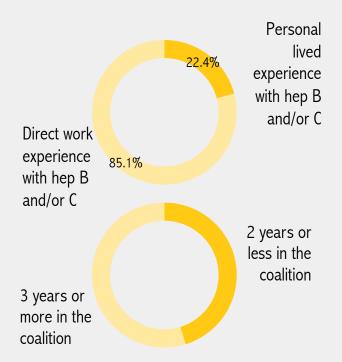
# HEP FREE NYC CHECK-IN SURVEY RESULTS

**June 2021** 

### **COALITION SURVEY**

- Purpose: check-in on coalition, especially given changes during COVID
- Distributed Winter 2021
- 84 responses thank you to those who participated!
- Limitation: the participants who responded to this survey are likely more active in the coalition than the ones who did not take the time to respond

# WHO RESPONDED?



# Respondents participate in an average of 1.8 coalition initiatives

General participation 45.2% 4 - - ^ NYC Hep C Task Force 44.0%

NYC Hep B Coalition 31.0%

Hep C Telemedicine Workgroup —13.1%

Advocacy Committee —11.9%

CHIPO -7.1%

Awareness Day Planning Committee -7.1%

Research Committee 4.8%

Advisory Board 4.8%

Communications Committee 3.6%

# WHO RESPONDED?

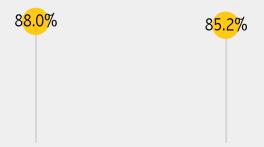
Respondents participate in an average of 4.4 modalities

The more initiatives they took part in, the more ways they contributed to the work of Hep Free NYC.\*\*\*

8 <mark>8.1</mark> %	Read emails (newsletters, meeting highlights)
8 <mark>5.1</mark> %	Attend meetings
6 <mark>8.7</mark> %	Use hepfree.nyc website
6 <mark>4.2</mark> %	Attend trainings
41.8%	Attend awareness events
35.8%	Follow on social media
28.4%	Respond to action alerts
25.4%	Send staff or representative to meetings

## SATISFACTION WITH HOW THE COALITION OPERATES

Respondents' satisfaction with their coalition experience remained high despite pandemic-related changes.



Overall coalition experience Experience during pandemic



This is an incredible group which has greatly increased capacity of hepatitis care and access to care in NYC.

The resources are unmatched!! The networking provided and opportunity to connect with other community organizations to collectively work to meet our varied patient needs. Trainings are phenomenal.

[During the pandemic] the coalition has continued its great work and expanded with the increased relevance of the telemedicine workgroup.

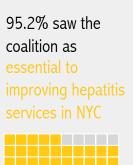
## SATISFACTION WITH HOW THE COALITION OPERATES

#### Respondents agreed that coalition leadership:

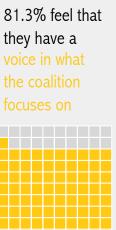
Is ethical	98.2%
Is respected in the coalition	96.4%
Has clear vision for the coalition	9 <mark>4.6</mark> %
Gets things done	94.6%
Keeps the coalition focused on tasks and objectives	9 <mark>2.8</mark> %
Works collaboratively with coalition members	91.1%
Utilizes the skills and talents of many, not just a few	91.1%
Intentionally seeks others' views	8 <mark>9.3</mark> %
Is skillful in resolving conflict	8 <mark>7.5</mark> %
Controls decisions	76.4%
Controls discussions	71.4%

# APPRECIATION OF COALITION ACCOMPLISHMENTS, BUT LOW SENSE OF INFLUENCE

96.8% saw
agreement about coalition priorities among participants











# SATISFACTION WITH CAPACITY BUILDING

I like that we are notified of all new developments regarding hepatitis
C and B treatments. In addition to creative ways to reach patients for linkages to care.

Each year we grow and learn together which builds strength in our ability to be our best for the communities we serve. Respondents agreed that the coalition helped build their organizations' capacity to:

Learn from Hep Free NYC partners	93.8%
Provide hepatitis education	93.7%
Identify communities at risk	92.3%
Provide or coordinate hepatitis screening, care	86.1%
Advocate for prioritizing hepatitis services	86.0%
Advocate for funding hepatitis services	85.7%
Apply for grants to support hepatitis services	69.8%

# INTEREST IN MORE CAPACITY BUILDING

# Respondents agreed that their organizations would benefit from:

Addressing hepatitis related stigma and discrimination	62.7%
Publicity or media to recruit for our programs	49.2%
Effective use of social media	47.5%
Conducting hepatitis education/awareness	45.8%
Fundraising to support hepatitis programs	45.8%
Advocacy training	40.7%
Establishing linkage to care/navigation	40.7%
Help starting or improving hepatitis screening	39.0%
Identifying referrals for our hepatitis patients	37.3%

## INTEREST IN MORE CAPACITY BUILDING

- Addressing COVID-related barriers to outreach, linkage to care, and treatment
- Destigmatizing substance use as a barrier to treatment
- Addressing comorbidities involving chronic and communicable diseases
- Expanding telehealth
- Outreach to young people, LGBTQ+ identifying people
- Guidance on prior authorizations and insurance updates; how to troubleshoot insurance issues
- Supporting unhoused patients to maintain & complete treatment
- Point of care & decentralized testing

IN THE CHAT:
What would
you add to
this list?

# THANK YOU!

Questions?