2013 Community Health Assessment Report
Summary of January 16, 2013, Stakeholders Meeting
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Event Overview

DeKalb Medical and DeKalb County Board of Health collaborated to provide an overview of health issues affecting residents in DeKalb County, Georgia and the Hillandale area (i.e., Lithonia and Redan) in the *2013 Community Health Assessment Report*. The purpose of the session was to present key findings from the report and to identify priorities for health improvement and potential community resources. This was accomplished by a series of activities that provide a mutual exchange of information, ideas and resources between community members, the hospital and the health department.

Stakeholders that were invited and attended the session included community members, nonprofit organizations, the private sector, local government and universities that live and work in DeKalb County. They have the knowledge about the community – its needs, concerns, issues – to assist DeKalb Medical in mobilizing community partnerships and to identify and solve health issues affecting DeKalb County residents.

The following is a summary of the 2013 Community Health Assessment Stakeholder Meeting.
Introduction

Participants were welcomed and provided with an overview of the meeting.

Key Findings Presentation

Key findings from the 2013 Community Health Assessment Report were presented to attendees. The report examines the health status of residents in DeKalb County and the Hillandale area (i.e., Lithonia and Redan).

Small Group Activity

Five small groups were each given excerpts of the 2013 Community Health Assessment Report to review and discuss. The groups were then asked to answer the following questions:

- What do you most like about the section and why?
- What do you least like about the section and why?
- What do you think about the wording of the section?
- How clearly do you think the graphs, tables and maps present the data and why?
- What community resources do you know about that can assist DeKalb Medical in addressing the health issues discussed in this section?

The small groups were next asked to identify three key findings from their section. Below is a summary of the responses received from each group.

Injury

- Attendees most liked how easy it was to read the graphs, the mapping of the ER visits and the amount of data provided overall.

- Participants least liked that the report lacked the following: graphs for unintentional versus intentional injuries, were not included, the percentages of blacks and whites in the entire county, injury types by color on the ER Visits map and the designation of cities on the map.

- Overall, participants found the introduction section to be clearly and well worded.

- Attendees found the graphs, tables and maps easy to read.

- The following are community resources listed by attendees that can assist DeKalb Medical in addressing the health issues discussed in this section:
  - AAA Driver safety program
  - Women Watch AFRIKA
    - auto maintenance for women
- Lou Walker Senior Center (or other local senior centers)
- Domestic violence organizations
- The need for more community fall prevention organizations/programs was identified.

**Behavioral Health**

- Participants most liked how the graphs were formatted.

- Participants least liked the limited amount of data this section contained and the fact that childhood/adolescent data from 2008-2010 was missing.

- Attendees were satisfied with the wording of the section.

- No comments were made on the clarity of the data presented by graphs, tables and maps.

- The following are community resources listed by attendees that can assist DeKalb Medical in addressing the health issues discussed in this section:
  - CDC
  - Morehouse School of Medicine
  - Community support groups

**Maternal and Child Health and Refugee Health**

**NOTE:** The comments for both sections are the same unless otherwise noted.

- Participants most liked the compilation of data, the inclusion of prevention/wellness tips, the listing of additional references and the fact that this section created awareness/realization of the need for action.

- Attributes of this section that participants liked least included the lack of comparison data (such as that of the state of Georgia), stating that a description of the population (social-economics, education and size) is not referenced. Participants also least liked the existence of health disparities.

- Specifically for the Maternal and Child Health section, it was suggested prevention tips should be placed in the related section (for example, place healthy pregnancy tips near pregnancy data).

- Attendees also mentioned that they least liked that the refugee section had limited prevention tips.

- Participants found the wording of the section to be easy to comprehend.
• In regards to how clearly the graphs, tables and maps presented the data, the participants suggested that no chromatic color be used.

• The following are community resources listed by attendees that can assist DeKalb Medical in addressing the health issues discussed in this section:
  
  o Emory University
  o CDC
  o Local health department
  o Community organizations
  o Higher education
  o Refugee Family Services
  o Insurance organizations
  o Medical and health organizations

• Below are three key findings from each section that the participants identified and prioritized according to the importance or significance to DeKalb County residents:
  
  o Maternal and Child Health
    • Infant mortality
    • Risk behaviors
      • Pre-teen sexual intercourse
      • Violence
    • Economic impact of low birthweight babies
  o Refugee Health
    • Health screenings are completed on a high percentage of refugees
    • Leading causes were dental, tuberculosis and vision
    • Breakdown by country of origin
    • Sustainable outreach

Infectious Disease (HIV/STDs)

• Participants most liked how user friendly the section was, how readable it was for multiple audiences, the use of definitions, the font size and graphics and the inclusion of key steps for preventing risk behaviors and resources.

• Participants least liked that this section was only in English, that the data do not reflect the racial/ethnic disparity, the lack of clarity (i.e., what the data mean), that there were not more specifications (i.e., demographics of the population), that there was a lack of portable fact sheets/cards, that “big picture” statistics of DeKalb County were not included (i.e., 1 in every…) and that there were no documents that detailed strategic target interventions for populations.
• Attendees found the wording of the section to be user friendly (appropriate for use across audiences). It was suggested that consistent terminology be used (i.e., p.41 and p.42 not consistent in phrasing of condom recommendations), that sections/topics be bolded and that there be a listing of DeKalb County Board of Health contact information/staff directory.

• Participants indicated that they found data to be clearly presented by the graphs, tables and maps. It was suggested that more graphs and pie charts be included in this section.

• The following are community resources listed by attendees that can assist DeKalb Medical in addressing the health issues discussed in this section:
  - Non-profits
    - Center for Pan Asian Community Services (CPACS)
  - Chambers of Commerce
  - Business community
    - Georgia Power
    - AT&T
  - Atlanta Women’s Foundation
  - Kaiser Permanente
  - Emory University
  - Healthy Mothers, Healthy Babies Coalition of Georgia (hmhbga.org)
  - United Way
  - AID Atlanta
  - Jerusalem House
  - Planned Parenthood

• Below are three key findings from this section that the participants identified and prioritized according to the importance or significance to DeKalb County residents:
  - Chlamydia as the #1 STD
  - Men who have sex with men (MSM) focus for HIV
  - No identified/reported risk factor (NRR/NIR) – large percentage in DeKalb

**Infectious Disease (Vaccine Preventable/Invasive Bacterial)**

• Participants most liked the explanation of disease, the listing of references for where to obtain more information, that the section was written at an appropriate reading level for the average household, the inclusion of easy-to-understand graphics and figures, the incorporation of prevention tips and the relevance of the data.

• Attendees least liked that some conclusions were misleading (use of percentages vs. rates), the lack of data from some years (i.e., 2009), the lack of causal investigation, that there was not a breakdown of age, that there was not more specific data included and the inclusion of data from
outside DeKalb County lines as it was felt that individuals may visit both of the hospitals but live outside of county lines.

- Participants believed that the wording of this section was at the appropriate reading level; but that some of the conclusions may appear misleading to the average lay person.

- Participants found that the graphs were easy to understand and suggested that rates also be included.

- The following are community resources listed by attendees that can assist DeKalb Medical in addressing the health issues discussed in this section:
  - Georgia Department of Community Health
  - Community-based organizations
    - Boat People SOS
    - Center for Pan Asian Community Services
    - Asian American Resource Center
  - Morehouse School of Medicine (Dr. Satcher)
  - Mercer/Emory colleges of pharmacy
    - Community based surveys
  - Human Resource contacts
  - Health South

- Below are three key findings from this section that the participants identified and prioritized according to the importance or significance to DeKalb County residents:
  - Need to move toward rates to better understand health disparities among populations
  - ½ of bacterial disease case are pneumococcal
  - DeKalb Medical has significantly increased rate of pneumococcal vaccinations among pneumonia patients

**Chronic Disease**

- Participants most liked the layout of the data, that the presentation was easy to understand and the “What can you do?” section.

- Participants least liked the Cancer Hospital Discharges by Census Tract map on p.21, commenting “What do we do with it?”.

- Attendees added the following questions and respective responses: What do you see for this report? Action Plan.
  - Stated that they would have liken more explanation that the data was self reported
Comparative data – Benchmarks
  - Example county (Ga, National)
  - What can stakeholders in DeKalb do (strategy to address these data?)
  - Case studies in other counties
    - Subpopulations who influence health determinants
      - churches, employers, community groups
  - Best practices – Nationwide
  - Training opportunities
  - Map associated with cities/communities
    - Point of reference
  - Anthropology
    - Social/cultural perspective
  - When can we come back together?
    - Report progress – What did you do with data?
    - Brainstorming – Strategy

In regards to the wording of the section, participants commented that in order to read the report, one needs to have health knowledge/public health background, and that caution needs to be taken when evaluating data/presenting conclusions (i.e., DeKalb vs. hospital specific). They also presented the questions “What conclusions should you draw?” and “What about bias?”.

When asked about the clarity of the graphs, tables and maps in presenting the data, participants suggested the inclusion of comparison data (i.e., national, state, other counties), including the names of cities/communities (service areas) and resources, citing the map on p.21 as an example.

The following are community resources listed by attendees that can assist DeKalb Medical in addressing the health issues discussed in this section:

- Faith-based community health ministries
- Academics
  - Ex: Georgia State University
  - Grad students
- Major employers/Chamber of Commerce
- Insurance companies
- Public health
- Professional associations
- Non-profit/community groups

Below are three key findings from this section that the participants identified and prioritized according to the importance or significance to DeKalb County residents:

- Obesity/overweight data
- Cancers – prostate/breast – why so high?
- Most risks are modifiable
  - Behavior or lifestyle-based
Evaluation Results

Meeting Evaluation

The 25 attendees of the 2013 Community Health Assessment Report Stakeholder Meeting were asked to answer a questionnaire to evaluate the meeting. A total of 17 attendees completed the questionnaire.

Participants were asked to rate statements concerning the meeting on a scale of 1-5; 1-Strongly Disagree, 2-Disagree, 3-Neutral, 4-Agree, 5-Strongly Agree.

The questionnaire consisted of the following statements:

1. The presentation met my expectations and learning needs.
2. The location was comfortable.
3. The small group activity has helped me to understand the report.
4. The meals were appetizing.
5. Overall, I was very satisfied with the meeting.

- The presentation met the expectations and learning needs of the majority of those who attended.
- There was a general consensus that the location was comfortable.
- Sixteen of the 17 participants agreed that the small group activity helped them to understand the report.
- The majority of participants strongly agreed that the meals were appetizing.
- In general, participants were satisfied with the meeting as a whole.
- NOTE – All “Strongly Disagree” responses were from a single participant.
Report Evaluation

Participants were asked specific questions about the report: what they liked or did not like about it, what they felt was missing and if (how) the information they obtained from the report can be used in their organization.

The following is a summary of answers given for the respective questions. Comments were mentioned once unless otherwise noted by a numerical value in parentheses indicating how many times it was stated.

• **What do you like most about it?**
  - Data/graphs
  - Layout (4)
    - Information provided on each section
  - Significant data about various health risk areas
  - User friendly and easy to understand (3)
  - Data collection
  - Comparative data in tables – actual numbers
  - Stats
  - Opportunity to develop coalitions to address needs
  - Inclusion of risk factors

• **What do you like least about it?**
  - It would be helpful to move information toward rates to understand health disparities among populations
  - Need to define “other”
  - Needs to have more strategic focus in terms of specific populations
  - Missing information and years in the report – no years/age groups break-out (2)
    - Incomplete /corrupt data [2009]
  - Maps don’t designate cities (3)
    - Maps don’t include possible resources available in the area
  - Did not preface the racial breakdown of DeKalb County due to only White, Black and Other shown.
  - Not enough comparative data

• **Do you feel anything is missing?**
  - No areas/cities listed on mapping
  - Need additional mapping of specific diseases/groups
  - Need some data on immigrant populations (2)
    - Should add other ethnic groups (e.g., Hispanics)
  - Not enough data on mental health
  - Limited conclusions and action steps
  - Not enough information on disparity
  - Various diverse languages beyond English, Spanish
• Needs more scrutiny of data as is planned
• Needs recommendations for community stakeholders
• Lacks racial breakdown
• Needs comparison to other counties or to the state of Georgia
• Including the business community

Will the information be helpful to your organization? If so, how?

o Yes
  ▪ To aid in awareness/prevention training
  ▪ Sharing the new data with the community in our work to improve service to our consumers
  ▪ Highlights health risks areas
  ▪ Report will be used for education
  ▪ To understand the county’s state of health
  ▪ In promotion of key programs and outreach throughout DeKalb County
  ▪ Can give information to my church congregation and my full-time place of employment
  ▪ Advocating for healthy living since some diseases are preventable
  ▪ Comparison and developing specific action plans
  ▪ Teenage pregnancy information to the young women we mentor
  ▪ Expand to include schools – higher education and K – 12 (colleges, universities and technical schools)
  ▪ Identify priorities for my organization regarding health focus
  ▪ Networking with the other stakeholders was most helpful in providing Healthy Mothers, Healthy Babies Coalition of Georgia some other resources to work with

o No
  ▪ Doesn’t help to zoom in on a particular racial group (i.e., Latino, Asian, refugee, immigrant) in order to address health disparities in a more particular and focused way

o Questions Raised
  ▪ How do we use this data in our everyday work in the city of Decatur
Additional Comments

Participants were free to share further comments or suggestions about the meeting and/or the report.

Listed below are the comments made by participants:

- Excellent meeting and report
- Provide copy or summary of report to attendees by email/website
- Schedule future meetings to develop strategies for addressing needs
- Great to know next steps
- Overall, great work!
- Thank you
- Plan follow-up meeting after stakeholder meeting
Participant Affiliation

Participants received a list of possible affiliations and asked to check all those that applied to them. The list of affiliations included: academia, business, clinician, community-based organization, DeKalb County resident, faith-based organization, government, public health and other.

Thirteen of the participants provided their affiliation.

Note: Each attendee could choose as many affiliations as apply

- There was at least one participant from each affiliation listed.
- Affiliations listed as “other” included: a wellness organization and non-profits, including Healthy Mothers Healthy Babies Coalition of Georgia.
Appendix
Facilitator Guide

2013 Community Health Assessment Report
Stakeholder Meeting

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Wednesday, January 16, 2013 at 8:00 AM

DeKalb Medical
Auditorium in Bobbie Bailey Tower
2701 North Decatur Road
Decatur, GA 30033
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  Evaluation
Session Overview

DeKalb Medical and DeKalb County Board of Health have collaborated to provide an overview of health issues affecting residents in DeKalb County, Georgia, and the Hillandale area (i.e., Lithonia and Redan) in the 2013 Community Health Assessment Report. The purpose of the session is to not only present key findings from the report but identify priorities for health improvement and potential community resources. This will be accomplished by a series of activities that provide a mutual exchange of information, ideas and resources between community members, the hospital and the health department.

Stakeholders invited and attending the session include community members, nonprofit organizations, the private sector, local government and universities. They have the knowledge about the community – its needs, concerns, issues – to assist DeKalb Medical in mobilizing community partnerships and to identify and solve health issues affecting DeKalb County residents.
2013 Community Health Benefit Report
Stakeholder Meeting

Wednesday, January 16, 2013
8:00 am – 1:00 pm

AGENDA

8:00 am -8:30 am Registration/Breakfast

8:30 am -8:45 am Welcome
DeKalb Medical
DeKalb County Board of Health

8:45 am -9:15 am Ice Breaker Activity

9:15 am -10:15 am Key Findings

10:15 am -10:30 am Break

10:30 am -11:30 am Small Group Activity

11:30 am-12:30 pm Working Lunch

12:30 pm–1:00 pm Closing Remarks
# Introduction

**Facilitator:** Nia Mitchell, MPH, CPH

**Objective:**
- ✓ Welcome participants and provide an overview of the stakeholder engagement.

**Materials:**
- ✓ Flip chart, markers

**Time:** 45 minutes

<table>
<thead>
<tr>
<th>TRAINER NOTES</th>
<th>STEPS</th>
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<tbody>
<tr>
<td>1) Preparation - 5 minutes</td>
<td>Before the session begins, the facilitator should…</td>
</tr>
<tr>
<td>2) Welcome – 15 minutes</td>
<td>Representatives from DeKalb Medical and DeKalb County Board of Health introduce their organization, key staff assisting during the meeting and welcome participants to the session.</td>
</tr>
<tr>
<td>4) Ground/Housekeeping Rules – 5 minutes</td>
<td>The facilitator will list and explain a set of ground/housekeeping rules on the screen and board. She will then ask participants if any additional rules should be added. Additional rules should be written on the board or typed in the presentation by the facilitator.</td>
</tr>
<tr>
<td>5) Ice Breaker Activity – 20 minutes</td>
<td>The facilitator asks participants to introduce themselves with their name, their organization/agency and briefly describe an aspect of a “healthy community.”</td>
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Key Findings Presentation

Facilitator: Jessica Grippo, MPH

Objective:
✓ To present key findings from DeKalb Medical’s 2013 Community Health Assessment Report. The report examines the health status of residents in DeKalb County and the Hillandale area (i.e., Lithonia and Redan).

Materials:
✓ LCD, laptop, and screen
✓ PowerPoint slides
✓ Handouts of presentation

Time: 1 hour

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<tr>
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<tr>
<td>1) Preparation – 5 minutes</td>
<td>The facilitator should ensure the following is complete before the presentation begins:</td>
</tr>
<tr>
<td></td>
<td>• LCD, laptop, and screen setup</td>
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<td></td>
<td>• Handouts passed out to participants so they can take notes</td>
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<tr>
<td>2) Presentation – 55 minutes</td>
<td>Completed by the facilitator.</td>
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Small Group Activity

Facilitator: Nia Mitchell, MPH, CPH

Objective:
✓ Review and discuss excerpts of the 2013 Community Health Assessment Report
✓ Identify priorities for health improvement and potential community resources based on the excerpts

Materials:
✓ Flip chart, markers
✓ Excerpts of the 2013 Community Health Assessment Report
✓ Activity handouts

Time: 1 hour

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<th>TRAINER NOTES</th>
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<tbody>
<tr>
<td>1) Preparation – 5 minutes</td>
<td>The facilitator should place the flip charts, markers, excerpts of the report, and activity handouts throughout the room where each small group will complete the activity.</td>
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</table>
| 2) Small Group Activity– 55 minutes | The participants should be divided into groups of five. Each group will be given an excerpt or excerpts of the 2013 Community Health Assessment Report. The group should review the section or sections and answer the following questions:  
  - What do you most like about the section and why?  
  - What do you least like about the section and why?  
  - What do you think about the wording of the section?  
  - How clearly do you think the graphs, tables, and maps present the data and why?  
  - What community resources do you know about that can assist DeKalb Medical in addressing the health issues discussed in this section?  
The small groups should then identify 3 key findings per section and prioritize using dots based on importance or significance to DeKalb County residents.  
Each small group will provide a brief discussion of their answers, as well health issues identified as priorities for improvement, to all participants. |
Workshop Closure

Objective:
✓ To obtain participants’ feedback on the meeting.

Materials:
✓ 35 copies of evaluation form
✓ 35 Pens

Time: 5 minutes

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<th>TRAINER NOTES</th>
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<tr>
<td>1) Preparation - 5 minutes</td>
<td>Before the session, the trainer should make 35 copies of the evaluation.</td>
</tr>
<tr>
<td>3) Closing remarks – 5 minutes</td>
<td>DeKalb Medical and DeKalb County Board of Health staff should thank participants for their time and feedback.</td>
</tr>
<tr>
<td>4) Evaluation – 5 minutes</td>
<td>Each participant completes an evaluation form and gives it to the facilitator before they leave.</td>
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Meeting Invitation

************

2013 Community Health Assessment Report
Stakeholder Meeting

Wednesday, January 16, 2013 at 8:00 AM
DeKalb Medical Tower Auditorium
2701 North Decatur Road
Decatur, GA 30033

DeKalb Medical and the DeKalb County Board of Health invite you to participate in a stakeholder engagement. The meeting will take place on January 16, 2013 from 8:00 AM to 1:00 PM. Breakfast and lunch will be served.

The session will be an opportunity for DeKalb Medical and the DeKalb County Board of Health to present key findings from DeKalb Medical’s 2013 Community Health Assessment Report. Attendees will also assist DeKalb Medical in determining priorities for health improvement and identifying potential community resources.

<table>
<thead>
<tr>
<th>Engagement Date</th>
<th>Engagement Format</th>
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<tr>
<td>1/16/13, 8:00AM-1:00PM</td>
<td>In person</td>
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To Participate in the Session

• Please RSVP to Ms. Nia Mitchell at niamitchell@dhr.state.ga.us or 404-294-3776 by December 21, 2012. Please include your full name and the organization you represent, if applicable, in your message.
ATTENDEES OF JANUARY 16, 2013 STAKEHOLDERS MEETING ON THE 2013 COMMUNITY HEALTH ASSESSMENT REPORT

<table>
<thead>
<tr>
<th>Name</th>
<th>Organization</th>
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<tbody>
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<td>Anh Nguyen</td>
<td>Boat People SOS-Atlanta</td>
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</tr>
</tbody>
</table>
SECTION I: MEETING EVALUATION

<table>
<thead>
<tr>
<th>On a scale of 1-5, please rate the following:</th>
<th>1-Strongly Disagree</th>
<th>2-Disagree</th>
<th>3-Neutral</th>
<th>4-Agree</th>
<th>5-Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>The presentation met my expectations and learning needs.</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
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<tr>
<td>The location was comfortable.</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
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</tr>
<tr>
<td>The small group activity has helped me to understand the report.</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
</tr>
<tr>
<td>The meals were appetizing.</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
</tr>
<tr>
<td>Overall, I was very satisfied with the meeting.</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
</tr>
</tbody>
</table>

SECTION II: REPORT EVALUATION

Based on what you know about the report:

- What do you like most about it?
- What do you like least about it?
- Do you feel anything is missing?
- Will the information be helpful to your organization? If so, how?
EVALUATION

SECTION III: ADDITIONAL COMMENTS

Please feel free to share any further comments or suggestions about the meeting and/or report.

SECTION IV: PARTICIPANT BACKGROUND

What are your affiliations? (Please check all that apply.)

- Academia
- Business
- Clinician
- Community-based organization
- DeKalb County resident
- Faith-based organization
- Government
- Public health
- Other: ____________________________

Thank you!