2024

Iowa Community HUB
Landscape Assessment Report

Scope and Reach of Evidence-based Falls Prevention Programs & Falls Prevention Activities in Iowa

Iowa Community HUB Landscape Analysis

"Advancing population health requires a shared commitment and the Iowa Community HUB is bringing key partners and providers together for this cause."

Background

A research team from the Iowa State University (ISU) Translational Research Network (U-TuRN) developed and distributed the "*Iowa Community HUB Landscape Assessment*" Survey in collaboration with Iowa State Extension and Outreach (ISEUO) and leaders from various organizations affiliated with the Iowa Community HUB. The assessment was conducted as part of a statewide initiative focused on improving access and addressing health disparities in arthritis care in Iowa.[1] The project is funded through a specific multi-component cooperative agreement with the Centers for Disease Control and Prevention (CDC) - *State Public Health Approaches to Addressing Arthritis* (CDC-RFA-DP-23-0001). [2] Consistent with the focus on arthritis, the specific goal of the assessment was to assess the strengths, resources, and needs to support the statewide dissemination of Arthritis Appropriate Evidence-Based Interventions (AAEBIs) in Iowa, including the evidence-based falls prevention programs (Enhance Fitness, OTAGO Exercise Program, Tai Chi for Arthritis, Fit & Strong!, Stay Active and Independent for Life (SAIL), Tai Chi Quan – Moving for Better Balance) .

This brief report, developed in collaboration with the ISU Partnerships in Prevention Science Institute (PPSI), is designed to provide critical information regarding the scope and reach of AAEBIs and to also provide insights about the barriers and challenges involved in reaching those who are disproportionately affected by arthritis, such as those in rural counties/communities and those from traditionally underserved populations. The results are intended to summarize overall patterns across the state and to serve as a guide for the project team and the broader set of affiliated stakeholder organizations and partners that share a commitment to enhance arthritis care and fall prevention programming for older adults in Iowa. Additional details on the assessment will be summarized in a final manuscript that will be prepared on the results. Links to interactive maps based on the data will also be shared to enable additional exploration and visualization of the data. Individual-level responses are not reported, and all survey respondent information remains confidential.

For additional information or questions, please contact our U-TuRN group at uturn@iastate.edu.

Credits: Key members of the project team that contributed to the development and release of the Landscape Assessment include Greg Welk and Abbie Coniglio from the U-TuRN team, Trina Radske-Suchan and Renee Allard from the HUB team, and Deb Sellers and Dawn Dunnegan from the ISUEO team. Key members from the research team that led the evaluation, processing, and visualization of the data include Nick Lamoureux and Chris Seeger from U-TuRN and Cassandra Knutson from PPSI.

---

[1] Statewide Delivery of AAEBIs through a Community Hub Model: A Component A Project in Iowa - 1 NU58DP007476-01-00).
[2] The project was supported through funding by the Centers for Disease Control and Prevention of the U.S. Department of Health and Human Services (HHS). The contents are those of the project team and do not necessarily represent the official views of, nor an endorsement by CDC/HHS or the U.S. Government.

Respondent Profile

One of the key goals of conducting the Landscape Assessment Survey was to obtain information from all Iowa counties. At the time of analysis (for the purpose of this report), a total of 325 respondents completed the survey in full representing 83 out of Iowa's 99 counties. Approximately 49.5% of respondents selected that they work in, or serve, rural communities in Iowa, whereas 50.5% of respondents work in, or serve, urban communities.

The distribution of survey respondents is depicted in **Figure 1** with darker counties reflecting urban counties and lighter shaded counties reflecting rural counties.
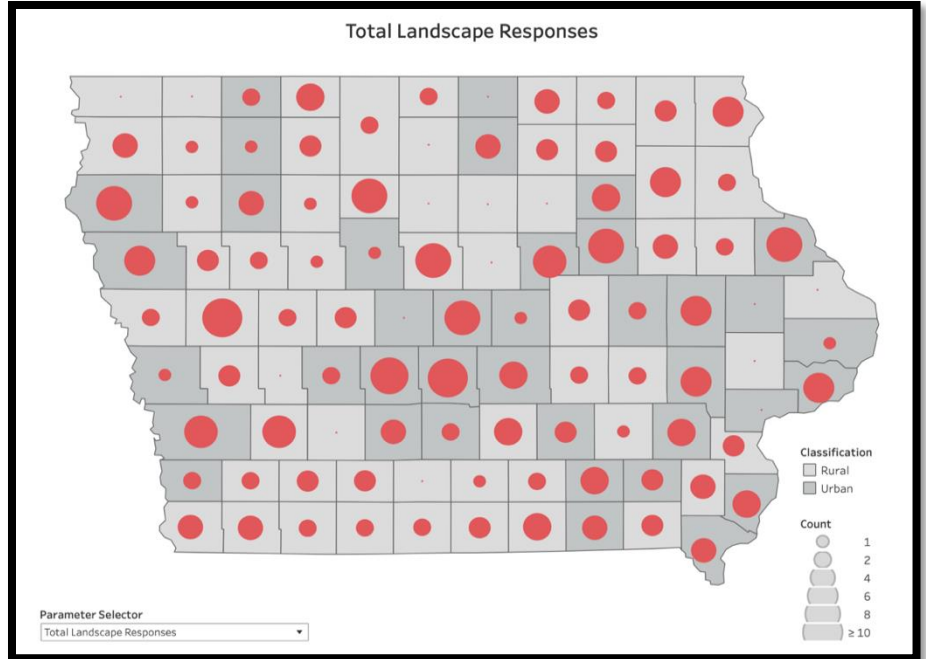

Figure 1. Distribution of Survey Respondents

Survey respondents were asked to report on the nature of their employment as well as the type of organization they work for, with, or through. In total, 91.4% of respondents work full-time for their organizations, 6.2% work part-time, and the remaining 2.4% represent respondents who identified that they are "self-employed", "retired", or "other" (e.g., semi-retired). The plot in **Figure 2** summarizes the primary types of organizations that the survey respondents are affiliated with.
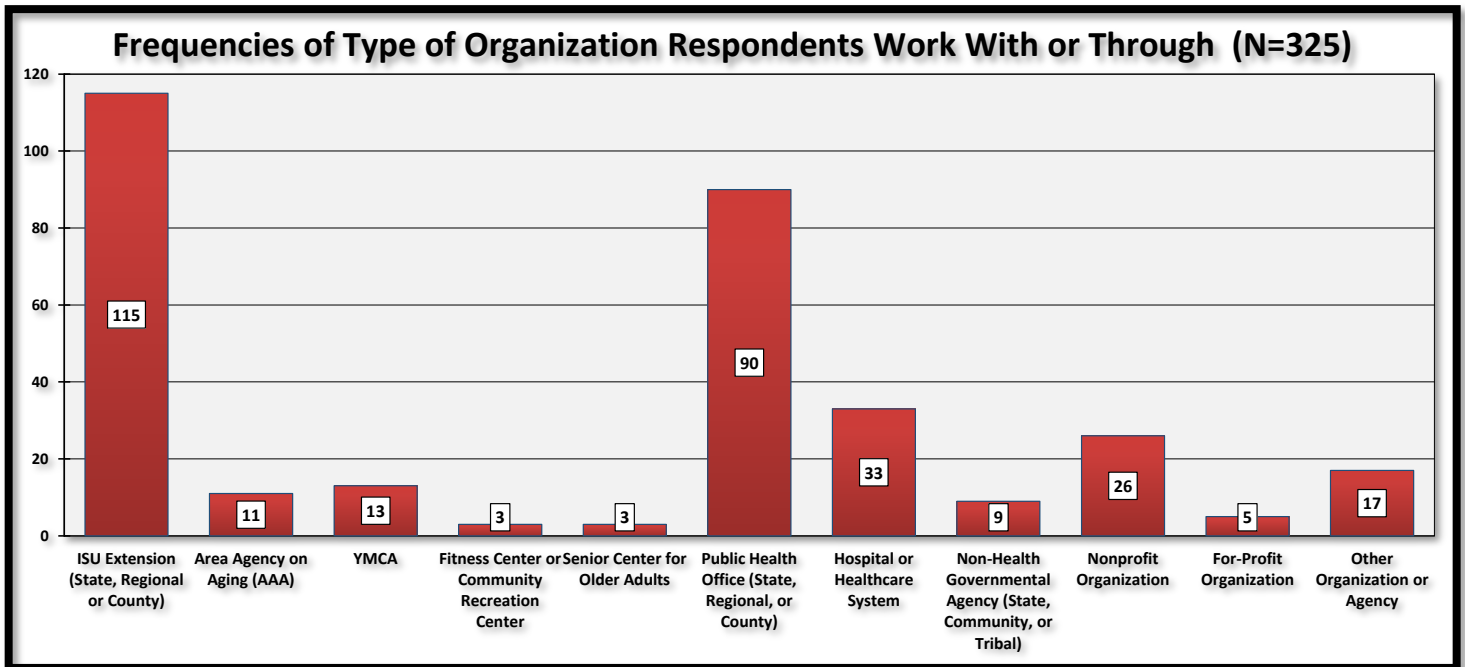

Figure 2. Organizational Affiliations of Respondents

Respondent Roles & Perspectives on Health-Related Programming

The Landscape Analysis sought to capture perceptions from an array of stakeholders including those involved in program delivery and program management, as well as public health leaders and individuals that facilitate or promote programming. A summary of the breakdown of the respondents' roles by categories of involvement with evidence-based programs/interventions is provided in **Figure 3.** Available options included: public health coordination, clinical care, program delivery, and program management.

Respondents also provided responses to more *specifically* characterize the role they have within their organizations. The majority of respondents (42.5%) indicated that they were the Director/Administrator of their organization, and another sizable percentage (22.2%) indicated that they played Program Manager/Coordinator roles. The remaining roles respondents identified included: Support Staff (5.5%), Clinician/Healthcare Provider (6.2%), Community Health Educator (5.2%), Exercise Program Leader (1.8%), Project Supervisor (1.5%), Health Coach/Personal Trainer (0.6%), and Other (e.g., Abuse Specialist, Healthcare Administrator, Childcare Consultant; 14.5%).

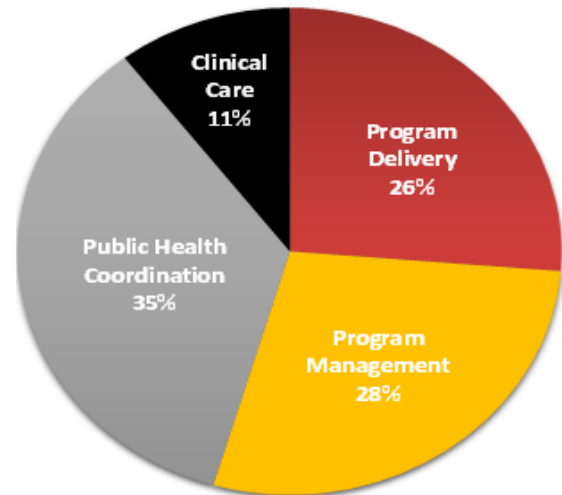**Primary Role Respondents Bring to EBIs (N=308)**

Figure 3. Breakdown of Respondent Roles by Category.

Familiarity with Iowa Community HUB and the Iowa Falls Prevention Coalition

The Iowa Community HUB (HUB) is a nonprofit community care hub working with community partners to connect Iowans with meaningful evidence-based programs with a focus on reducing health disparities for priority populations experiencing greater obstacles to health. The HUB is statewide and collaborates across the state to maximize resources and support clinic-community linkages to improve the health and well-being of Iowans. The HUB follows guidelines and strategies endorsed by the Administration for Community Living (ACL).

One goal of conducting the Landscape Analysis was to identify the current level awareness of the HUB and the HUB's activities. **Figure 4** below represents a total of 290 responses to this question.
- 7.9% of respondents (23 total) indicated that "they are already affiliated with the HUB";
- 20.7% of respondents (60 total) indicated that they "are aware of the HUB, but not affiliated"; and
- 71.4% of respondents (207 total) indicated that they "are not aware of the HUB before receiving the survey".

Respondents' Level of Familiarity with HUB (N=290)

- Not Aware Before the Survey 71%
- Already Affiliated 8%
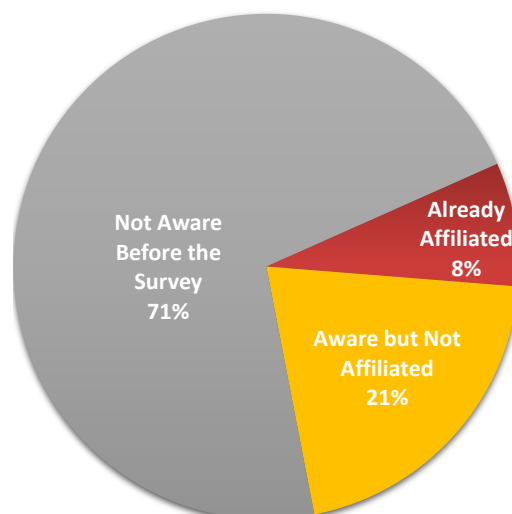- Aware but Not Affiliated 21%

Figure 4. Breakdown of Respondents' Familiarity with the HUB.

The Landscape Assessment Survey was conducted in collaboration with the Iowa Falls Prevention Coalition. A goal of the Coalition is to increase awareness and expand knowledge around falls risk and prevention, including falls prevention programming. Individuals with arthritis are at a higher risk of falling.

Respondents of the survey were asked to indicate their preference concerning their interest for collaborative opportunities to work on falls prevention activities in partnership with the Iowa Falls Prevention Coalition. The following responses were offered:
- "I am already affiliated with the Coalition"
- "I would like to be connected and receive information"
- "I am not sure yet, but would like to learn more"
- "I am not interested at the present time"

Of those who addressed their preference,
- 5.2% of respondents indicated that they are already affiliated with the Coalition;
- 44.1% noted that they "are not sure yet, but would like to learn more";
- 17.9% specified that they "would like to be connected and receive information";
- and 32.7% expressed that they were "not interested at this time".

Respondents who indicated that they were already affiliated with the Coalition (5.2%; 17 total responses) represented both rural and urban areas of Iowa. Notably, 6 of the 17 respondents who indicated that they are already affiliated with the Coalition work in, or serve, rural communities, including Buchanan, Carroll, Hamilton, Henry, Marion, and Union Counties. The other 11 respondents represent urban communities in Iowa, including Black Hawk, Cerro Gordo, Dallas (3), Davis, Johnson, Polk (3), and Story Counties.

Scope and Reach of Arthritis Appropriate Evidence-Based Interventions (AAEBIs)

The Landscape Analysis was specifically focused on capturing the availability of Arthritis Appropriate Evidence-based Interventions (AAEBIs) in the state and identifying if patterns vary between urban and rural counties.

This section includes responses from questions concerning familiarity, gaps, and reach of AAEBIs within the state. This section of questions was intended to identify what gaps exist currently in the state with the expectation of using the shared perspectives to improve efforts to expand programming and reach rural populations, as well as those individuals at greatest risk.

There are currently 23 recognized AAEBIs that are effective in preventing and managing arthritis, broadly split into physical activity programs and self-management education programs. Information was captured on all of them to capture overall exposure, but more specific questions were used to capture specific AAEBIs that have been prioritized, including Walk with Ease and Tai Chi for Arthritis and Falls Prevention (TCAFP). In each section, direct comparisons are made between urban and rural counties since addressing rural disparities in arthritis care is one of the primary goals of the project.

Walk with Ease

Developed by the Arthritis Foundation, the Walk with Ease (WWE) program is a community-based physical activity and self-management education program. While walking is the central activity, WWE is a multi-component program that also includes health education, stretching and strengthening exercises, and motivational strategies.

Respondents in this subset of the Landscape Assessment Survey were first asked to indicate whether the WWE program is (or was) available in their community or county with available options of "Yes", "Not Sure", or "No". The maps provided below show a comparison of respondent reports of whether the Walk with Ease (WWE) program is available (or was), or is not available, in their community, or county, mapped by where the programs are reported to be available in the state. The darker shaded areas of the state are urban areas, whereas the lighter areas are classified as rural. Reports of program availability is shown on the left (**Figure 5**), and reports of not available is shown on the right (**Figure 6**).
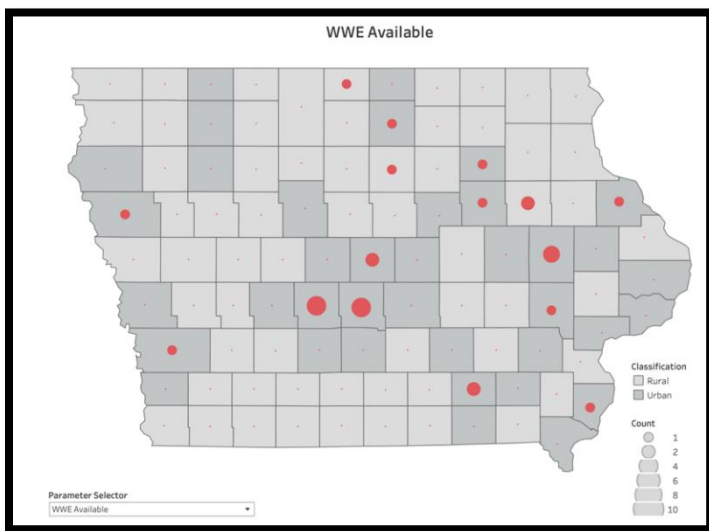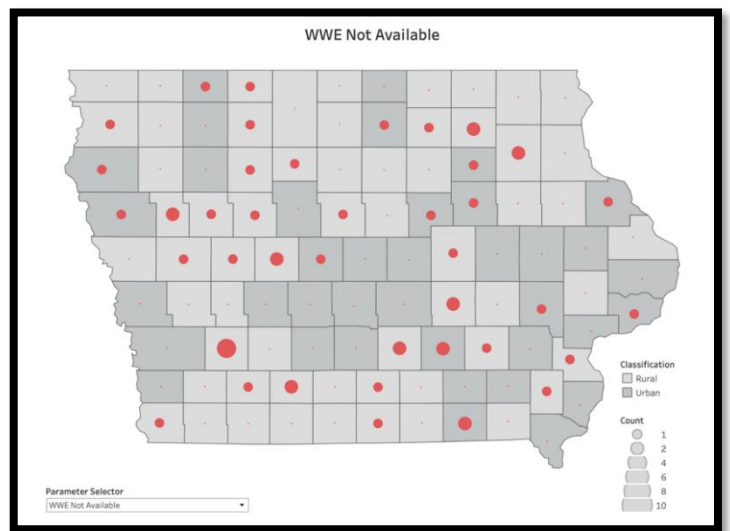

Figure 5. Availability of WWE   *Figure 6. Non-Availability of WWE*

If respondents identified that WWE is available, or was available, in their county or community, they were then asked if the WWE program was delivered by themselves, or the organization they represent. Only 23 of 325 total respondents addressed this question:
- A total of 5 respondents (1.5%) identified that they deliver the WWE program;
- A total of 7 respondents (2.2%) indicated they did not deliver the WWE program; and

- A total of 11 respondents (3.4%) indicated that while they did not deliver WWE, others in their organization did deliver the program.

The CDC-funded project also provides free access to an online WWE training course that was developed by the Arthritis Foundation, as well as free continuing education training and support to further enhance the delivery of WWE programming in the state. The Landscape Assessment Survey was used to garner respondent interest in being contacted to receive additional information regarding the online WWE training course. Of those who addressed this follow-up question (203 total):

- 8.3% of respondents indicated, "Yes, I am already trained, but would like to have additional support to further enhance the programming";
- 69.4% indicated, "Yes, I am interested in learning more about the training";
- 19% indicated, "No, I am not interested in the training", and;
- 3.3% indicated "No, I am already trained".

Tai Chi for Arthritis and Falls Prevention

Tai Chi for Arthritis and Falls Prevention (TCAFP) helps people with or without arthritis to improve balance to reduce the rate of falls. TCAFP combines slow movement, deep breathing, and focused attention to help people improve strength, balance, and posture.

Respondents were asked to indicate whether the Tai Chi program is (or was) available in their community or county with available options of "Yes", "Not Sure", or "No". The maps provided below show a comparison of respondent reports of whether the Tai Chi program is available (or was), or is not available, in their community, or county, mapped by where the programs are reported to be available in the state. The darker shaded areas of the state are urban areas, whereas the lighter areas are classified as rural. Reports of program availability is shown on the left (**Figure 7**) and reports of not available is shown on the right (**Figure 8**).
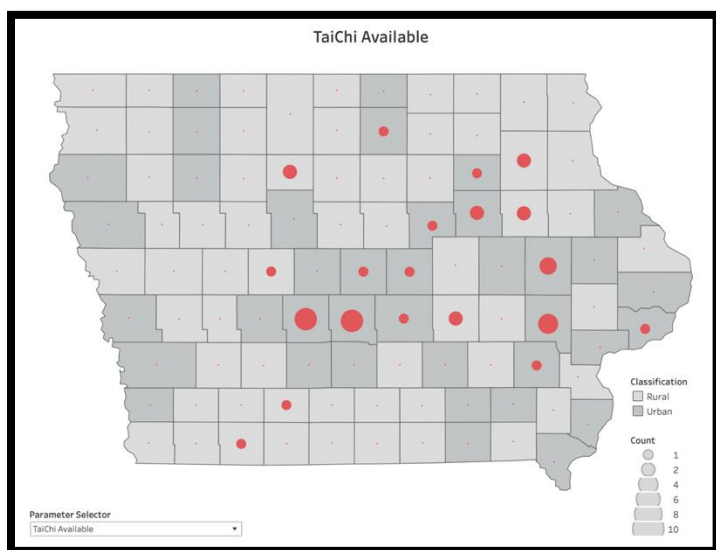

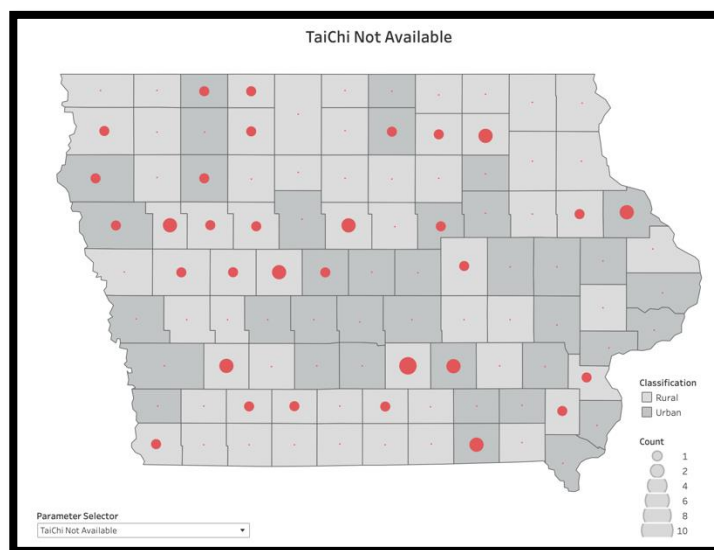*Figure 7. Availability of Tai Chi*

Figure 8. Non-Availability of Tai Chi

Awareness & Availability of Other Arthritis Programs in the State

In order to fully understand the availability of programming for adults with arthritis, the Landscape Assessment Survey also asked respondents to reflect upon their familiarity and/or use of additional arthritis programs in

their county, or communities. The following programs of interest are also recognized nationally as falls prevention programs and include the Enhance Fitness program, Fit & Strong! program, the Stay Active and Independent for Life (SAIL) program, and the Tai Ji Quan: Moving for Better Balance (TJQMBB) program. **Figure 9** below depicts respondents' perceived levels of awareness and availability of these additional programs in the state.

Awareness & Availability of Other Arthritis Programs in the State

Legend: Enhance Fitness, Fit & Strong!, SAIL, TJQMBB

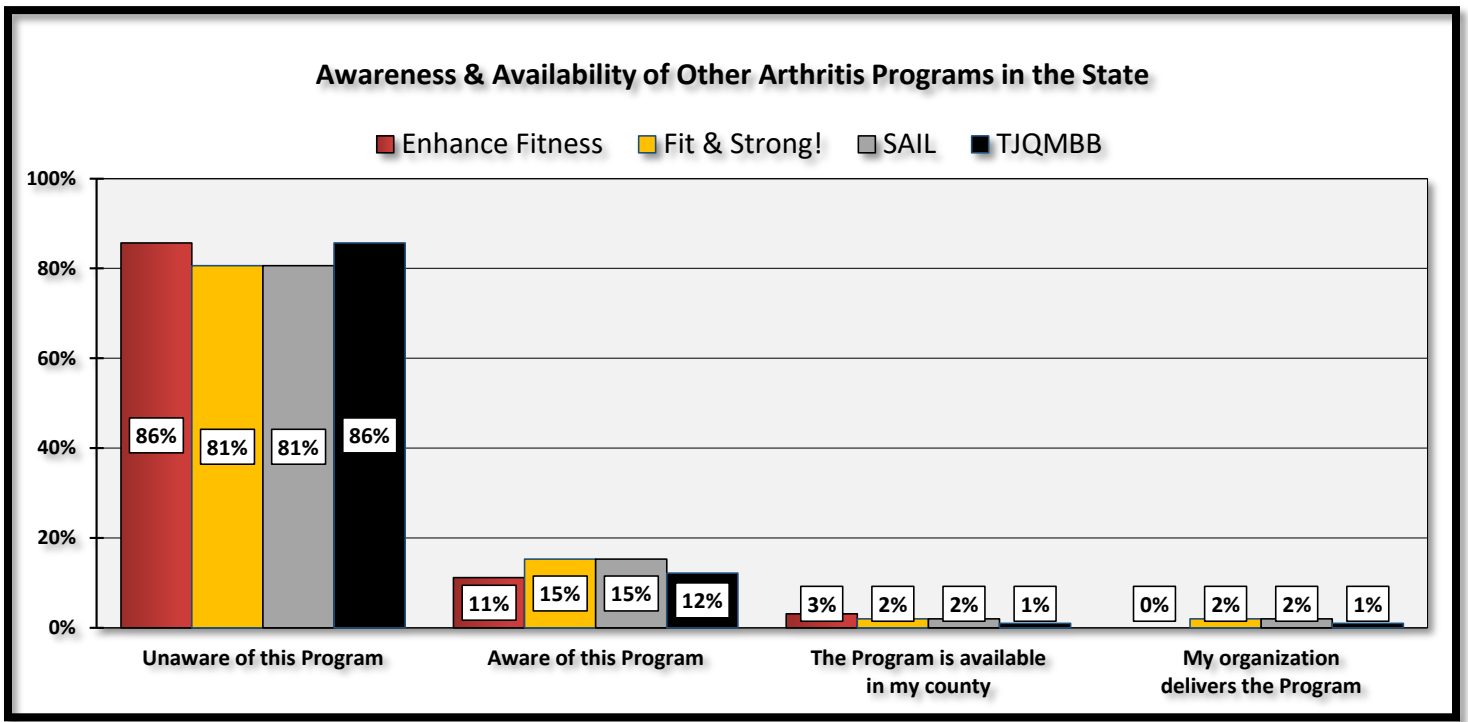| Category	Enhance Fitness	Fit & Strong!	SAIL	TJQMBB
Unaware of this Program	86%	81%	81%	86%
Aware of this Program	11%	15%	15%	12%
The Program is available in my county	3%	2%	2%	1%
My organization delivers the Program	0%	2%	2%	1%

Figure 9. Awareness & availability of other arthritis programs in the state.

Falls Prevention Activities

Another goal of performing the Landscape Analysis was to identify the scope and reach of falls prevention activities across the state. Many stakeholders may be informed about the importance of evidence-based arthritis and falls prevention programming, but not as familiar with other falls prevention activities across the state. Therefore, the survey aimed to capture the scope and reach of falls prevention activities and explore opportunities for linking them to programming efforts. This subset of survey questions asked survey respondents to reflect on falls prevention efforts in their organization, community, or county.

First, respondents were asked how central, or important, is falls prevention to their work, or the work of their organization. Notably, a majority of the respondents indicated that falls prevention efforts are "very important or central" to their work or "somewhat important" to their work. **Figure 10** below depicts the summary of responses for this survey question.

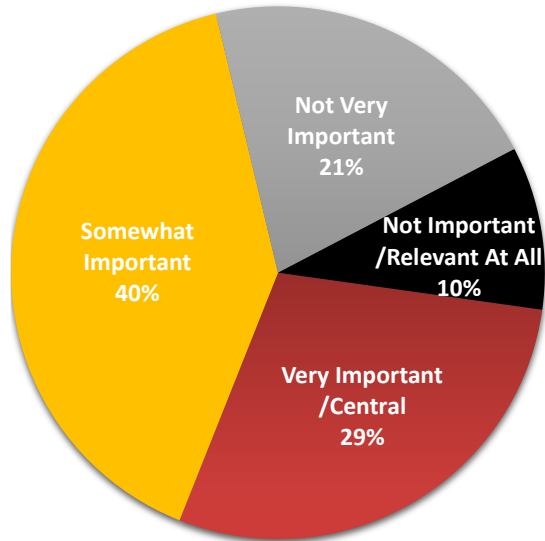**Importance of Fall Prevention (N=323)**

Figure 10. Breakdown of respondent ratings of perceived importance of fall prevention activities.

Awareness & Availability of Falls Prevention Programming

Respondents were then asked to indicate whether they were in a position to comment on the availability of falls prevention programs in their organization, community, or county. A total of 103 respondents out of 325 total responded, "Yes"; meaning that they were able to comment further. Out of 103 respondents, **Figure 11** below depicts the extent of available falls prevention programs in their organization, community, or county.

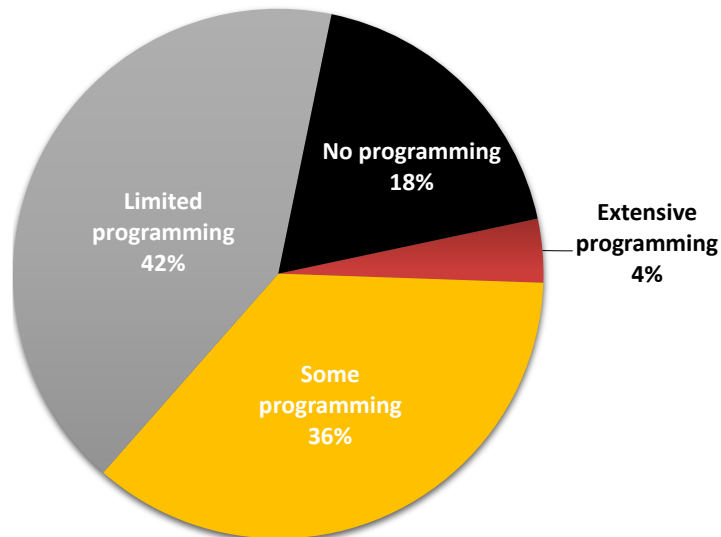**Availability of Fall Prevention Programming (N=103)**

Figure 11. Availability of fall prevention programming in respondents' organization, community, or county.

Similar to the question concerning awareness and availability of other arthritis programs in the State of Iowa (page 7), this subset of respondents was asked to share their familiarity with and/or use of <u>falls prevention</u> programs across the state. Programs of interest included A Matter of Balance program, the Bingocize program, the Healthy Steps in Motion program, the Home Hazard Removal Program (HARP), and the Stepping On program. **Figure 12** depicts respondents' perceived levels of awareness and availability of the additional falls prevention programs in the state.
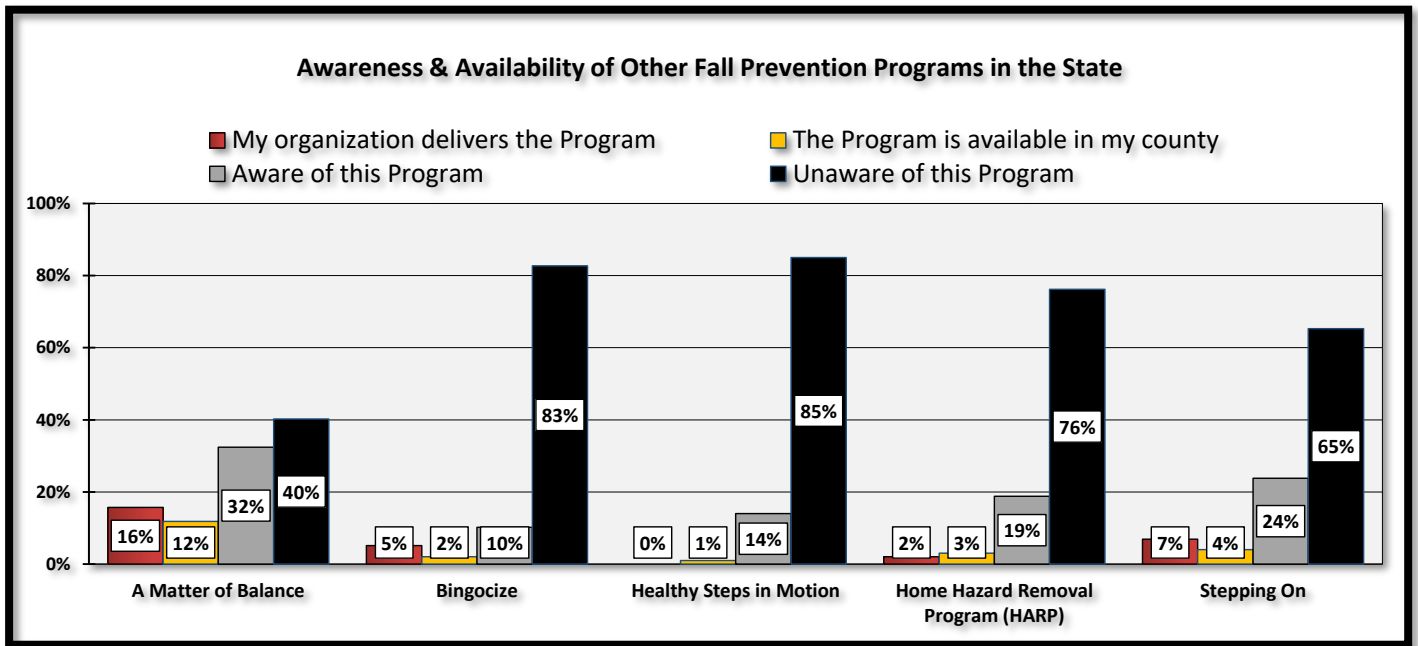

Figure 12. Awareness & availability of other fall prevention programs in the state.

If respondents indicated that they, or their organization, are involved in specific aspects of falls prevention in their county, or community, they were asked an additional set of questions. A total of 57 respondents answered "Yes" and were asked more specifically, which falls prevention activities are provided by their organizations. The responses to this question are shown in **Figure 13**.
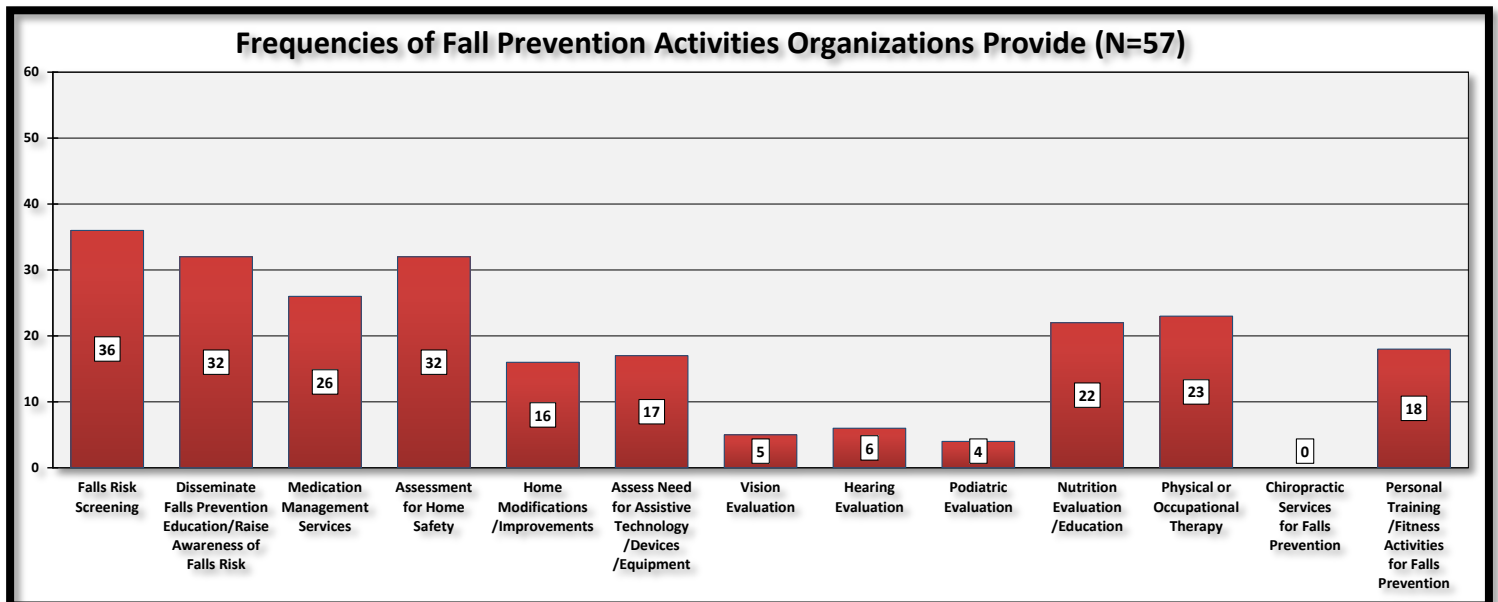

Figure 13. Falls Prevention activities provided by respondent organizations.

Familiarity & Training Interest Concerning Falls Risk Assessment Tool

The Landscape Analysis survey respondents were also asked how familiar they are with the use of the Centers for Disease Control and Prevention's (CDC) STEADI (Stopping Elderly Accidents, Deaths, and Injuries) falls risk assessment tool for detecting risks for falls. **Figure 14** depicts the summary of responses for this survey question.

Out of a total of 324 respondents who answered this question of the survey:

- 73.8% (n=239) of respondents indicated they were not familiar with STEADI;
- 19.1% (n=62) indicated they were familiar, but have not used the screening tool, and;
- 7.1% (n=23) indicated they have heard of the screening tool and have utilized it.

Familiarity with STEADI (N=324)
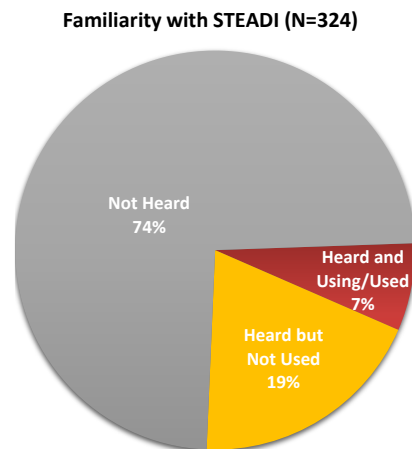
Figure 14. Breakdown of respondent familiarity with STEADI risk assessment tool.

Dependent upon the survey respondents' answers provided concerning familiarity with STEADI, they were then asked about their interest in receiving free online training offerings.

- For those that answered that they "had heard of STEADI, and use/used it" – respondents were asked if they would be interested in free, online training <u>to refine</u> their implementation of the falls risk assessment.
- For those that answered that they "had heard of STEADI, but have not used it" – respondents were asked if they would be interested in free, online training to learn how <u>to implement</u> the falls risk assessment.
- For those that answered that they were not familiar with STEADI – respondents were asked if they would be interested in free, online training <u>to conduct</u> falls risk screening in their community.

Figure 15 included below depicts a summary of the responses for the combination of these three questions. Depicted in yellow, are responses indicated "Yes, please contact me", in red, "I would like more information, and in gray, "No, not at present time".
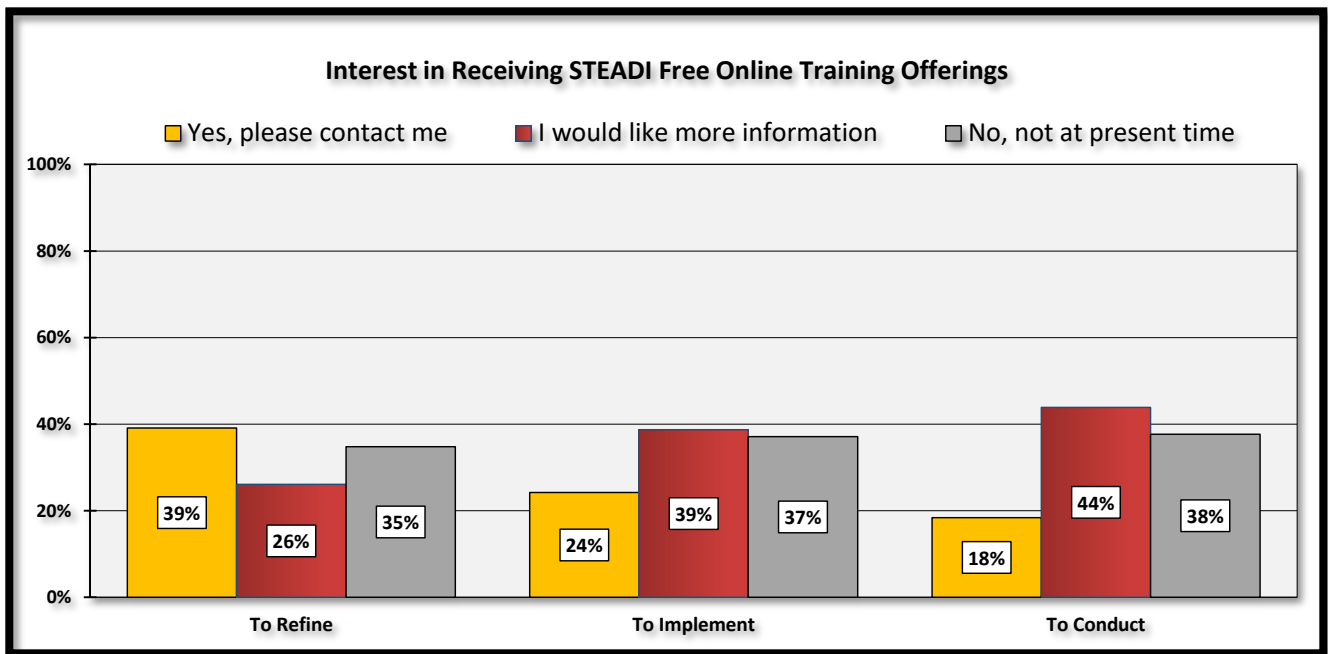
Interest in Receiving STEADI Free Online Training Offerings

Legend: Yes, please contact me | I would like more information | No, not at present time

To Refine: 39% / 26% / 35%
To Implement: 24% / 39% / 37%
To Conduct: 18% / 44% / 38%

Figure 15. Respondent interest in receiving STEADI online training offerings.

Key Takeaways

The Landscape Assessment is a key component of the ongoing 5-year (CDC-funded) project which will help to advance arthritis and falls prevention programming across the State of Iowa. The results provide a baseline to build from as we collectively work to increase access to AAEBIs and to promote clinical screening and patient referrals into these programs. In addition to capturing information about the scope and reach of programming, the survey provided insights about needs and gaps in awareness, education, capacity and support for programming that we will collectively work to address. The survey enabled respondents to share interest in the overall activities of the Iowa Community HUB and to also express interest in training to deliver some of the priority AAEBIs currently targeted in the project (Walk with Ease, Tai Chi, and Better Choices/Better Health).

The integrative maps and comparisons of rural and urban patterns provide unique insights that are also important in improving the public health infrastructure in Iowa. The focus of the Landscape Assessment was on the delivery and/or promotion of AAEBIs, but the patterns and issues are likely evident for other evidence-based interventions across our state. The Landscape Assessment also included a specific section on falls prevention programming as there are well documented synergies between fall risk programming and arthritis programming. Promoting awareness of fall risk and facilitating fall risk screening in clinical and community settings are key strategies to promote enrollment in evidence-based falls prevention programs – many of which are also AAEBIs.

The Landscape Assessment also includes perspectives from clinicians regarding barriers and needs to facilitate referrals of patients. A separate version of the Landscape Assessment provides complementary insights on how to increase and support clinical referrals. The Iowa Community HUB is at the core of all these efforts. It provides a unified and integrated structure that addresses the needs of clinicians and healthcare systems as

11

well as the needs of those in community-based agencies that coordinate or deliver evidence-based programs. The HUB is ideally positioned to simultaneously increase clinical referrals for evidence-based programs while also building the capacity in community agencies to deliver and support these programs.

We can do more when we do it together!

Thanks for your continued interest and support for the Iowa Community HUB and the CDC-funded Component A project that is supporting some of this work *(Statewide Delivery of AAEBIs through a Community Hub Model: A Component A Project in Iowa - 1 NU58DP007476-01-00).*

If you are interested in learning more about the **Iowa Falls Prevention Coalition**, contact Trina Radske-Suchan at tsuchan@iacommunityhub.org; visit the IFPC webpage at https://iacommunityhub.org/iafallscoalition/.

If you are interested in learning more about the **Iowa Community HUB** for connecting patients to falls prevention programs or for support in your delivery of falls prevention programs or for general information, click the form link here: **HUB Interest Form.** You can also visit the webpage at https://iacommunityhub.org/.