Reached, but survey not completed (n=3,575)

- Mean age: 43.0 years
- 3.0 people in the household
- 60% females; 40% males
- 54% Black; 46% Non-Blacks
- 8% Hispanic/Latino
- 82% have 12+ years of education
- 85% use text messaging/ social media

Completed survey (n=2,357)

- Mean age: 50.4 years
- 2.7 people in the household
- 69% females; 31% males
- 47% Black; 53% Non-Blacks
- 8% Hispanic/Latino
- 89% have 12+ years of education
- 84% use text messaging/ social media

HealthStreet Registry Sociodemographics by Reconnect Status

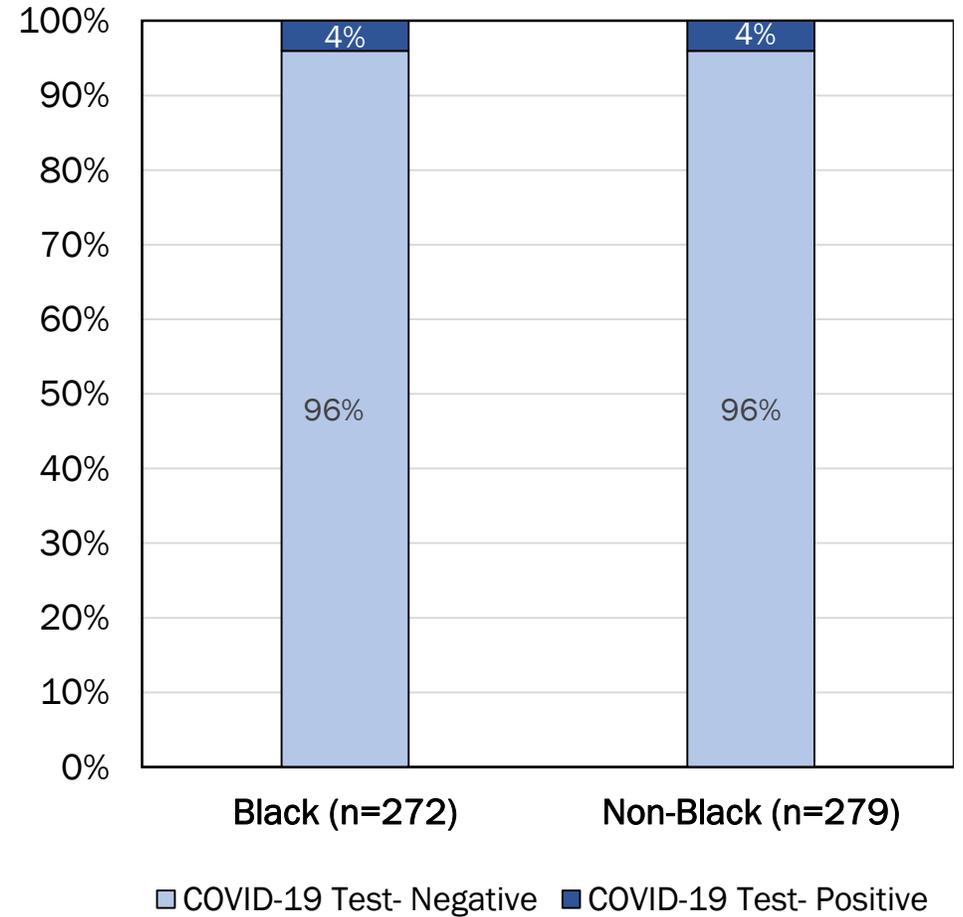
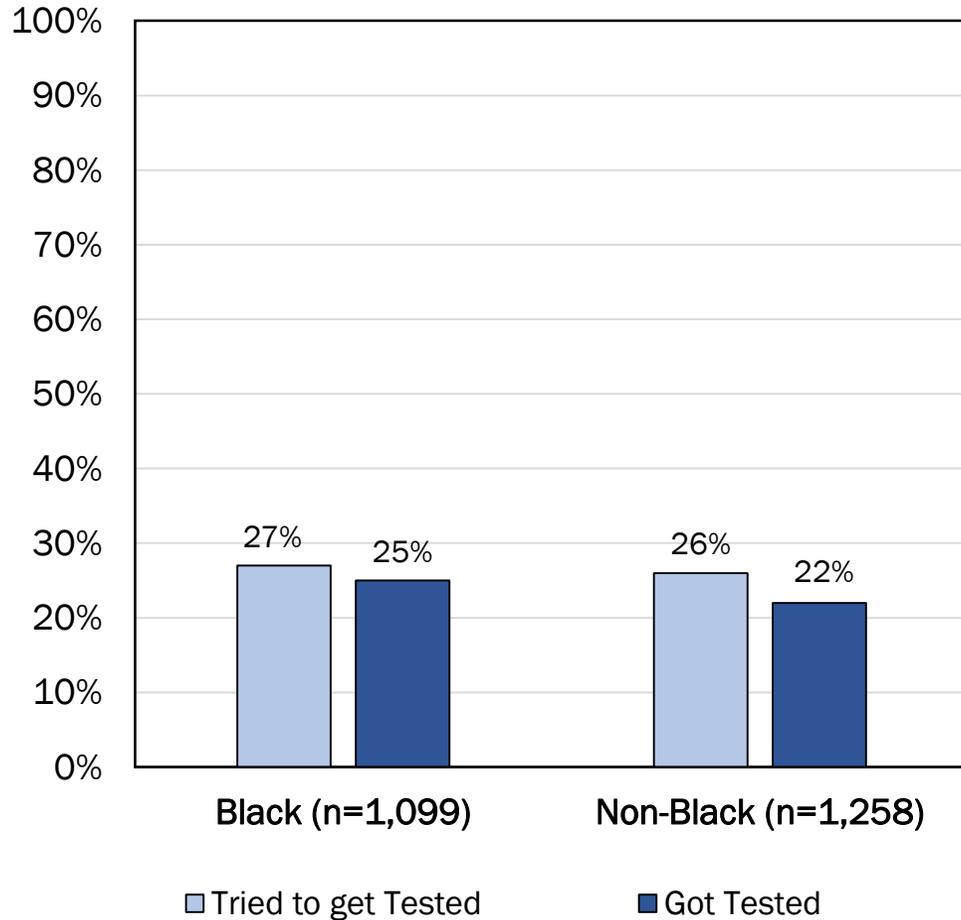
Reconnect Campaign started on March 24, 2020

Not reached yet (n=5,925)	Reached, but survey not completed (n=3,575)	Completed survey (n=2,357)
<ul style="list-style-type: none">• 92% interested in research• Average trust in research= 7.1• Average trust in researchers = 7.1	<ul style="list-style-type: none">• 94% interested in research• Average trust in research= 7.3• Average trust in researchers = 7.2	<ul style="list-style-type: none">• 95% interested in research• Average trust in research= 7.5• Average trust in researchers = 7.4

*Trust in research and researchers scored 1 – 10, where 1 is the lowest and 10 is the highest

COVID-19 Testing by Race

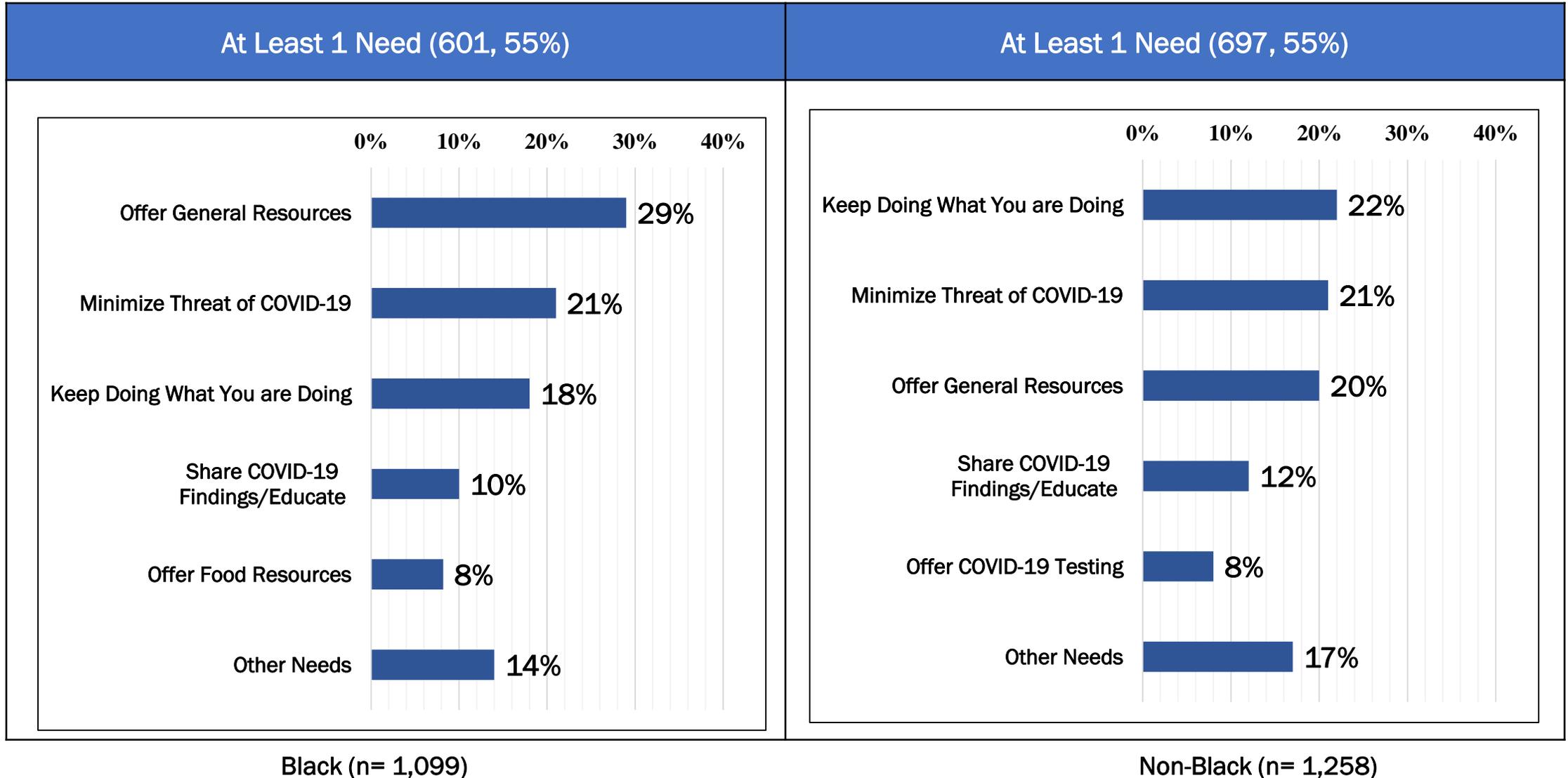
Reconnect Campaign started on March 24, 2020



Note: Among those who got tested

COVID-19 Community Needs by Race

Reconnect Campaign started on March 24, 2020



Among HealthStreet Older Adults

HealthStreet Older Adults Sociodemographics by Reconnect Status

Reconnect Campaign started on March 24, 2020

Not Reached Yet (n=1,108)

- Mean age: 67.3 years
- 2.2 people in the household
- 57% females; 43% males
- 50% Black; 50% Non-Blacks
- 5% Hispanic/Latino
- 78% have 12+ years of education
- 48% use text messaging/ social media

Reached, but Survey Not Completed (n=675)

- Mean age: 66.8 years
- 2.1 people in the household
- 61% females; 39% males
- 42% Black; 58% Non-Blacks
- 8% Hispanic/Latino
- 87% have 12+ years of education
- 66% use text messaging/ social media

Completed Survey (n=798)

- Mean age: 67.7 years
- 2.1 people in the household
- 69% females; 31% males
- 36% Black; 64% Non-Blacks
- 5% Hispanic/Latino
- 90% have 12+ years of education
- 71% use text messaging/ social media

HealthStreet Older Adults Sociodemographics by Reconnect Status

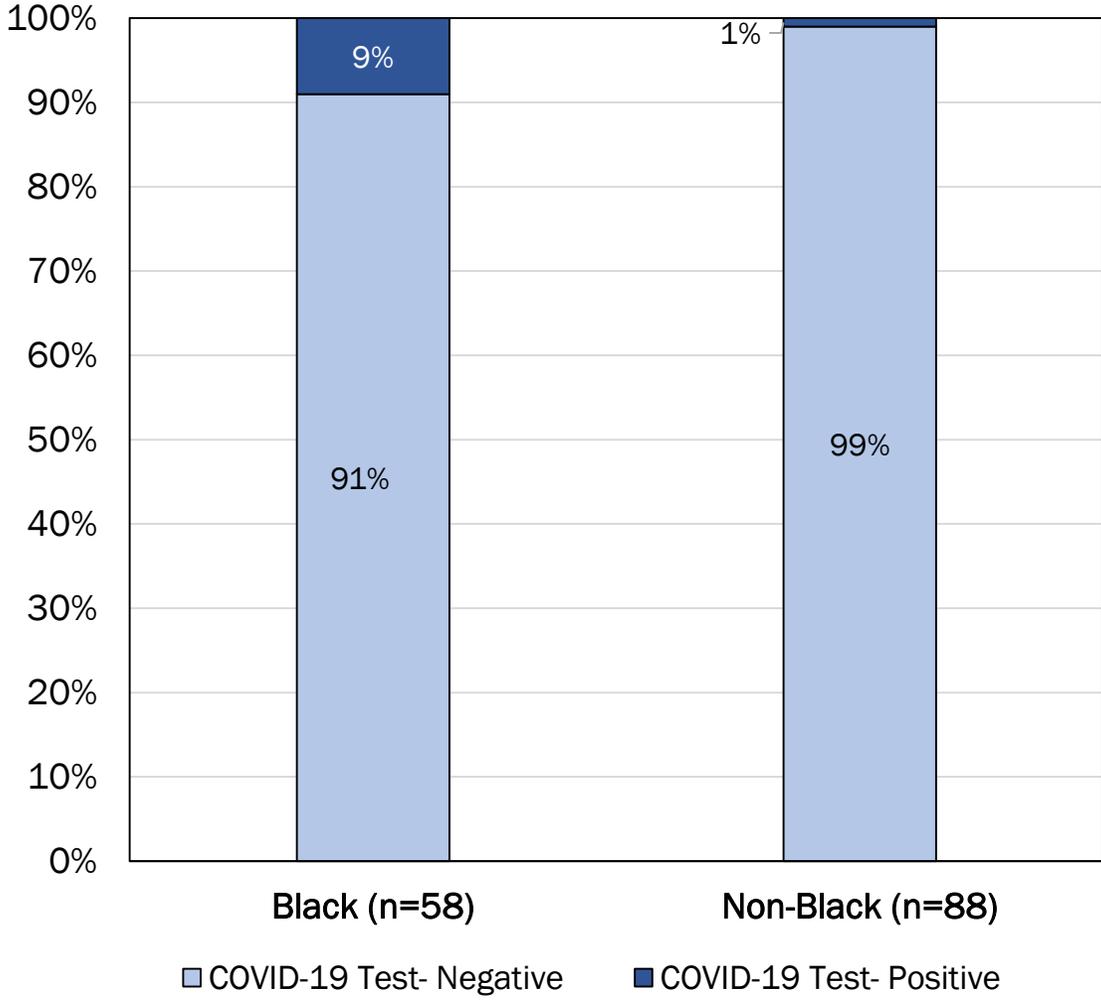
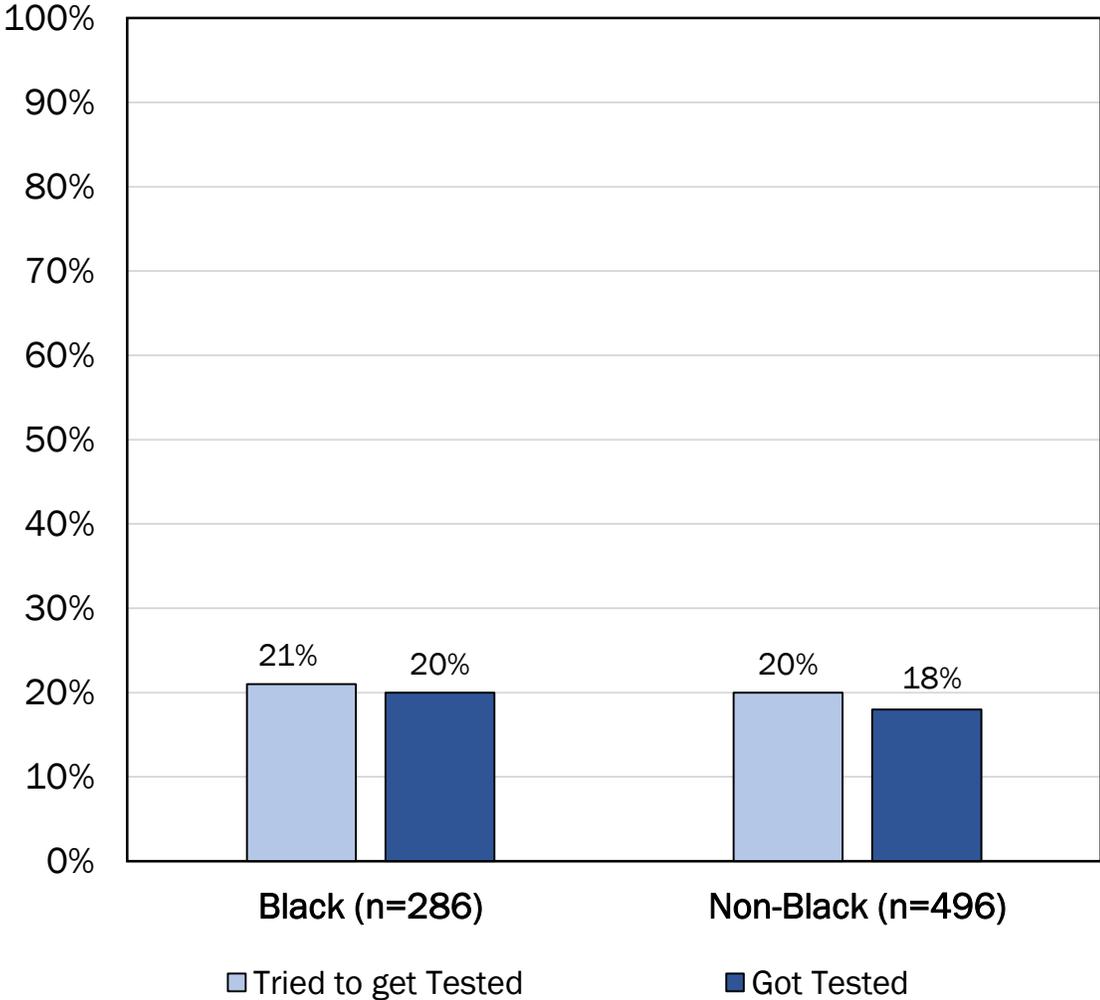
Reconnect Campaign started on March 24, 2020

Not reached yet (n=1,108)	Reached, but survey not completed (n=675)	Completed survey (n=798)
<ul style="list-style-type: none">• 92% interested in research• Average trust in research= 7.2• Average trust in researchers = 7.2	<ul style="list-style-type: none">• 94% interested in research• Average trust in research= 7.6• Average trust in researchers = 7.5	<ul style="list-style-type: none">• 95% interested in research• Average trust in research= 7.4• Average trust in researchers = 7.4

*Trust in research and researchers scored 1 – 10, where 1 is the lowest and 10 is the highest

COVID-19 Testing in Older Adults by Race

Reconnect Campaign started on March 24, 2020



Note: Among those who got tested

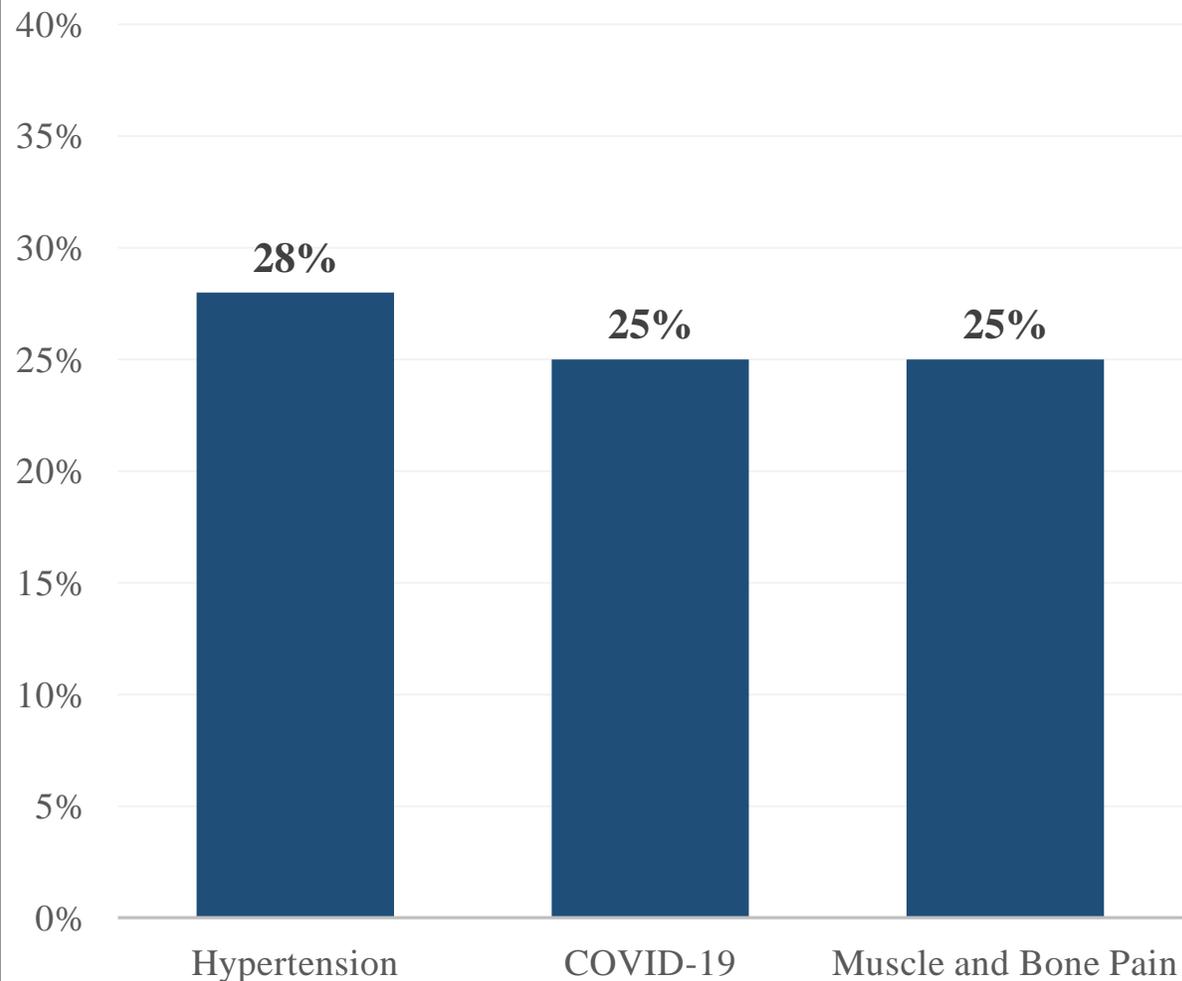
Weekly Connection with Older Adults during COVID-19

	Time Period-1	Time Period -2	Time Period -3	Time Period -4	Time Period -5	Time Period -6	Time Period -7	Time Period -8	Time Period -9	Time Period -10	Time Period -11	Total
	3/24/2020 - 4/5/2020	4/6/2020 - 4/19/2020	4/20/2020 - 5/3/2020	5/4/2020 - 5/17/2020	5/18/2020 - 5/31/2020	6/1/2020 - 6/14/2020	6/15/2020 - 6/28/2020	6/29/2020 - 7/12/2020	7/13/2020 - 7/26/2020	7/27/2020 - 8/9/2020	8/10/2020 - 8/23/2020	3/24/2020 - 8/23/2020
	n = 48	n = 107	n = 74	n = 50	n = 47	n = 43	n = 103	n = 125	n = 69	n = 86	n = 46	n = 798
Tried to get tested for COVID-19	2 (4.2%)	6 (5.6%)	2 (2.7%)	6 (12.0%)	8 (17.0%)	9 (20.9%)	24 (23.3%)	32 (25.6%)	25 (36.2%)	30 (34.9%)	18 (39.1%)	162 (20.3%)
Tested for COVID-19	0 (0.0%)	5 (4.7%)	0 (0.0%)	6 (12.0%)	7 (14.9%)	8 (18.6%)	22 (21.4%)	31 (24.8%)	23 (33.3%)	26 (30.2%)	18 (39.1%)	146 (18.3%)
Result- Positive*	NA	0 (0.0%)	NA	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	2 (8.7%)	2 (7.7%)	2 (11.1%)	6 (4.1%)
Result- Negative*	NA	5 (100.0%)	NA	6 (100.0%)	7 (100.0%)	8 (100.0%)	22 (100.0%)	31 (100.0%)	21 (91.3%)	24 (92.3%)	16 (88.9%)	140 (95.9%)
Have Internet at Home	17 (35.4%)	75 (70.1%)	52 (70.3%)	44 (88.0%)	38 (80.9%)	25 (58.1%)	77 (74.8%)	95 (76.0%)	50 (72.5%)	68 (79.1%)	33 (71.7%)	574 (71.9%)
Think Internet is Important	15 (31.3%)	93 (86.9%)	57 (77.0%)	43 (86.0%)	40 (85.1%)	30 (69.8%)	83 (80.6%)	106 (84.8%)	63 (91.3%)	74 (86.0%)	37 (80.4%)	641 (80.3%)
Food Insecure	20 (41.7%)	17 (15.9%)	12 (16.2%)	9 (18.0%)	10 (21.3%)	14 (32.6%)	23 (22.3%)	25 (20.0%)	12 (17.4%)	23 (26.7%)	13 (28.3%)	178 (22.3%)
Were able to get medications needed	NA	95 (88.8%)	72 (97.3%)	47 (94.0%)	43 (91.5%)	37 (86.0%)	92 (89.3%)	116 (92.8%)	66 (95.7%)	80 (93.0%)	41 (89.1%)	689 (86.3%)
Unemployed as a result of COVID-19	NA	10 (9.3%)	4 (5.4%)	5 (10.0%)	4 (8.5%)	3 (7.0%)	10 (9.7%)	13 (10.4%)	5 (7.2%)	8 (9.3%)	5 (10.9%)	67 (8.4%)

Top 3 Health Concerns of Older Adults during COVID-19 by Race

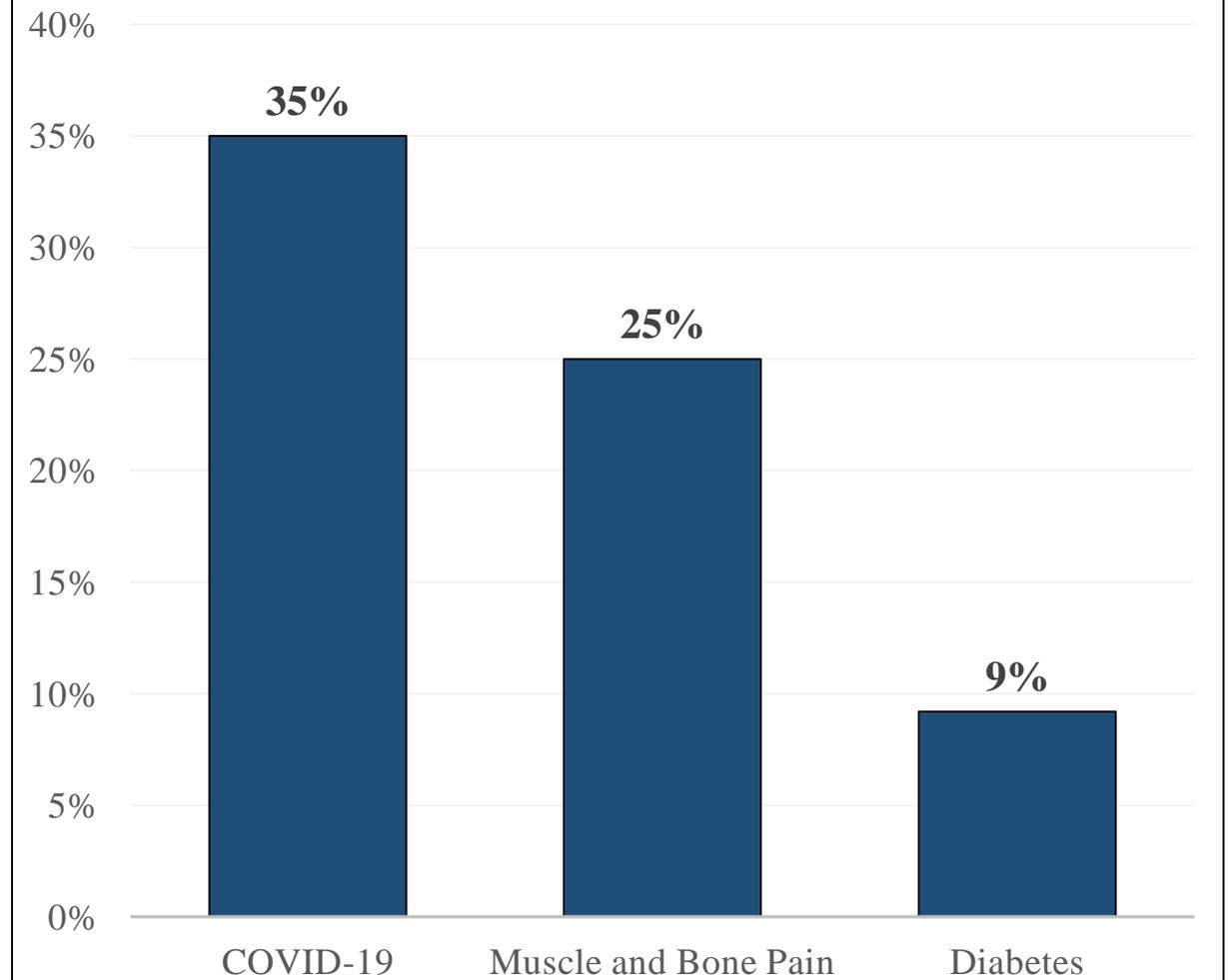
Reconnect Campaign started on March 24, 2020

At Least 1 Health Concern (n=159, 55%)



Black (n= 290)

At Least 1 Health Concern (n=336, 66%)

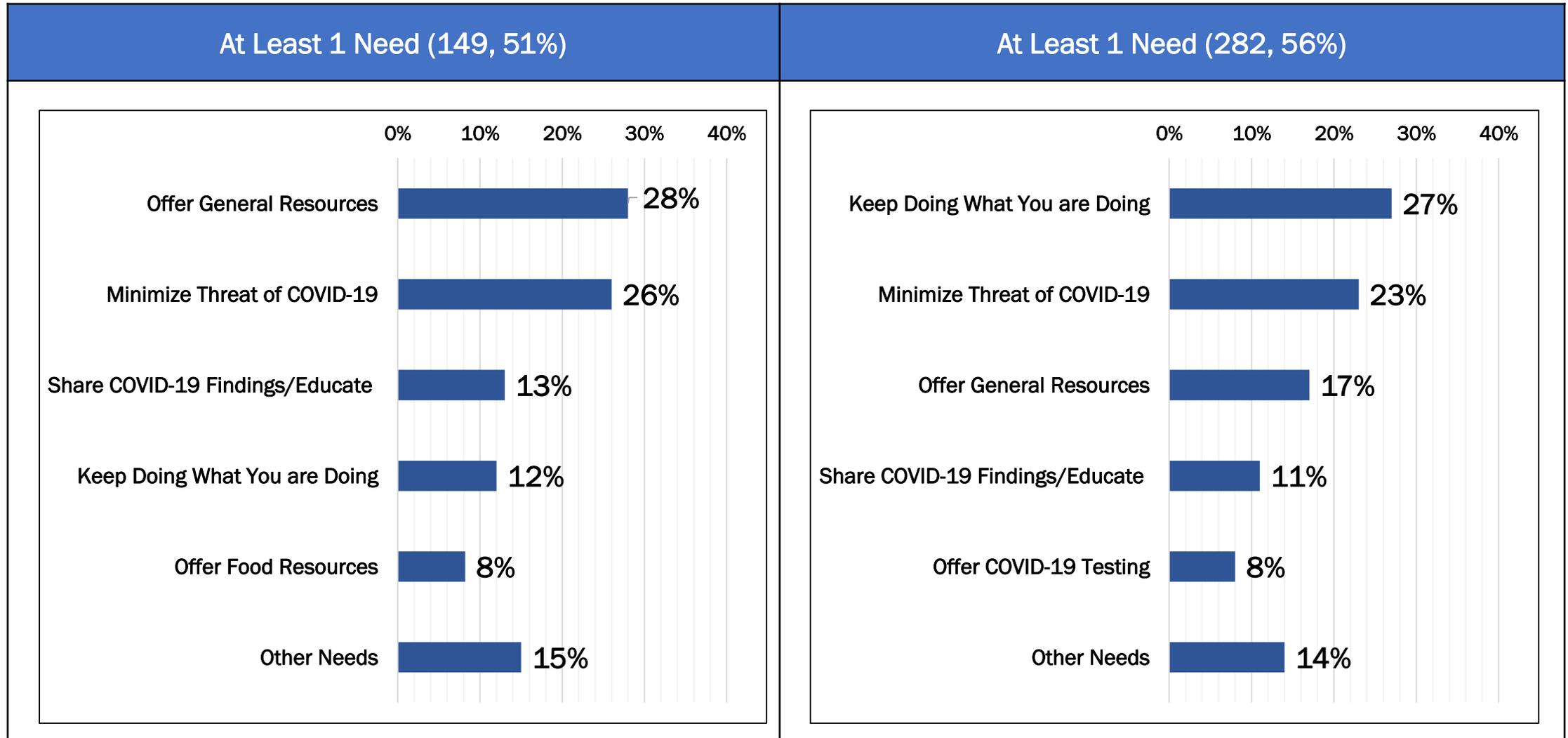


Non-Black (n= 508)

*among those with at least 1 health concern

COVID-19 Older Adults Needs by Race

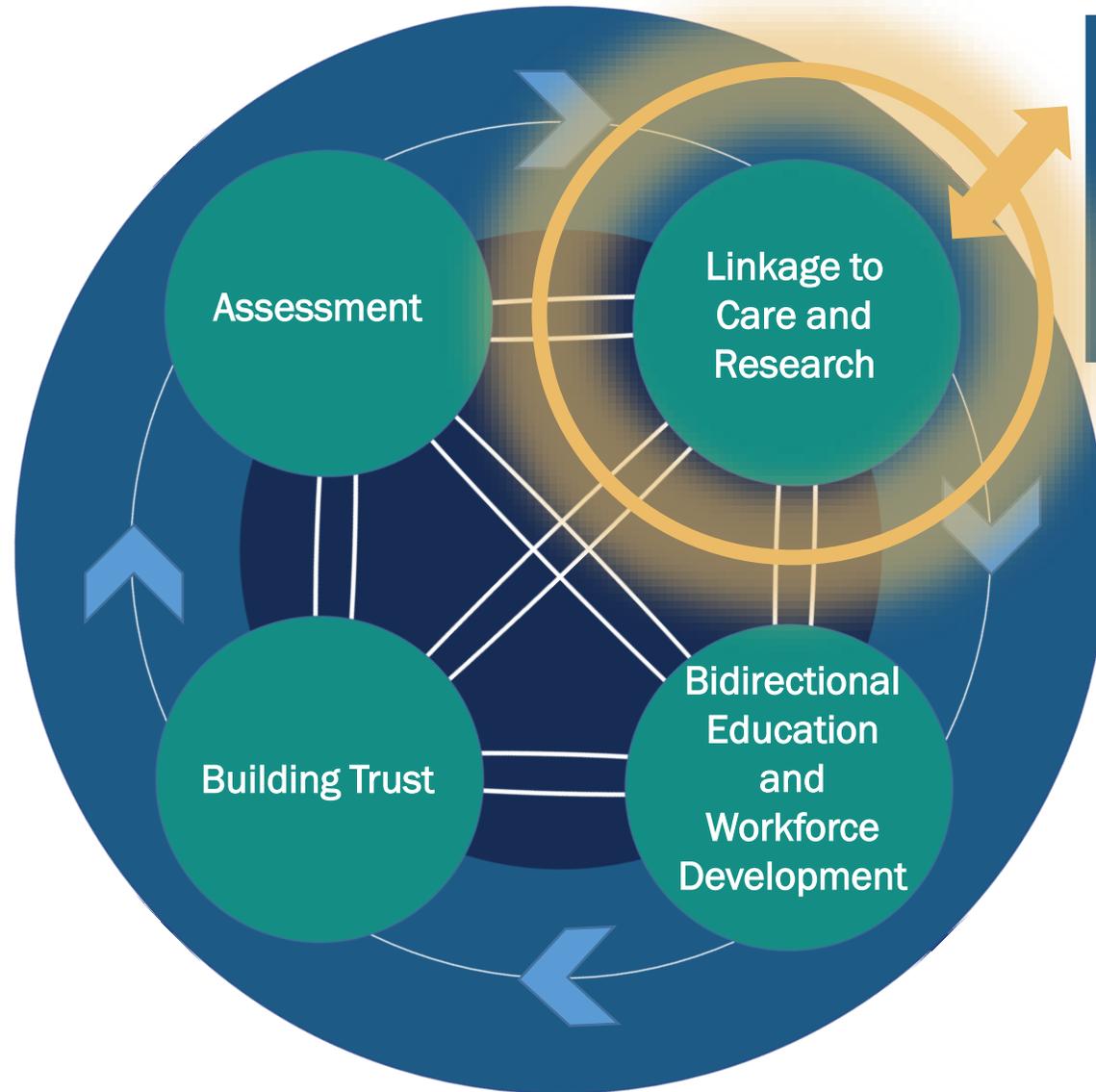
Reconnect Campaign started on March 24, 2020



Black (n= 290)

Non-Black (n= 508)

UF HealthStreet Pillars



DO

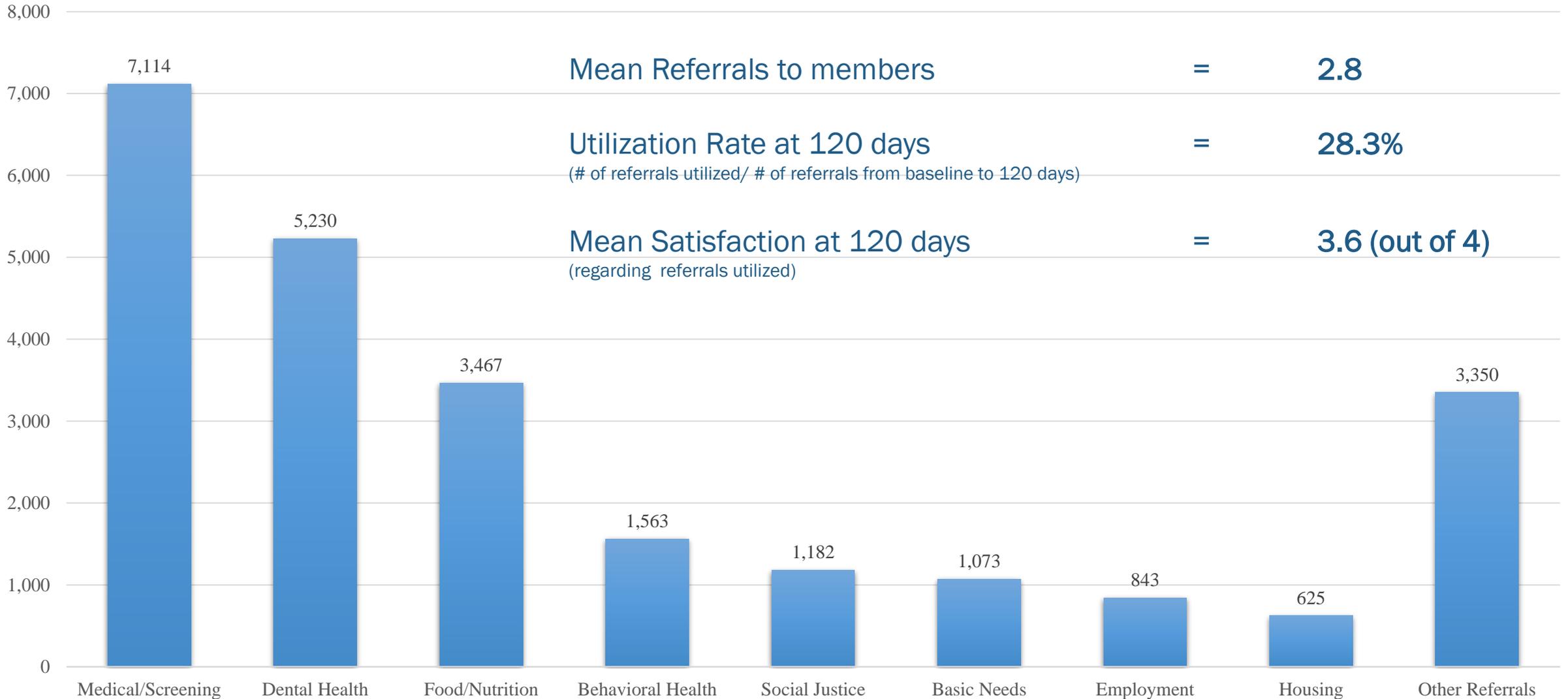
- Give referrals
- Navigate to UF research

FOR

- Access and parity
- Quality improvement
- Increased relevance and impact of research

Linkage to Service Referrals- Outcomes in HealthStreet

Service Referrals Given To HealthStreet Members (Total Referrals= 24,447)



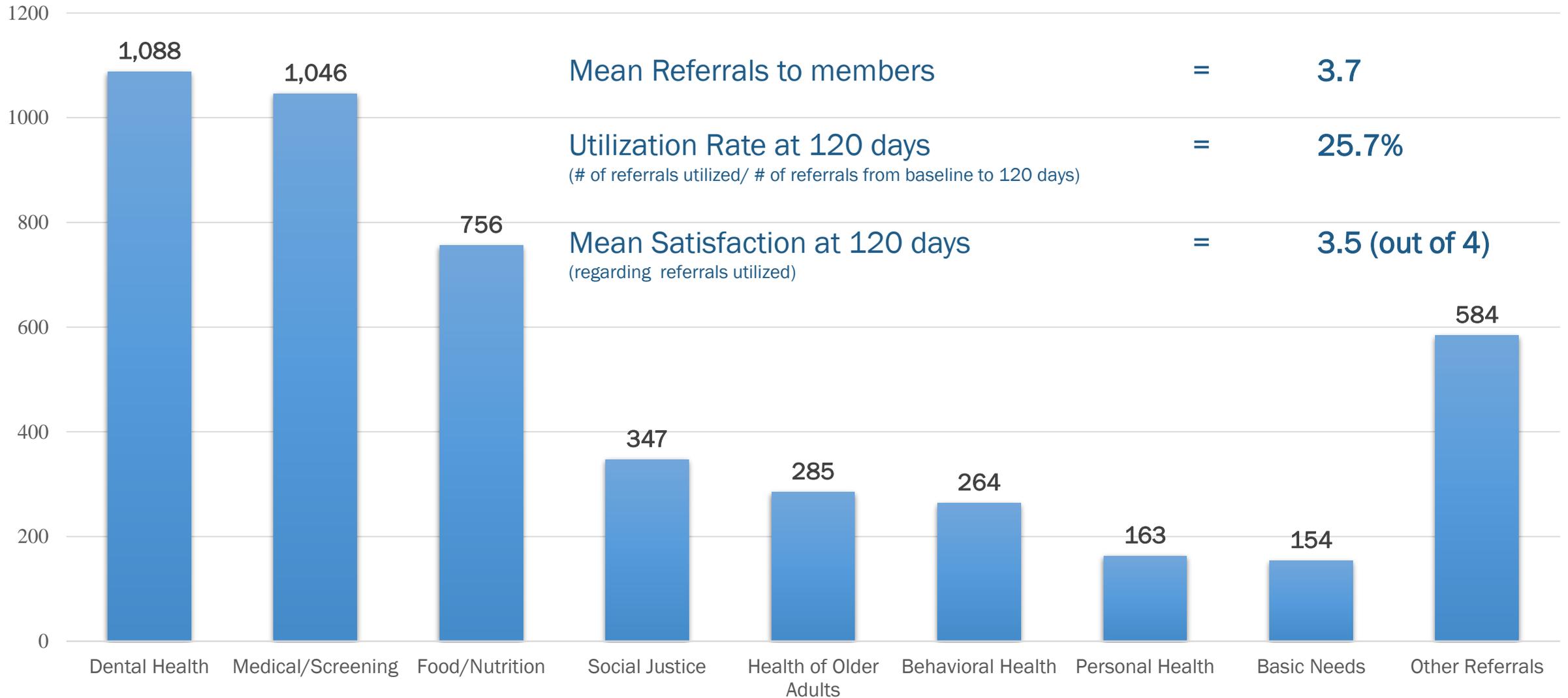
Mean Referrals to members = 2.8

Utilization Rate at 120 days = 28.3%
(# of referrals utilized/ # of referrals from baseline to 120 days)

Mean Satisfaction at 120 days = 3.6 (out of 4)
(regarding referrals utilized)

Linkage to Service Referrals- Outcomes in HealthStreet Older Adults

Service Referrals Given To HealthStreet Older Adults (Total Referrals= 4,687)



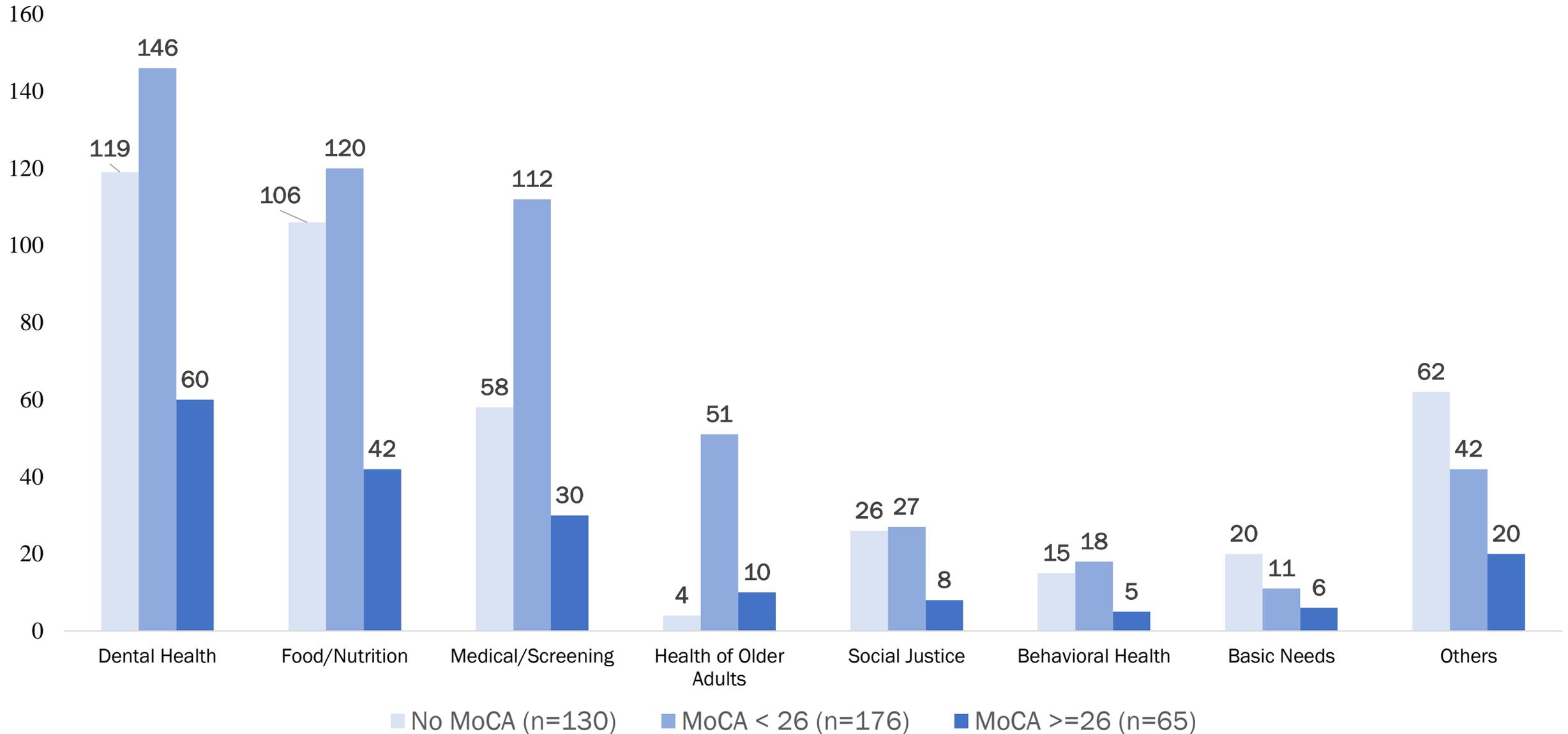
Mean Referrals to members = 3.7

Utilization Rate at 120 days = 25.7%
(# of referrals utilized/ # of referrals from baseline to 120 days)

Mean Satisfaction at 120 days = 3.5 (out of 4)
(regarding referrals utilized)

Linkage to Service Referrals- Outcomes in HealthStreet Older Adults

Service Referrals Given To HealthStreet Older Adults by MoCA Score



Referral to Memory Care

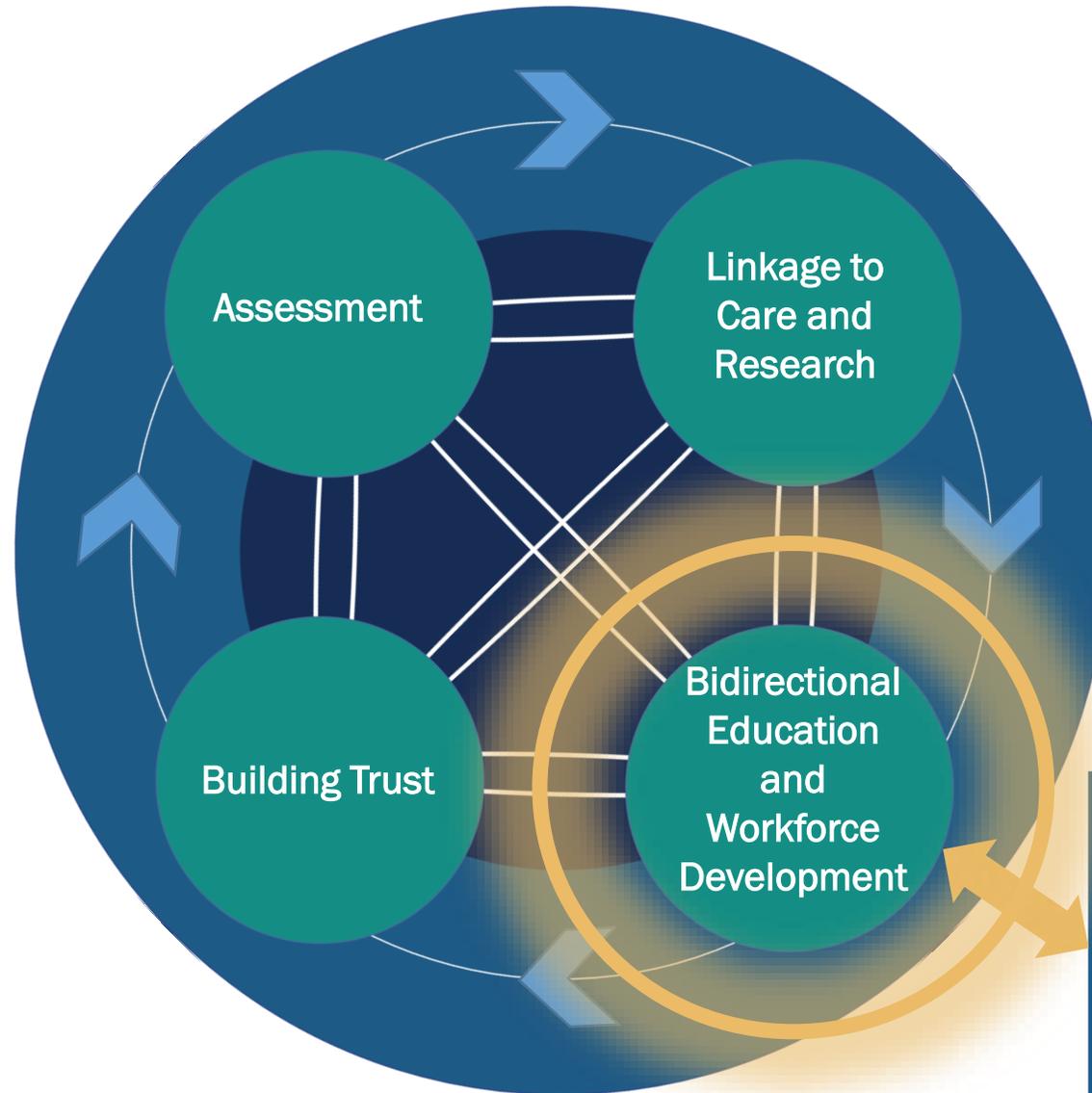
Number of adults (60 years and older) assessed with baseline Alzheimer's disease questionnaire and MoCA since April 1, 2018

	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Total
AD Questionnaire	40	70	47	60	70	70	46	15	418
MoCA (total)	15	29	32	46	51	66	47	27	313
MoCA (below 26, further evaluation necessary)	10/15	17/29	22/32	26/46	36/51	42/66	30/47	16/27	199/313

Utilizing Social Prescribing

- Non-medical interventions proposed to:
 - address wider determinants of health
 - help patients improve health behaviors and better manage their conditions
- Emerging evidence suggests that social prescribing can improve people's health and wellbeing and reduce workload for healthcare professionals and demand for secondary care services

UF HealthStreet Pillars



From Brain Disorders to Brain Health: Prevention and Management of Cognitive Decline and Dementia

Free CME

As a result of participation in this activity, participants will be able to:

Define age-related cognitive decline and distinguish between mild cognitive impairment and dementia.

Identify and modify the risk factors of cognitive impairment and dementia.

Learn about the etiologic mechanisms of Alzheimer's disease, therapeutic targets, and emerging therapies.

Learn about services provided in the state of Florida and benefits of research participation.

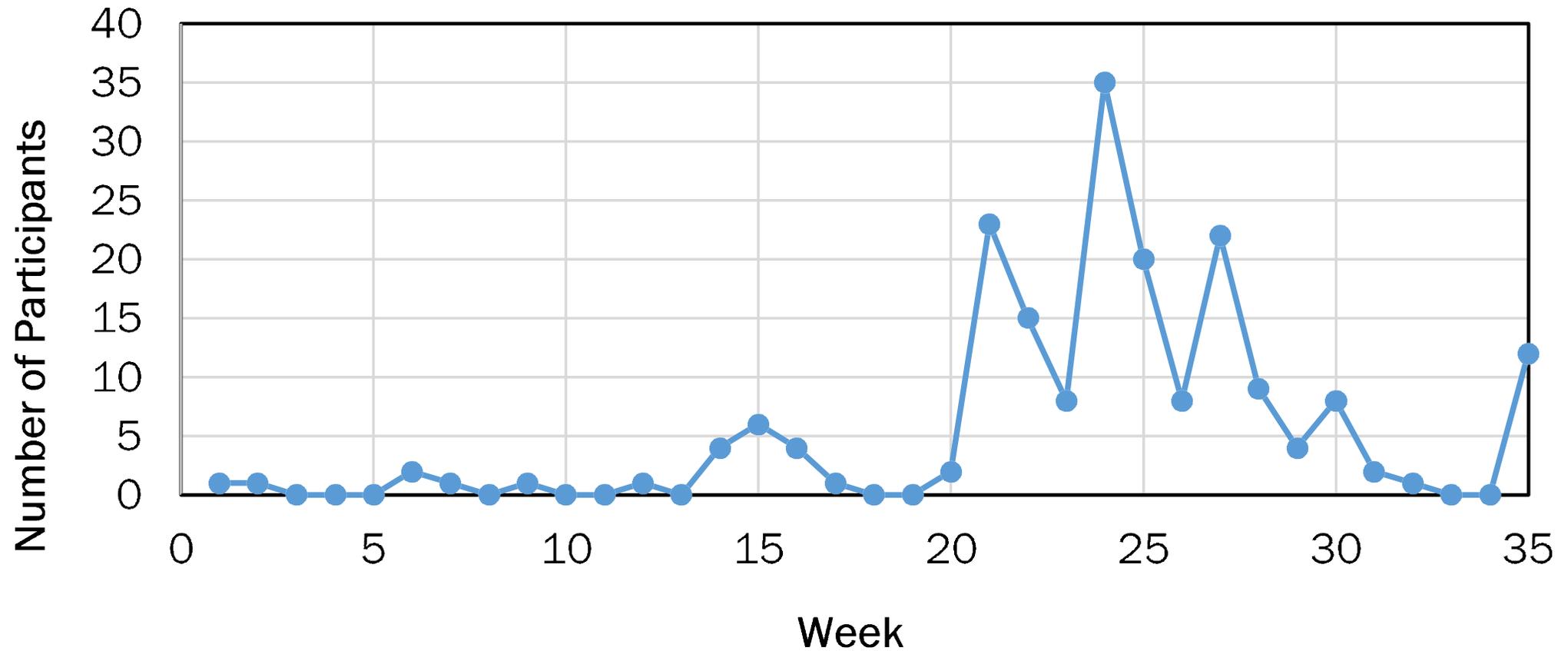


Continuing Medical Education for Health Professionals

Some questions addressed by the panel of experts included the following:

1. What factors increase the risk for cognitive decline and dementia?
2. What factors protect against cognitive decline and dementia?
3. How can genetic testing be used to predict dementia risk?
4. How can electronic medical record information be used to preserve and improve brain health?
5. As a primary care physician, what can I do to promote brain health (prevent cognitive decline and dementia)?
6. How do you know Mild Cognitive Impairment (MCI) isn't just normal age-related decline?
7. How is MCI different than dementia?
8. How do I screen for MCI?
9. How do I facilitate an MCI evaluation?
10. What can be done 'therapeutically' for a person with MCI?
11. What kinds of clinical services are available at the state funded Memory Disorders Clinics?
12. What kinds of social supports are facilitated by the state funded Memory Disorders Clinics?
13. What kinds of research are available for memory disorders at state funded Memory Disorders Clinics?
14. Why should someone consider participating in a clinical research trial?
15. Where can I find a list of state Memory Disorders Clinics?

Number of participants who completed the continuing medical education training from October 2019 to August 2020 (n=191)





OUR COMMUNITY, OUR HEALTH

DISTRACTED DRIVING

A CONVERSATION ON TRAFFIC SAFETY

February 11, 2020

6-7 p.m. EDT

In-Person and via Livestream

Free & Open to the Public

THIS INTERACTIVE TOWN HALL WILL:

- Describe the connection between distracted driving and traffic safety
- Explore how human behavior and perception contribute to distraction
- Examine the impacts of distraction on traffic patterns and flow
- Address legal and ethical factors in traffic safety
- Discuss how federal and state laws affect distracted driving

Join the conversation
#OCOHI



Jennifer Bard, MPH, PhD, JD
Professor of Law,
Professor of Internal Medicine,
University of Cincinnati



Shan Bao, PhD
Associate Professor,
Industrial and Manufacturing
Systems Engineering
University of Michigan,
Transportation Research Institute



Wayne Glang, PhD
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Sandra Winter, Ph.D., OTR/L
Research Assistant,
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Department of Occupational
Therapy
UF Transportation Institute

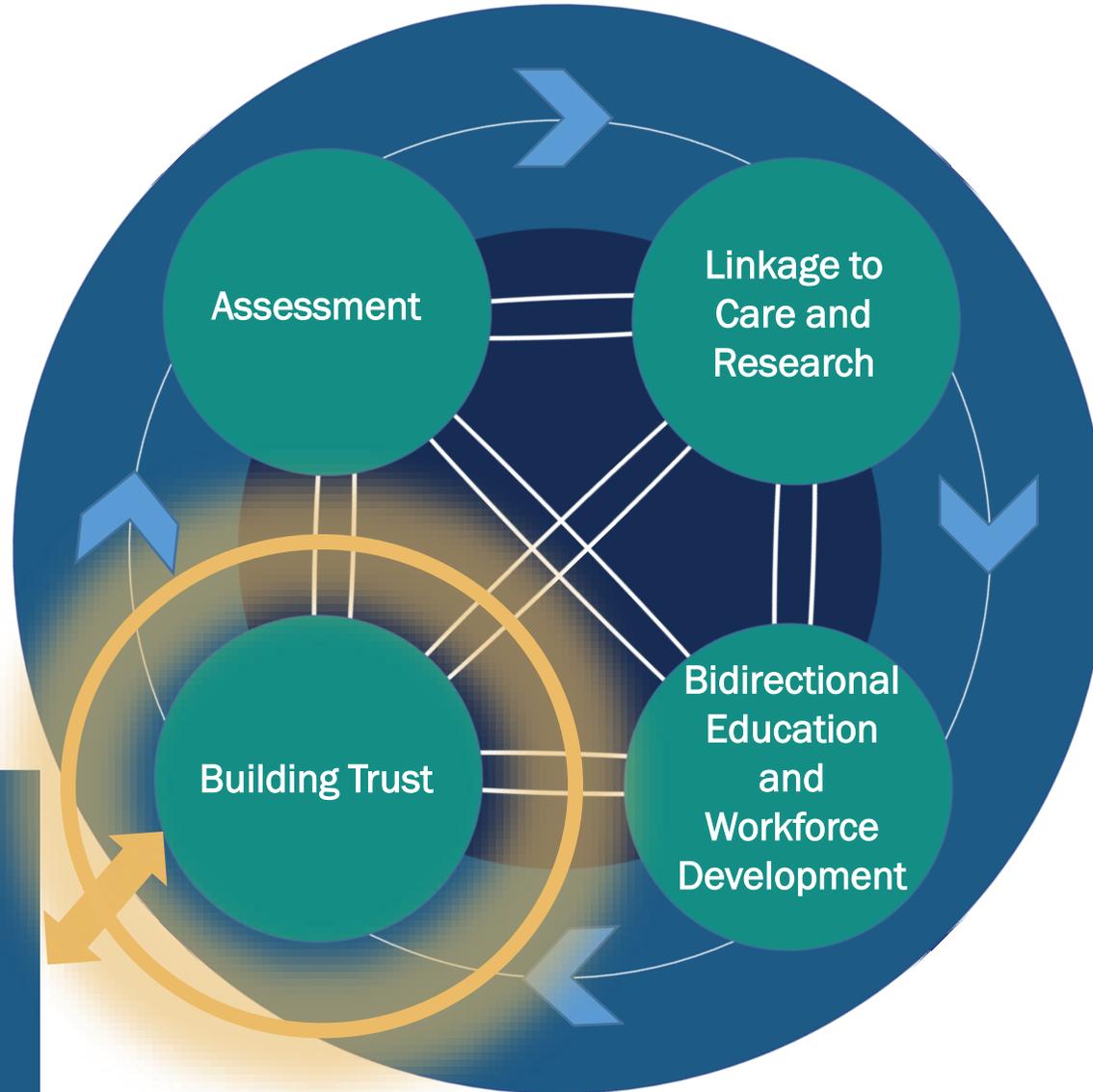


Pruthi Manjunatha, PhD
I-STREET Testbed Manager,
Research Assistant Professor,
Civil and Coastal Engineering,
UF Transportation Institute

RSVP Link: <http://bit.ly/DistractedDrivingRSVP> | Livestream Link: bit.ly/OCOHI FEBRUARY11



UF HealthStreet Pillars



DO

-Measure research perceptions and trust

FOR

-Breaking down walls
-Becoming a community

Trust Assessment Questions

- On a scale from 1 to 10, where 1 is no trust and 10 is complete trust, **how much trust do you have in research?**
- On a scale from 1 to 10, where 1 is no trust and 10 is complete trust, **how much trust do you have in researchers?**

Baseline Trust in Research and Researchers in HealthStreet Members



On a scale of 1 to 10, where 1 is “Not At All” and 10 is “Completely”.

Scores 1-3 : **Low**

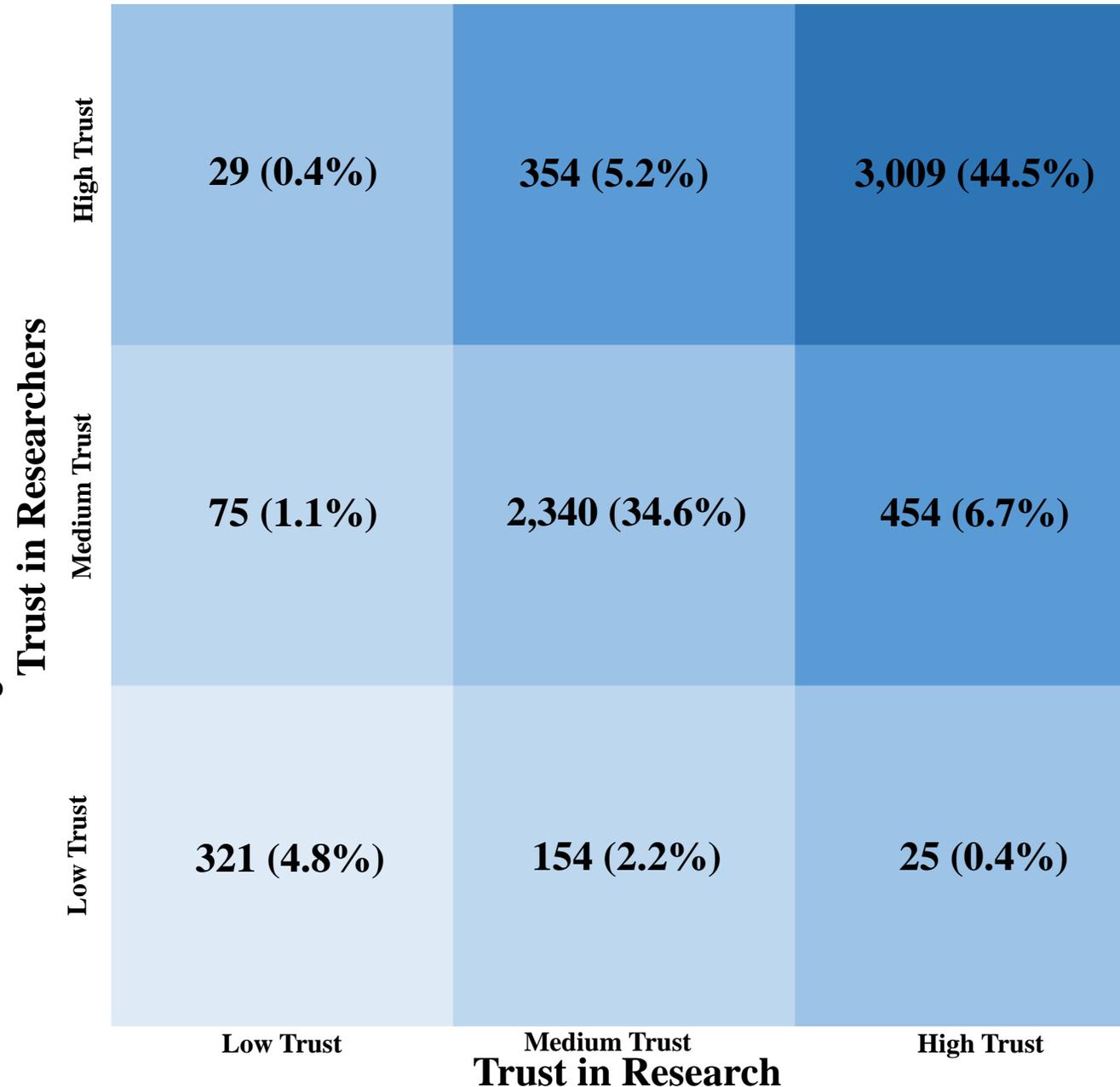
Scores 4-7: **Medium**

Scores 8-10: **High**

***Among 6,761 members who answered both.**

High Trust in Research = 52%
 High Trust in Researchers = 50%

Low Trust in Research = 6%
 Low Trust in Researchers = 7%



Registry of Older Adults (60 years or older) - Baseline Trust in Research and Researchers



On a scale of 1 to 10, where 1 is “Not At All” and 10 is “Completely”.

Scores 1-3 : **Low**

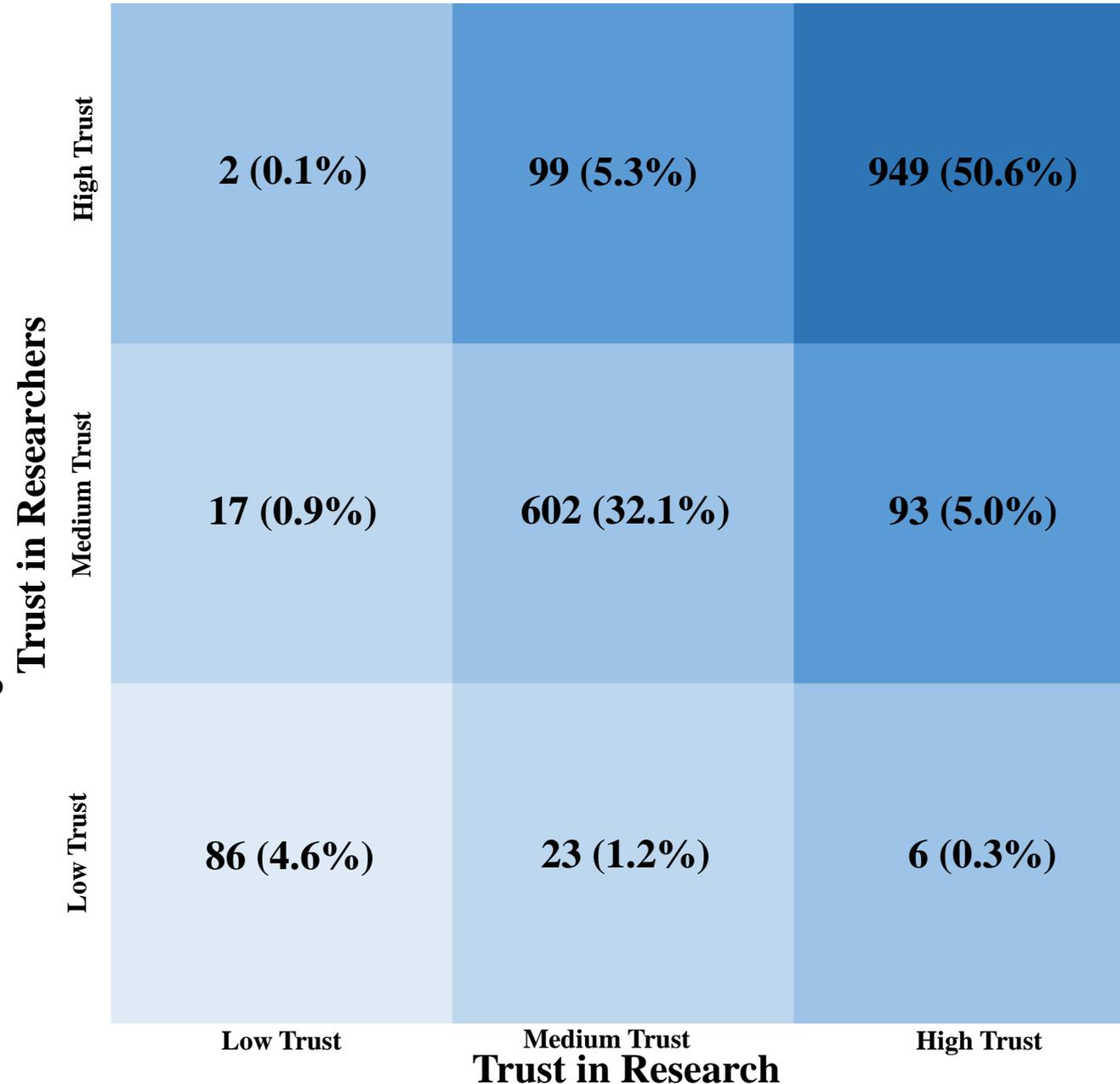
Scores 4-7: **Medium**

Scores 8-10: **High**

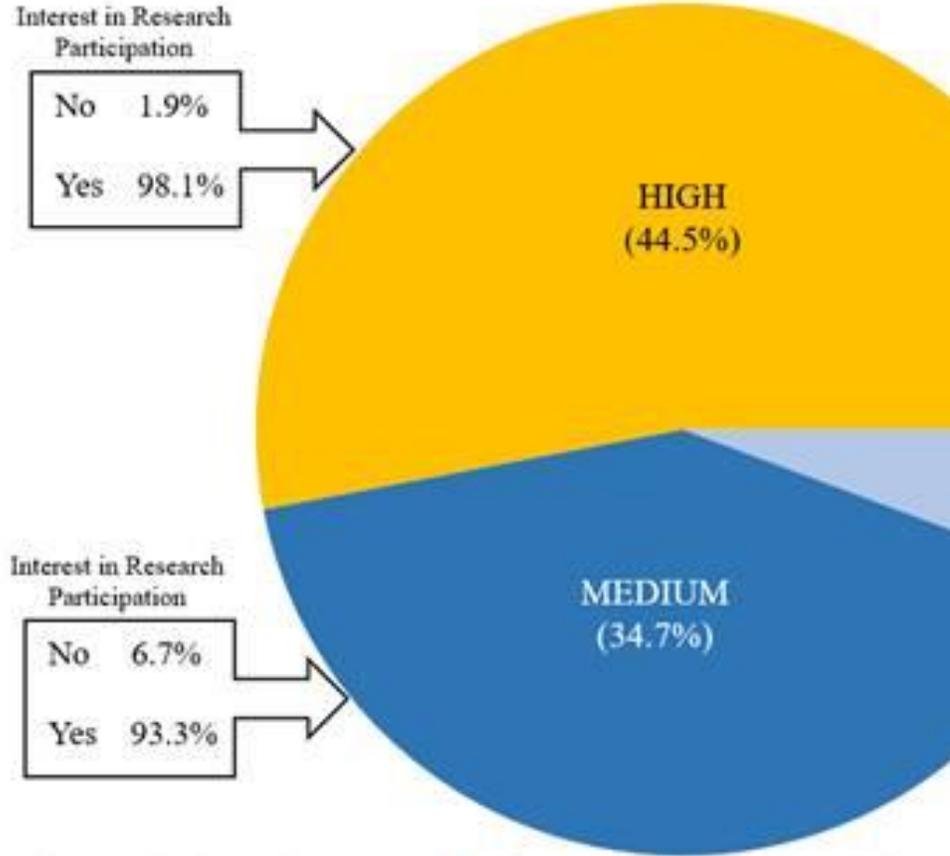
***Among 1,877 members who answered both.**

High Trust in Research = 56%
 High Trust in Researchers = 56%

Low Trust in Research = 6%
 Low Trust in Researchers = 6%



Interest in Research Participation by Trust in Research

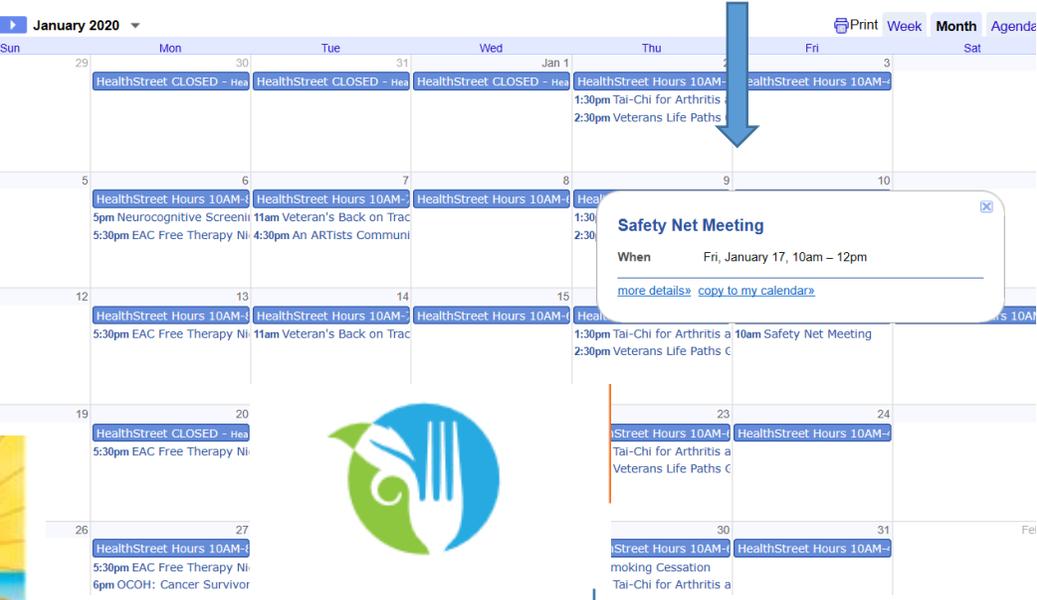


■ Low Trust in Research and Researchers ■ Medium Trust in Research and Researchers

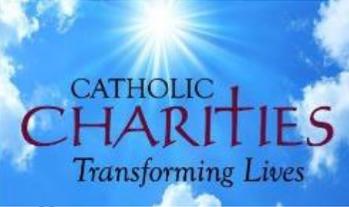
		Low Trust in Research and Researchers n= 318 (5.7%)	Medium Trust in Research and Researchers n= 2,325 (41.3%)	High Trust in Research and Researchers n= 2,982 (53.0%)
Interest in Research	No	69 (21.7%)	156 (6.7%)	57 (1.9%)
	Yes	249 (78.3%)	2,169 (93.3%)	2,925 (98.1%)
Would you volunteer for a health research study that only asked questions about your health?		261 (82.1%)	2,190 (94.2%)	2,892 (97.0%)
if researchers wanted to see your medical records?		229 (72.0%)	1,970 (84.7%)	2,799 (93.9%)
if you had to give a blood sample?		210 (66.0%)	1,929 (83.0%)	2,765 (92.7%)
if you were asked to give a sample for genetic studies?		200 (62.9%)	1,965 (84.5%)	2,787 (93.5%)
if you might have to take medicine?		114 (35.8%)	1,263 (54.3%)	2,117 (71.0%)
if you were asked to stay overnight in a hospital or clinic?		163 (51.3%)	1,560 (67.1%)	2,446 (82.0%)
if you might have to use medical equipment?		215 (67.6%)	1,926 (82.8%)	2,763 (92.7%)
Would you participate in a study if you didn't get paid?		177 (55.7%)	1,725 (74.2%)	2,535 (85.0%)
Navigated		122 (38.4%)	1,107 (47.6%)	1,676 (56.2%)
Enrolled (among total)		53 (16.7%)	442 (19.0%)	613 (20.6%)
Enrolled (Among those navigated)		53 (43.4%)	442 (39.9%)	613 (36.6%)

Building Trust- Outcomes

Safety Net Partners.



Eldercare of Alachua County, Inc.



FIELD & FORK
CAMPUS FOOD PROGRAM
UNIVERSITY OF FLORIDA

Bread Of The Mighty Food Bank



GAINESVILLE HOUSING AUTHORITY



FOODPANTRIES.ORG



CAB

- Represents stakeholders throughout Florida chosen by FSU-UF
- Rotate 4 meetings per year- Tallahassee, Gainesville, Jacksonville

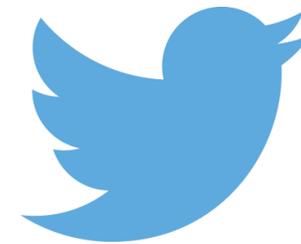
Looking Ahead...

Pillar	Particulars
Assessment	<ul style="list-style-type: none">- Through trust earned, better engage older Floridians across the state- Add assessment for other high risk behavior such as driving under the influence of prescription cannabis- Fully utilize the potential granted by HealthStreet participants with electronic medical record (EMR) access
Linkage to Services and Research	<ul style="list-style-type: none">- Integrate with an expanded range of community-serving groups- Promote utilization of CHWs, who can supply more social support and be called on for additional help- Link HSt members to the IDR/begin process of adding social determinants of health to EMR
Bidirectional Education and TWD	<ul style="list-style-type: none">- Utilize OCOH more widely across state of Florida- Provide customized micro-education (pending SBIR)
Building Trust	<ul style="list-style-type: none">- Predictive Algorithms with baseline trust to help facilitate f/up interventions with community members- Community benefit report: CHNA

We humbly acknowledge all CE partners,
HealthStreet faculty, staff, members, CTSI
and funders.

HealthStreet

RESEARCH HELPING PEOPLE



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[@UFHealthStreet](https://twitter.com/UFHealthStreet)