

Grant Outcomes Report

Evaluation of the New York Immigration Coalition's "Strengthening the Capacity of Immigrant Organizations to Link Uninsured Immigrants to Health Care and Insurance" Project

I. The Problem

Compared to U.S. born residents, immigrants and their families have limited access to health care services. Inadequate English language skills, low incomes, restrictive eligibility criteria for public insurance, and differing knowledge and attitudes regarding health and health care serve to limit immigrant access to care and, thereby, contribute to problematic health disparities. Community-based organizations (CBOs) are key institutions within many immigrant communities. With training, skills, and support, CBOs can provide educational, navigational, and advocacy services that facilitate improved access to care for individual clients and for immigrants overall. The New York Immigration Coalition's (NYIC) "Strengthening the Capacity of Immigrant Organizations to Link Uninsured Immigrants to Health Care and Insurance" project¹ provides such training, skills, and support. The effectiveness of NYIC's program had not been formally assessed prior to this evaluation.

II. Grant Strategy

The purpose of this project was to evaluate the implementation and the effectiveness of NYIC's "Strengthening the Capacity of Immigrant Organizations to Link Uninsured Immigrants to Health Care and Insurance" project, an education and outreach campaign meant to reduce systemic and individual-level barriers to health insurance and care among immigrant populations. Working within the framework of a Health Collaborative that includes nine community-based organizations, two pro bono legal service partners, and NYIC, the project provides education and training to health advocates who, in turn, assist immigrant New Yorkers with accessing health care and insurance coverage.

¹ <http://www.nyshealthfoundation.org/content/grant/detail/700>

KEY INFORMATION:

GRANTEE

New York Academy of Medicine

GRANT TITLE

Evaluation of The New York Immigration Coalition's Strengthening Capacity Project

DATES

July 1, 2008–June 30, 2009

GRANT AMOUNT

\$72,357

FUNDING

Solicited grant

The approach that the New York Academy of Medicine's (NYAM's) Center for Evaluation took utilized a mixed methods approach to gather comprehensive data from multiple sources. Specific objectives of the evaluation were: **1)** identification of processes and activities utilized in project implementation, as well as factors affecting implementation; **2)** assessment of outcomes, including improved capacity among participating CBOs, increased outreach to immigrant communities, expansion in direct services to clients, and increased enrollment in health insurance; **3)** appraisal of project design, including an examination of the relative value of participation for CBOs with variable capacity and prior experience; **4)** assessment of project sustainability following the NYSHealth grant period, including consideration of which funded activities are most essential and how they may be sustained without grant funds; and **5)** documentation of lessons learned.

The evaluation provided specific knowledge regarding program impact and more general knowledge regarding the effectiveness of a particular model of training and outreach on health care access.

III. Grant Activities

An evaluation team conducted qualitative interviews with health advocates and directors from participating CBOs and legal service partners, and with representatives from three external CBOs ("comparison CBOs") that were comparable in size, mission, and expertise to the Health Collaborative CBOs. The team also conducted interviews with community members who sought and received services from four of the Health Collaborative CBOs. The interviews were translated (if necessary) and transcribed, coded, and then analyzed using an NVivo database developed specifically for this project. The evaluation team observed all meetings and trainings organized by NYIC throughout the grant period, taking notes and collecting educational and advocacy materials that were distributed. Evaluators also observed advocacy events with City and State officials organized by NYIC, at which representatives from all participating CBOs attended.

Throughout the evaluation period, the evaluation team gathered and reviewed the body of project documents provided by NYIC, including educational and advocacy materials provided to members of the Health Collaborative CBOs, and quarterly and yearly reports describing project implementation.



Finally, the evaluation team had formal discussions with NYIC staff members in order to provide feedback and receive inputs on the status of the Health Collaborative CBOs and on the ongoing evaluation.

IV. Challenges

NYAM realized early on the difficulties inherent in measuring the impact of the Health Collaborative CBOs on improved access to health insurance and health care among individuals served by member CBOs. The original work plan was consequently revised to include a series of interviews with community members who had received services from selected CBOs. A total of 16 interviews with community members who had received healthcare-related assistance from four Health Collaborative CBOs were conducted.

V. Key Findings

NYAM found the multiethnic nature of the Health Collaborative CBOs a strong and seemingly unique element of the project's model: in bringing together CBOs serving diverse immigrant communities, the Health Collaborative CBOs allowed members to be exposed to a wide range of challenges, learn to recognize commonalities and differences across populations and communities, and use the CBO network as a resource of information and opportunity for referral for one another. In observations and in-depth interviews, the evaluation team found that the Health Collaborative CBOs became a microcosm of the New York immigrant population, with the CBOs serving not only their own communities but also the broader immigrant population of New York. In addition to ethnic diversity, the diversity in individual and organizational capacity was seen as an advantage. Members from across CBOs worked together and helped one another, especially when a new member joined. The evaluation team found this to be a strong and unique component of the Health Collaborative CBOs, which could be further enhanced by formalizing the differential roles that the CBOs take within the project and improving the information flow among members of the Health Collaborative CBOs.

Health advocates from the participating CBOs had multiple responsibilities, including providing direct service to individuals, facilitating community level workshops and educational events, and participating in advocacy events with the media and government officials. These varied roles utilized differing skill sets and personal capabilities. Nonetheless, advocates met the project expectations and appreciated the opportunity to expand their skills and their responsibilities—both within their organizations and within their communities. In addition, advocates welcomed the opportunity to contribute to systemic change. Based on NYAM's observations, even relatively new advocates were perceived to be effective in their meetings with public officials.

In conclusion, the evaluation team felt that the Health Collaborative CBOs model greatly helped the immigrant community of New York in accessing and navigating the healthcare system by creating a cadre of well-prepared and skilled community-based health advocates and case managers. The evaluation team also felt that that the Health Collaborative CBOs model can be improved and the Health Collaborative CBOs policy agenda strengthened with greater attention to the communication flow between the decision makers at the CBOs and NYIC.

VI. The Future

Although improved capacity with respect to direct services, education, and advocacy were noted, NYAM also observed that several CBOs would not be able to sustain the improvements without continued funding for monthly meetings and other program activities. Thus, the Health Collaborative CBOs, as it is currently designed, requires continued funding to sustain the full range of project activities. Given the high need and limited funds available to many immigrant-focused CBOs, funding of their work in a way that facilitates expanded capacity is likely an efficient use of grant monies.

Based on interviews and observation, NYAM recommends greater involvement of the CBO Directors in Health Collaborative CBOs activities. Noted benefits of increased Director-level involvement are anticipated to include: more effective advocacy; increased sharing of ideas and information; increased and more equal involvement of CBOs in the decision-making process and the development of the Health Collaborative CBOs annual agenda; and greater levels of commitment on the part of CBOs. Greater Director-level communication was one of the preliminary recommendations the evaluation team made to NYIC, and in fact, a Director's meeting followed the recommendation. Most CBO Directors participated in the meeting, suggesting a desire for initiating this channel of communication. Although the impact of Director-level involvement cannot be determined at this point, their interest and the multiple predicted benefits suggest that the model would be enhanced if they were involved and given the opportunity to contribute to the planning rather than just the implementation of the project. Ultimate sustainability of the Health Collaborative CBOs work is uncertain since ongoing funding must be secured to maintain capacity.



BACKGROUND INFORMATION:

ABOUT THE GRANTEE

The New York Academy of Medicine (NYAM) is an independent organization that addresses the health challenges facing the world's urban populations through interdisciplinary approaches to innovative research, education, community engagement, and policy leadership. NYAM's Center for Evaluation works with a broad range of not-for-profit and governmental organizations to investigate and assess initiatives focused on improving the health and wellbeing of populations in New York City, New York State, and across the country. With expertise in both qualitative and quantitative research methods, NYAM conducts needs assessment, process evaluation, outcome evaluation, evaluation training and technical assistance, and qualitative research and analysis. NYAM evaluates large and small, single and multisite programs focused on a wide range of health related topics, including improved nutrition and physical activity, HIV/AIDS prevention and care, substance abuse treatment, development and training of the health care workforce, enhancing community capacity for health promotion, reducing racial and ethnic disparities, and access to care for immigrant populations.

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