

# PATHWAYS TO PROGRESS

Using the ACS to study the challenges facing vulnerable populations



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# Pathways to Progress

## ➤ Origins in Community Development Initiatives

- **Battle Against Child Poverty Goes On, April 2012.** The safety net for children and families needs enhancement to lift people up, rather functioning in desperate efforts to prevent a fall.
- **Saying NO to Citizen Complacency, April 2015.** An index of community violence tagged San Angelo as one of the most dangerous urban centers in its region of West Texas.
- **A Great Revolt, February 2016.** Increases in the number of cost-burdened households resulted in an eight percent increase of local housing insecurity.
- **Quality of Life, June 2016.** A year-long study of regional health needs surveyed more than 39,000 residents living in poverty.
- **Health Status of Poor, August 2016.** Many West Texans believe preventing major diseases from swamping the health system is beyond reach because of the lack of personal responsibility in the ranks of poor. Our findings show that we are all in the same lifeboat.
- **Gauging Women's Health Care, August 2017.** San Angelo residents experience high than average risk of exposure to common STDs/STIs compared to other urban areas in West Texas.
- **The Time for Equal Rights is Now, July 2018.** A 12-year earnings history of Latinas in Tom Green County shows they see rapidly increasing inequity.
- **Undocumented Migrants in West Texas, July 2019.** Employment of non-citizen immigrants in the regional labor force aligns with all working age people in the region.
- **COVID-19: Know Your Demographic Risk, July 2020.** Analysis of statistical associations between the 35 population and housing characteristics and coronavirus cases in Texas Counties revealed 14 strong positive correlations.

# **PATHWAYS TO PROGRESS IN ACTION**

## **Origins of the San Angelo Diabetes Coalition in a 20 County Survey of the Poor & Extremely Poor in West Texas**

### **Funding by:**

**BlueCross BlueShield of Texas**

**HEB Stores**

**Methodist Health Ministries of South Texas**

**San Angelo Health Foundation**

**San Angelo**

### **Credits:**

**Cera Cantu**

**Rachael Lisewsky**

**Susan McLane**

**Elise Mitchell**

**Ashley Woods**

**AmeriCorps VISTA**

### **Partners:**

**Angelo State University**

**La Esperanza Clinics**

**San Angelo Health Foundation**

**Shannon Medical Center** (Including  
the former Community Medical Center)

**Community Action Agency**  
of Tom Green County

# Survey of the Poor & Extremely Poor

❖ Questionnaire parallel to the Texas BRFSS

❖ Health Coverage

- Medical, dental, & mental health services access
- Morbidity
- Obesity & related factors
- Mental health & substance use
- Immunization & preventive health screening

❖ Community Engagement

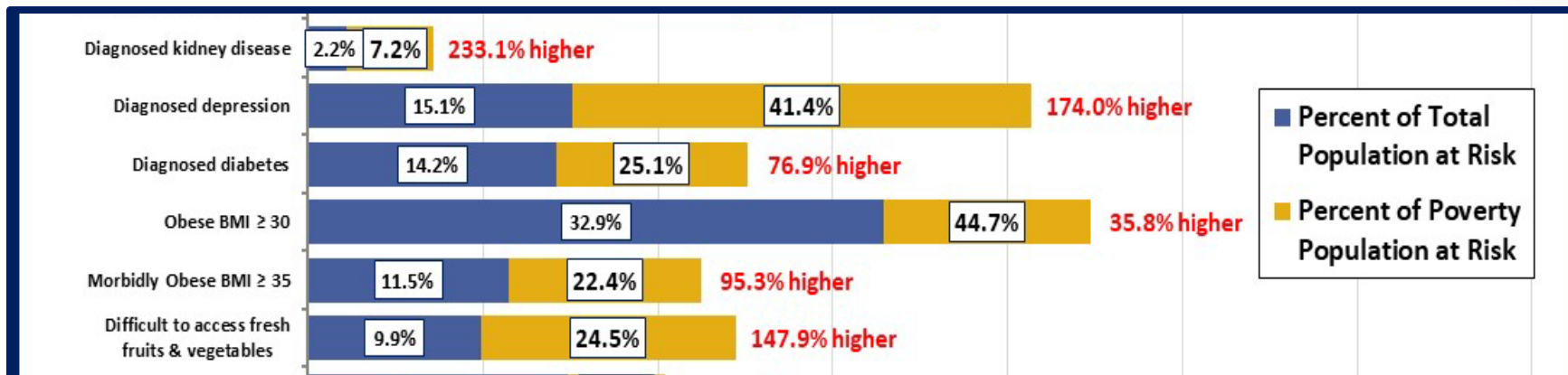
- Informal, face-to-face interviews in English or Spanish
- 145 Community Contacts
- 72 Collaborating Organizations
- 9 Group Training Sessions for Facilitators
- 64 Trained Community-Based Survey Facilitators
- Community-Based Needs Prioritization

# Uses of ACS Data

- ❖ Survey of the Poor & Extremely Poor in West Texas
  - Proportional Sampling
- ❖ Gap Analysis & Identification of Health & Behavior Health Needs
  - Post-stratification adjustment of Texas BRFSS results to county demographics
- ❖ Prioritization of Health & Behavioral Health Needs
  - County Health Status Profiles
  - Estimations of populations impacted by prioritized needs

# Selected Results:

## Gap Analysis of the Elevated Risk of Poverty



# Some Prioritized Needs for Tom Green County

- ❖ Reduce of PPH from Diabetes
- ❖ Reduce Obesity in Vulnerable Groups
- ❖ Promote Healthy Living
- ❖ Improve Case Management for Vulnerable Groups



# Evolution of San Angelo Diabetes Coalition

- January 2017: Angelo State University, La Esperanza Clinics, San Angelo Community Medical Center, the San Angelo Health Foundation and Shannon Medical Center begin planning a coalition for control of Type II diabetes.
- September 11, 2018: Blue Cross Blue Shield Of Texas provides funding through its Healthy Kids, Healthy Families grant program.
- December 2018 – March 2019: Coalition is organized and staffed.
- April 2019: Enrollment of patients in the coalition's 12-month diabetes management program begins.



# Community Health Workers



- Community Health Workers help patients :
  - get primary care physicians.
  - enroll in eligible benefits.
  - find available resources.
  - understand how to manage their disease.
  - provide culturally competent motivation and guidance healthy behaviors.
  - advocate for improvement of individual and community needs.

- Results in 2020 (operating remotely due to COVID-19):
  - One 47-year-old patient reduced A1c from 10.7 to 5.8.
  - Another 63-year-old reduced A1c from 13.5 to 6.6.
  - The group of 60 enrolled patients reduced average A1c by 18% from 11.35 to 9.31.
- Impacts:
  - The impact of diabetes self-management on patients overall is like adding a treatment medication, but the cost is low and there are no side effects.
  - Each point reduction in A1c reduces risk of eye, kidney and nerve damage by 40%.

# Contact Information

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