

IMPROVING SOCIAL SUPPORT AMONG LGBTQ+ ADULTS IN DURHAM COUNTY, NORTH
CAROLINA THROUGH INTERGENERATIONAL ACTIVITY PROGRAMS

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A Capstone Project submitted to the faculty of the University of North Carolina at Chapel Hill
in partial fulfillment of the requirements for the degree of Master of Public Health
in the Public Health Leadership Program.

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ABSTRACT

Sara Beth Cooper, Caroline Dugan, and Kayla Rubinstein: Improving Social Support Among LGBTQ+ Adults in Durham County, North Carolina, Through Intergenerational Activity Programs
Under the direction of Rebecca Greenleaf, Sheila Davies, W. Oscar Fleming

This proposal addresses the social determinants of health for Lesbian, Gay, Bisexual, Transgender, and Queer (LGBTQ+) adults in Durham County, highlighting the importance of social support for their well-being. LGBTQ+ individuals experience higher rates of loneliness, leading to health disparities.

An intergenerational community program is proposed to address these challenges by fostering relationships between younger and older LGBTQ+ adults through art and cultural events. This program will reduce isolation, promote social connectedness, and improve emotional and physical health. Collaboration with the Durham County Public Health Department, LGBTQ Center of Durham, and other LGBTQ+ affirming organizations will allow for support and resources.

Focus groups, status reports, and evaluation surveys will ensure community engagement and program effectiveness. Establishing a dedicated task force addressing loneliness will demonstrate Durham County's commitment to LGBTQ+ well-being. The initiative seeks to enhance social connectedness and health outcomes for LGBTQ+ adults through community engagement and data-driven improvement.

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LIST OF ABBREVIATIONS

BIPOC	Black, Indigenous, and People of Color
LGBTQ+	Lesbian, Gay, Bisexual, Transgender, Queer/Questioning, and + to recognize the full spectrum of diverse sexual and gender identities
SDOH	Social Determinant of Health

COMMON PROPOSAL

SDOH Analysis and Goals

Social determinants of health (SDOH) refer to the conditions in the environments people are exposed to and how that environment impacts their physical and mental health (*SDOH- Healthy People 2030*, 2023). Social and community context is one of five categories of SDOH and refers to an individual's relationship with their family, friends, and community (OASH, 2023). Social support plays a large role in a person's well-being and can be defined as "a network of family, friends, neighbors, and community members that is available in times of need to give psychological and physical help" (Ozbay, 2007). Many studies indicate that having adequate social support is essential in maintaining physical and mental health, and low support is associated with higher risk of negative health outcomes like chronic diseases, anxiety, depression, and mortality (Reblin & Uchino, 2008). The goal of our public health effort is to improve emotional and physical health through improved social connectedness.

The priority population for this public health effort are lesbian, gay, bisexual, transgender, and queer/questioning (LGBTQ+) adults aged 18 years or older in Durham County, North Carolina. Durham County has a population of approximately 312,000 people, is located in central North Carolina, and is recognized for its diversity, civic engagement, and roots in the tobacco and textile industries (Durham County, 2021). Durham is a diverse community with a rich history of faith-based and political community organizations. Despite Durham's reputation for having generally healthy and diverse communities, minority populations like the LGBTQ+ community lack social support, are discriminated against at higher rates than heterosexual individuals, resulting in physical and mental health disparities (Durham County, 2021). In Durham County, 6.3% of residents identify as LGBTQ+, which is considerably more than the 4% of North Carolina residents (Durham County, 2021).

LGBTQ+ adults often experience higher rates of loneliness (Chan et al., 2022). They are more likely to report fear of discrimination, have a higher likelihood of being single and living alone, and are less likely to have children compared to their heterosexual counterparts (Family and Social Support, 2023). Consequently, these factors contribute to elevated rates of physical, psychological, and social

health disparities, including social phobia, depression, preventable diseases, substance abuse, and even suicide (Chan et al., 2022). In North Carolina, sexual minorities are diagnosed with depressive disorders at a rate three times higher than their heterosexual counterparts (Durham County, 2021). Higher risk for depression and anxiety amongst the LGBTQ+ community is thought to be linked to increased sources of bias and minority stressors such as lack of legal protections and anti-LGBTQ+ legislation (Durham County, 2021). In North Carolina, 82% of transgender and non-binary adults have suicidal thoughts and 40% have attempted suicide (Durham County, 2021). Additionally, non-suicidal rates of self-injury are 41% and 47% amongst bisexual and transgender individuals respectively, compared to only 15% among heterosexual and/or cisgender people (Durham County, 2021). Unfortunately, accurate and relevant data specific to Durham County is scarce, and therefore an accurate portrayal of the health of its LGBTQ+ community is difficult.

Policy and Programmatic Changes

Intergenerational programs are important in bridging gaps between younger and older generations of marginalized communities. The public health team is proposing an intergenerational community activity program that facilitates social and educational events that encourage social support and connection. These events will be aimed at fostering relationships between younger and older LGBTQ+ adults in a creative way through art and culture. Events will occur bi-weekly, and locations will vary, featuring local businesses and art spaces.

Initiatives to establish intergenerational communities and activities have an evidence rating of “expert opinion” by County Health Rankings & Roadmaps (CHR&R), which means that this strategy is highly recommended by credible experts (CHR&R, 2023). CHR&R effectively communicates evidence-informed programs in an accessible way so that all public health professionals have access to evidence-based practices (CHR&R, 2023). Creating intergenerationally-focused spaces and programs is an evidence-based strategy to increase social connectedness and social cohesion among community members (CHR&R, 2023).

The primary advantage to this program is fostering connections across generations (SAGE, 2023). In encouraging social support across generations, expected benefits include improved health outcomes, improved well-being, reduced isolation, improved intergenerational attitudes, increased self-esteem, and improved social emotional skills (CHR&R, 2023). The largest disadvantage to this program is that there is not a large amount of research on the value of intergenerational programs targeting the LGBTQ+ community, because few programs targeting this population have been implemented and evaluated. (CHR&R, 2023). In tailoring this evidence-based program to the LGBTQ+ adults in Durham County, certain adjustments may be needed to meet the needs of the community. For example, the local community may be more interested in civic-based events rather than art centered events.

Additionally, working across the LGBTQ+ spectrum may be an approach that is unfamiliar to older participants, and therefore provisions should be made to ensure participation. Demographics of LGBTQ+ adults are changing across the United States, and the younger generation's comfort with their sexuality may feel overwhelming or unfamiliar to older adults (Armstrong & Richter, 2022). The LGBTQ+ community lost many members during the 1980's AIDS epidemic, and this disconnect in individual backgrounds and hardship may be a difficult barrier to overcome (Masheswari-Aplin, 2022).

Community Partners

To address social isolation in Durham North Carolina, both broadly and within the LGBTQ+ community, a task force will need to be established with a wide range of stakeholders. In the broader scope of improving social and community support for Durham residents, the Durham County Public Health Department, Durham County Library, and Durham City Council will be involved in this project. These partners perform civil services to enhance the wellness and safety of Durham residents and offer knowledge on available government resources and funding to support social and community programs. LGBTQ+ adults in Durham County and the LGBTQ Center of Durham are foundational community partners because they are the most impacted by this initiative. The LGBTQ+ Center of Durham serves as a local resource for LGBTQ+ community members and allies to find health, legal, education, basic needs, and support services. They work directly with community groups such as Friends Aging Quirkily (FAQ),

Project Folks Aiming for More (F.A.M.), and Durham Queer Sports that will help our team connect with LGBTQ+ members of all ages (LGBTQ Center Durham, 2023). Our team will strive to connect with local LGBTQ+ adults that may not have pre-existing affiliations with organizations or support groups, to ensure that we are responding to the interests and needs of the community as a whole.

Statewide human rights organizations such as the Southern Coalition for Social Justice, Equality NC, Services and Advocacy for Gay, Lesbian, Bisexual, and Transgender Elders (SAGE) and the Human Rights Campaign North Carolina advocate for equal rights and would champion the efforts to increase social and community support for the LGBTQ+ community. The Durham County Arts Council and LGBTQ+ owned businesses can offer support in event facilitation. The Durham County Arts Council is committed to supporting equity, access, and inclusion in the cultural and art community and would serve as a great resource in promoting creativity and education within social support programs (Durham Arts Council, 2023). LGBTQ+ business owners may be interested in providing safe spaces for LGBTQ+ community members to socialize and enhance community connectedness (Discover Durham, 2023).

Engagement and Accountability Plan

Throughout the community engagement process, it is important to identify and utilize different engagement methods that will be effective for the community stakeholders. Three engagement methods that would work for community partners are focus groups, status reports, and evaluation surveys (see Appendix A). Focus groups will take place in both the design phase— when the project team is deciding exactly what to do and how to do it, and the improvement phase— when the project team is gathering data to improve the program. This engagement method will involve meeting quarterly with community partners in a collaborative way in a group setting. There will be a total of six focus groups that will contain 5 to 10 different partners. The project team understands that the structure of focus groups will be a larger lift but wants to ensure that the partners’ engagement is an ongoing, interactive process.

Status reports will be essential for communicating program progress and outcomes with community partners and will be written and shared publicly in the design phase, improvement phase, and sustain phase— as the project team continues collective efforts. These will be utilized during all phases of

the intervention, as there is an obligation to inform and assess community partners at all phases of the engagement process. These status reports will be sent quarterly to inform all partners and interested individuals. This method will facilitate engagement from partners that have a limited amount of time and resources. Keeping partners informed with program progress and leaving the option for feedback will address barriers to engagement.

Once our program has been implemented, the project team will work with the LGBTQ Center of Durham during the improvement phase to collect survey responses from program participants and other community stakeholders. Individual survey data will be compiled, interpreted, and communicated in a report accessible to the public. We can use this data to determine participant demographics, satisfaction with event themes and locations, inclusivity, accessibility of events, how many community members were served, and perceived levels of support. This information will help program quality improvements and contribute to the available research on social and community support for LGBTQ+ adults, hopefully generating interest in future studies.

A consideration for action by the County Commissioner is to hire an advisor that is an LGBTQ+ advocate onto their team. By doing this, the County Commissioner will demonstrate that they support the LGBTQ+ Community and they are committed to creating change in future policy and programs. This will demonstrate a clear interest in the issue and support participation among other community partners.

This proposal demonstrates a community-centered approach to improve social connectedness for LGBTQ+ adults in Durham County to address physical and mental health disparities. An intergenerational focused program is an evidence-based framework that will create opportunities for older and younger generations of LGBTQ+ adults to build authentic relationships and foster community connections. This program will be developed in collaboration with the aforementioned partners to respond to the needs and interests of the local community. Program events will involve workshops and classes open to LGBTQ+ adults aged 18-75 years and occur monthly in safe centralized locations in Durham County. Event themes will vary and highlight Durham's diverse art and culture scene through crafts, discussions, and community projects. The success of this program has positive imp Throughout the

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APPENDIX A:

Table A1

Measurement Table

Methods, Timing, and Measures Table					
Engagement Method	Related Facilitator(s) / Barrier(s)	Timing	Performance measure		
			Description	Data source	Frequency
Community focus groups-held twice during each phase of the project for community partners to collaborate	Level of collaboration and engagement influences participation	Design through improve	The number or percentage of LGBTQ+ business owners who actively engage in the community focus groups.	Attendance records or sign-up sheets from the community focus group sessions.	After each focus group session
Status report	Finding an adequate level and amount of information to share regarding the program process	Design, Improve, Sustain	# of reports sent, # of individuals receiving reports	Report record	Quarterly
Survey	Program quality improvement, showing the importance of social and community connection for LGBTQ+ adults	Improve, Sustain	# of survey responses, demographic of participants, satisfaction with event themes, location, and inclusivity, perceived levels of support, satisfaction with survey distribution	Survey data Process evaluation surveys from work group	Quarterly

Figure A2
Rich Picture

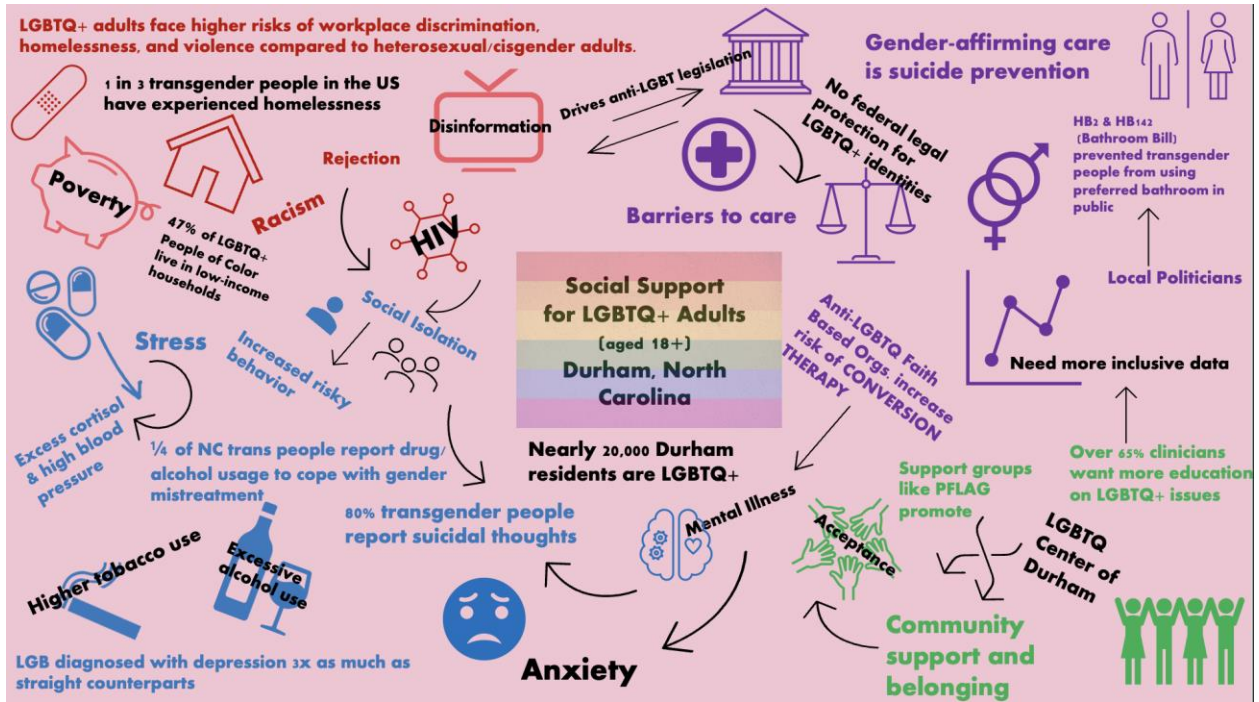


Table A3*RASCI Analysis*

RASCI Levels Who is...	Community Partners	Rationale
Responsible = owns the challenge/ project	LGBTQ Center of Durham, Project Team, Durham County Health Department	The LGBTQ Center of Durham will manage the work of the project team and provide the general framework for the program. As a key leader within the LGBTQ+ community, the LGBTQ Center of Durham Director is well-positioned to provide guidance, strategic direction, and ensure alignment with the center's mission and vision. The Durham County Health Department serves as population health experts and are actively addressing social isolation and loneliness as a public health concern.
Accountable = ultimately answerable for the correct and thorough completion of the deliverable or task, and the one who delegates the work to those <i>responsible</i>	County Commission	The Durham County Commissioners will be accountable for the program because they will locate funds needed to carry out the project. They represent the interests and needs of the community and communicate with state and federal legislators.
Supportive = can provide resources or can play a supporting role in implementation	LGBTQ+ business owners, Durham Arts Council	LGBTQ+ business owners and the Durham Arts Council can provide resources like time, space, event ideas, program information, and support for the project team
Consulted = has information and/or capability necessary to complete the work	SAGE, Equality NC	SAGE and Equality NC are considered to be experts on the subject matter and should therefore be consulted prior to program planning and implementation
Informed = must be notified of results, process, and methods, but need not be consulted	County Commission, Durham County residents	Though the County Commission and Durham County residents represent opposing sides of stakeholder influence, both need to be informed regarding decisions and outcomes along the way

Table A4

Power Interest Matrix

Level of Influence		LGBTQ Center of Durham SAGE County Commissioners Durham County Health Department
<i>High</i>		
<i>Low</i>	Durham County residents Business owners	LGBTQ+ adults in Durham County Durham Arts Council Human Rights Organizations
	<i>Low</i>	<i>High</i>
	Level of Interest	

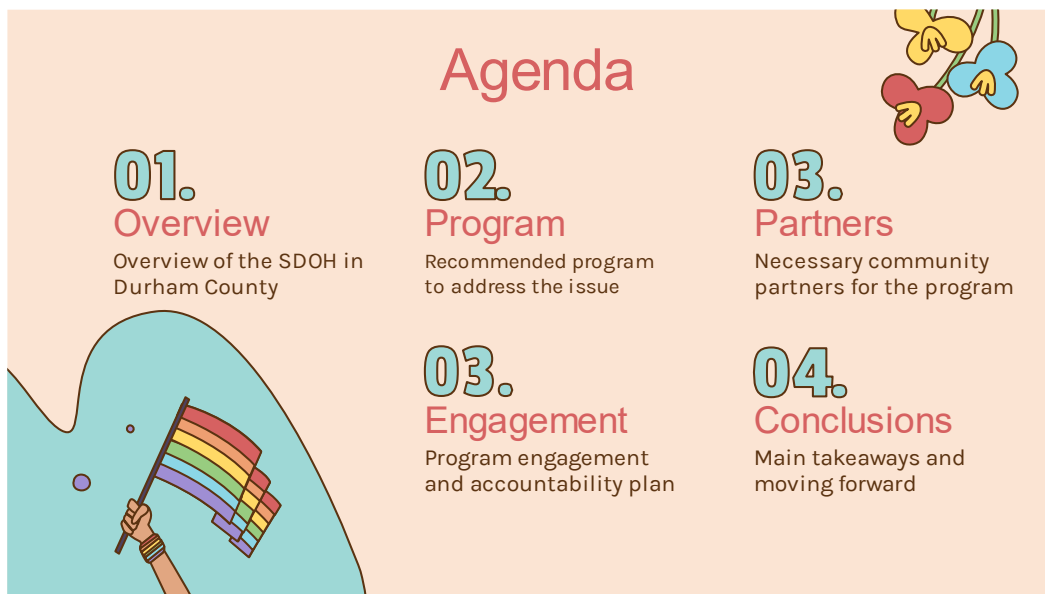
GROUP PRESENTATION SLIDES



**Improving Social Support
Among LGBTQ+ Adults in
Durham County, North Carolina
Through Intergenerational
Activity Programs**

Sara Beth Cooper
Caroline Dugan
Kayla Rubinstein

Slide 1 (Caroline): We chose to work with Social and Community Context as our Social Determinant of Health this semester, and our project is about Improving Social Support Among LGBTQ+ Adults in Durham County, North Carolina Through Intergenerational Activity Programs



Agenda

- 01. Overview**
Overview of the SDOH in Durham County
- 02. Program**
Recommended program to address the issue
- 03. Partners**
Necessary community partners for the program
- 03. Engagement**
Program engagement and accountability plan
- 04. Conclusions**
Main takeaways and moving forward

Slide 2 (Caroline): Agenda – For our presentation, we will be covering an overview of our social determinant of health in Durham County, recommend a program to address this issue, present the necessary community partners to make this program successful, outline our program engagement and accountability plan, and then conclude with some key takeaways and answer any questions you may have

Overview

- **Social and community context ...**
 - is one of **five categories** of social determinants of health and has a large impact on a person's wellbeing.
 - refers to an individual's relationship with their family, friends, and community.
 - includes **social support**, which is "a network of family, friends, neighbors, and community members that is available in times of need to give psychological and physical help".

Slide 3 (Caroline): Social and community context is one of five categories of social determinants of health and has a large impact on a person's well-being, it refers to an individual's relationship with their family, friends, and community, and includes social support, which is "a network of family, friends, neighbors, and community members that is available in times of need to give psychological and physical help".

Overview

- **Social support ...**
 - is essential in maintaining physical and mental health.
 - is associated with lower risk of negative health outcomes like chronic diseases, anxiety, depression, and mortality.

The goal of our public health effort is to improve emotional and physical health through improved social connectedness.

Slide 4 (Caroline): Social support is essential in maintaining physical and mental health, and is associated with lower risk of negative health outcomes like chronic diseases, anxiety, depression, and mortality. A lack of social support is associated with increased heart rate, high blood pressure, and excess stress hormone (cortisol). Having adequate social support in the long term can help foster resilience, reduce the rate of engaging in risky behaviors, and reduce the risk for developing mental illness. The proven benefits of social support on overall health and well-being indicate the need for evidence-based public health interventions aimed at increasing social support for at-risk populations like the LGBTQ+

community. The goal of our public health effort is to improve emotional and physical health through improved social connectedness.

Overview

Durham County

- **6.3%** are LGBTQ+
- **15** LGBTQ+ owned businesses
- Socioeconomic disparities exist
- **No federal or state level protection** for sexual orientation or gender identity
- **Lack of primary data** on LGBTQ+ adult health

LGBTQ+ Lesbian, Gay, Bisexual, Transgender, Queer, and +, the wide spectrum of sexual orientation and gender identities

Source: GIS Geography, North Carolina County Map, 2022.
<https://gisgeography.com/northcarolina-countymap/>

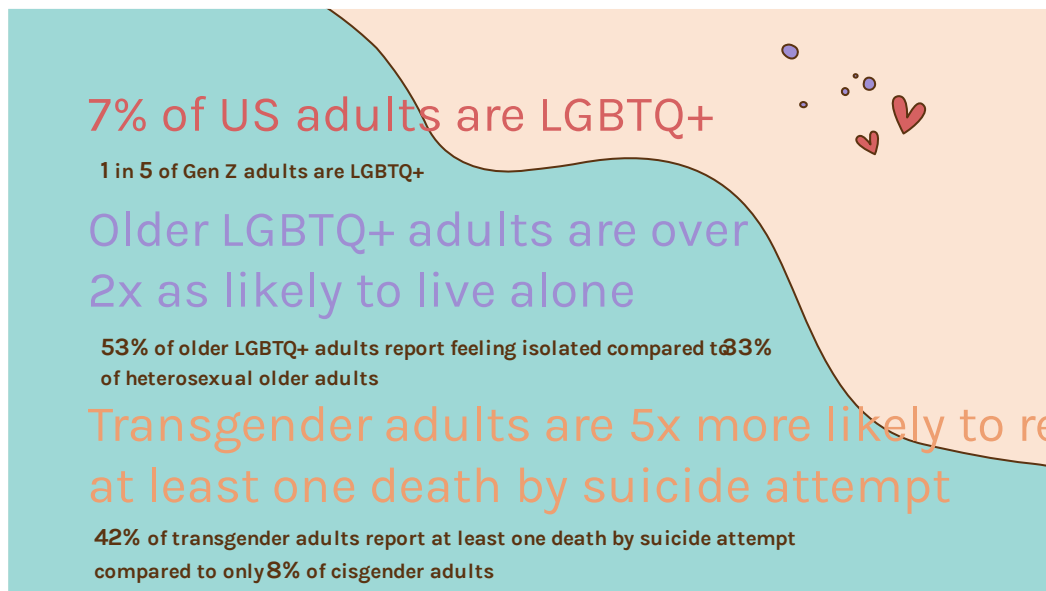
Slide 5 (Kayla): Durham County is proudly the second largest home to LGBTQ+ North Carolinians, as 6.3% identify as LGBTQ+. This is considerably more than the state prevalence (4%). Currently there are no federal or state-level protections against discrimination based on sexual orientation or gender identity, however, Durham County has implemented protections for government employees. Even with Durham’s progressive reputation for LGBTQ+ acceptance, there is a lack of inclusive data to represent LGBTQ+ adult health outcomes.

Why LGBTQ+ Adults?

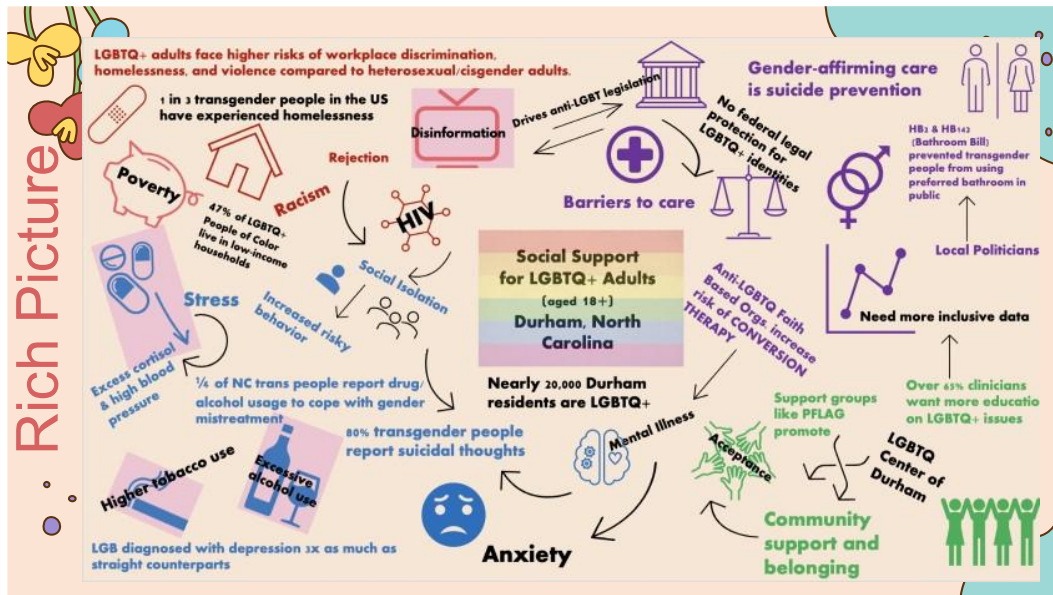
- **LGBTQ+ adults ...**
 - have **higher rates of mental illness** and related health behaviors like substance abuse compared to their heterosexual counterparts.
 - are **discriminated against at higher rates** than heterosexual individuals, and this results in physical and mental health disparities.
 - are often **rejected** by a family member or a close friend due to their sexual orientation or gender identity
 - often **exhibit psychosocial stress due to lack of social support** like familial disapproval and social stressors like stigma, criticism, and victimization

Slide 6 (Kayla): Compared to heterosexual individuals, members of the LGBTQ+ community have higher rates of mental illness and related health behaviors like substance abuse. Sexual minorities are diagnosed with depressive disorders at a rate three times higher than that of their heterosexual counterparts. This increased risk of mental illness is thought to be linked to increased sources of bias and

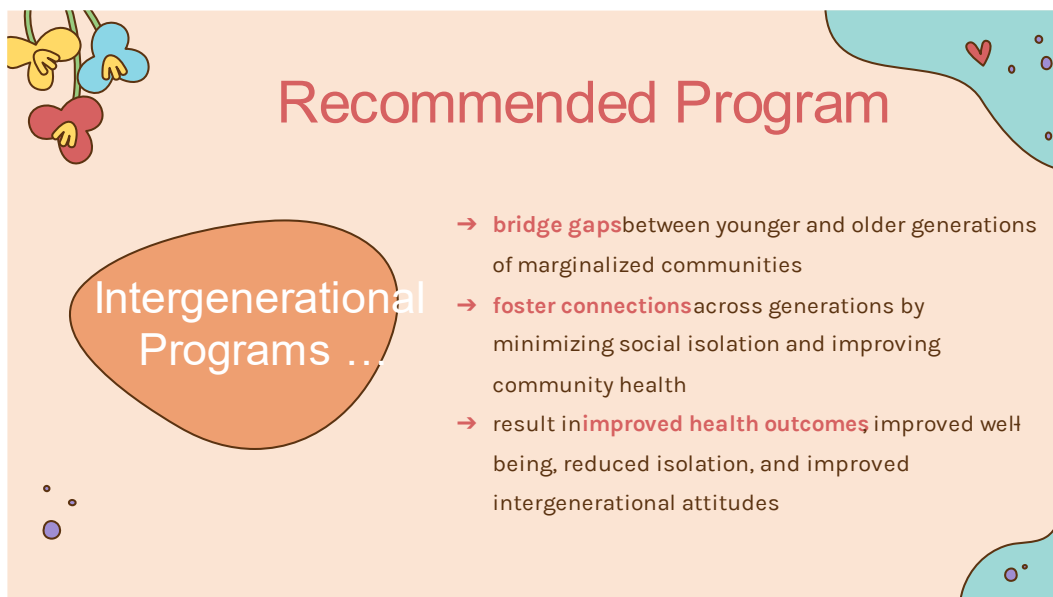
minority stressors such as lack of legal protections and anti-LGBTQ+ legislation, as LGBTQ+ individuals are discriminated against at higher rates than heterosexual individuals. Almost 40% of LGBTQ+ adults have been rejected by a family member or a close friend due to their sexual orientation or gender identity. This results in physical and mental health disparities, as psychosocial stress is directly influenced by social support, like familial disapproval and social stressors like stigma, criticism, and victimization. To increase social support in Durham County, it is imperative that the public health team utilizes evidence-based data to build a program that facilitates social support and prioritizes at-risk populations like the LGBTQ+ community.



Slide 7 (Sara Beth): LGBTQ+ identification has steadily increased over the past decade with 7% of US adults claiming LGBTQ+ identities. Younger generations are more likely to claim identities outside of the heterosexual or cisgender binary, nearly 20% of Generation Z identify as LGBTQ+ and we can expect this number to grow with future generations. LGBTQ+ older people are twice as likely to live alone compared to non-LGBTQ+ older adults, twice as likely to be single, and three to four times less likely to have children than are heterosexual older adults. This can increase the risk of social isolation and associated negative health consequences. A national survey reported that 53% of older LGBTQ+ adults feel isolated from others compared to 33% of heterosexual older LGBTQ+ adults. LGBTQ+ adults experience higher rates of depression and anxiety due to discrimination and lack of acceptance which leads to an increase risk of death by suicide, especially for transgender adults with 42% reporting at least one death by suicide attempt compared to 8% of cisgender adults.

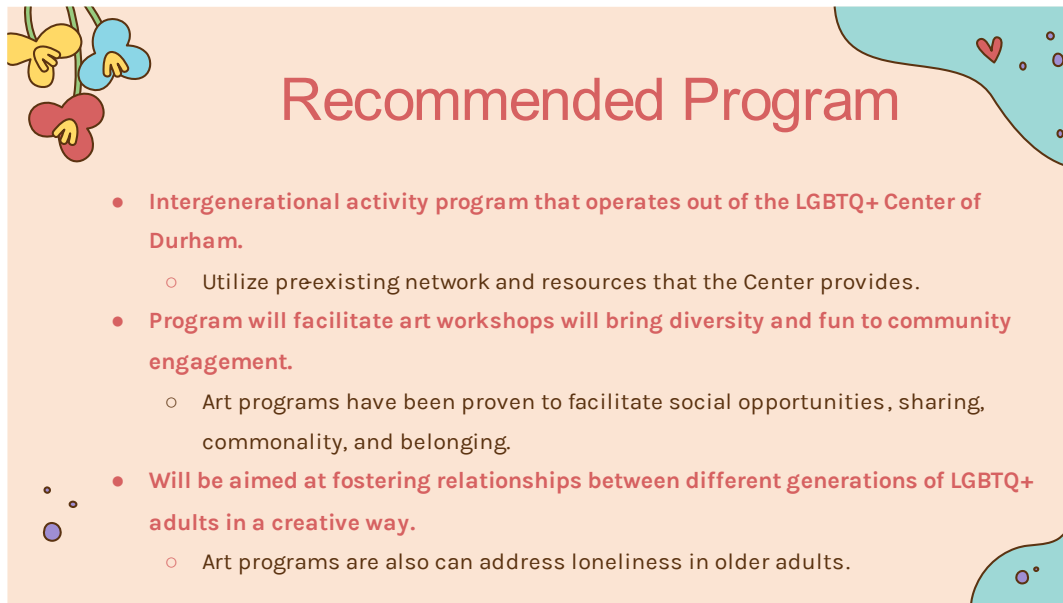


Slide 8 (Sara Beth): Here is a rich picture to demonstrate the complexity of social and community support for LGBTQ+ adults and the negative impact on health. Up here in the top left corner, you can see systemic root causes such as poverty and homelessness which disproportionately impacts LGBTQ+ people of color. Media spread of disinformation has led to increased anti-LGBTQ+ legislation, largely attacking transgender folks and limited access to life-saving healthcare. North Carolina specifically initiated nationwide attention on restricting public bathroom access for transgender people with their HB2 & HB142 bills which prevented transgender people from using public restrooms that aligned with their gender identity. This history of discrimination along with lack of stigma and lack of acceptance increases the risk of mental illness which increases unhealthy coping behaviors such as drug and alcohol use. Fortunately, there are affirming groups such as PFLAG and the LGBTQ Center of Durham that offer support.



Slide 9 (Caroline): LGBTQ+ adults face distinct challenges, discrimination, and social isolation in their everyday life, and it is important now more than ever that they interact and connect with each other

throughout different stages of adult life. Intergenerational programs are an evidence-based intervention that have been proven to bridge gaps between younger and older generations of marginalized communities, foster connections across generations by minimizing social isolation and improving community health, and result in improved health outcomes, improved well-being, reduced isolation, and improved intergenerational attitudes.



Recommended Program

- **Intergenerational activity program that operates out of the LGBTQ+ Center of Durham.**
 - Utilize preexisting network and resources that the Center provides.
- **Program will facilitate art workshops will bring diversity and fun to community engagement.**
 - Art programs have been proven to facilitate social opportunities, sharing, commonality, and belonging.
- **Will be aimed at fostering relationships between different generations of LGBTQ+ adults in a creative way.**
 - Art programs are also can address loneliness in older adults.

Slide 10 (Caroline): This program will operate through the LGBTQ Center of Durham and organize events with an art focus. The program will utilize the Center’s preexisting community connections and resources. These art workshops will bring diversity and fun to community engagement and will be aimed at fostering relationships between different generations of LGBTQ+ adults in a creative way. Community art programs are also a promising tool for addressing loneliness in older adults, as it can foster social engagement, inclusion, and communication.



Necessary Community Partners



LGBTQ Center of Durham



Equality NC



SAGE



Durham Arts Council



Business Owners



Health Department



LGBTQ+ Adults



County Residents

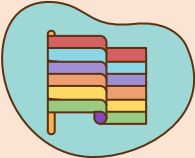
Slide 11 (Sara Beth): The necessary community partners to make this program successful are the LGBTQ Center of Durham which serves as a local resource for LGBTQ+ community members and allies to find health, legal, education, basic needs, and support services. Equality NC which is an advocacy group that aims to improve public policy to be inclusive towards LGBTQ+ community, SAGE which is an advocacy group that serves older LGBTQ+ adults, the Durham Arts Council, LGBTQ+ business owners, the Durham County Health Department, LGBTQ+ Adults, and Durham County residents.

Community Partner Analysis

Responsible	LGBTQ Center of Durham	Health Department	Project Team
Accountable	County Commission		
Supportive	Durham Arts Council	LGBTQ+ Business Owners	
Consulted	SAGE	Equality NC	
Informed	LGBTQ+ Adults	Durham County Residents	


Slide 12 (Sara Beth): This is a visual of our community partner analysis demonstrating the proposed level of engagement for our partners. The project team is going to work directly with the LGBTQ Center of Durham and the Department of Public health who will be responsible for implementing this program.

Engagement Methods




Status Reports

Status reports on program progress and outcomes will be sent to priority partners quarterly



Focus Groups

Community focus groups held twice during each phase of the project for community partners to collaborate

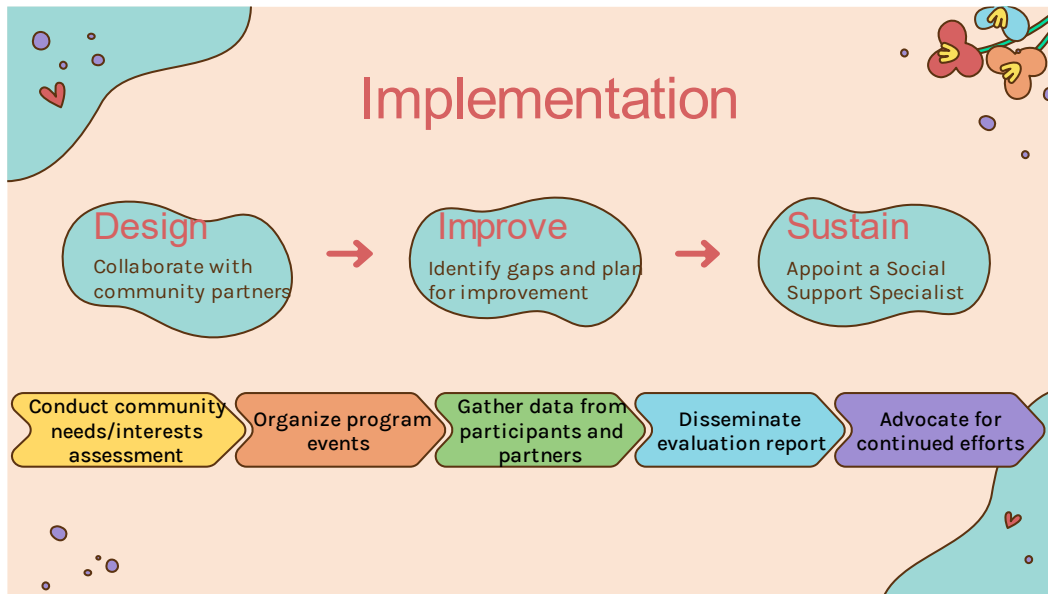


Evaluation Surveys

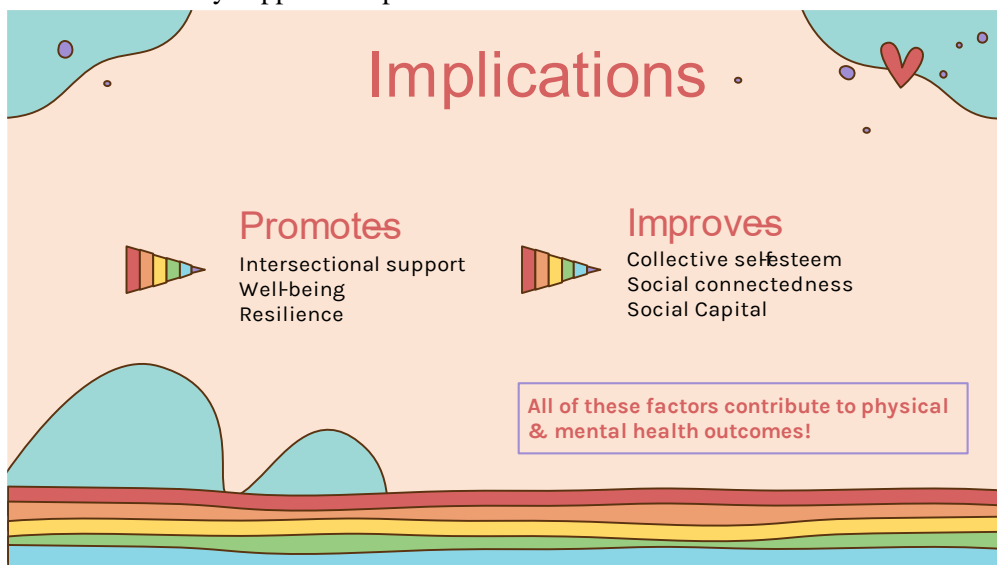
Program quality improvement, showing the importance of social and community connection for LGBTQ+ adults

Slide 13 (Kayla): Our team will engage with our partners and the community through status reports, focus groups, and evaluation surveys to facilitate consistent communication and opportunities for improvement. Status reports will be delivered quarterly to the LGBTQ Center of Durham, the Health Department, and the city council to demonstrate program progress and outcomes. Focus groups will be

held at least two times during the planning, improvement, and sustainability phases of the program to ensure community collaboration and develop a deeper understanding of needs, priorities, and expectations. Evaluation surveys will contribute to quality improvement efforts and measure program processes and outcomes such as perceived level of social support among participants, accessibility of events, event satisfaction, and communication effectiveness between partners.



Slide 14 (Kayla): Implementation objectives will take place through three stages of the project. The design phase will focus on collaboration with community partners and stakeholders. Community assessments will guide specific program components and prepare our team in organizing appropriate events. Then we will collect data to identify gaps or challenges and work with our partners for improvement. Evaluation reports describing our process and success measures will be available for all interested parties. While we are confident in the success of this initiative, there is a continued need for advocacy to promote support and social justice for the LGBTQ+ community. To sustain our efforts, we request a Support Specialist role be created within the health department to address social isolation and lack of community support as a public health concern.



Slide 15 (Kayla): Implications of program success would be intersectional support provided to people with multiple marginalized identities and potentially reduce ageism or racial disparities. Intergenerational programs highlight community resilience and promote well-being which will increase feelings of connectedness and collective self-esteem, and also improve social capital that can increase access to resources. All of these factors contribute to physical and mental health.



Key Takeaways

- **Intergenerational programs...**
 - **Create opportunities** for authentic relationships between older and younger generations
 - Are **evidence-based practices** that foster community connectedness
 - **Improve social support** in groups like the LGBTQ+ community
- **Our goals:**
 - Secure funding to **support the implementation** of an intergenerational program for LGBTQ+ adults (18+)
 - **Strengthen community partnerships** between LGBTQ+ affirming organizations
 - Improve the **physical and mental well-being** for LGBTQ+ adults that live in Durham County through increased social support

Slide 16 (Sara Beth): In summary, intergenerational programs promote relationships among all generations, it's an evidence-based practice that has shown success in improving social support and connectedness for LGBTQ+ communities. We aim to utilize this framework to improve health outcomes for LGBTQ+ residents in Durham County. Through these efforts, we hope to strengthen relationships between LGBTQ+ affirming organizations in Durham to better serve our community.



Thank you!

Any questions?

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Slide 17 (Sara Beth): Thank you for listening. We are ready to answer any questions you may have.

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APPENDIX B: SARA BETH COOPER INDIVIDUAL ASSIGNMENTS

Appendix B.1: Social Determinant of Health Analysis

Social determinants of health (SDOH) refer to the environments people are exposed to and how that environment impacts their physical and mental health (*SDOH- Healthy People 2030*, n.d.). Social and community support is one of five SDOH categories and will be the primary focus of this analysis. Social and community support includes relationships and access to resources within family units, neighborhoods, workplaces, cultures, and friend groups (*Social and Community Context- Healthy People 2030*, n.d.). The level of support people receive influences their quality of health. Low support is associated with higher risk of negative health outcomes, including chronic diseases, anxiety, depression, and mortality (Reblin & Uchino, 2008). Those who experience low support are more likely to be socially isolated. This can lead to high levels of stress and unhealthy behaviors such as smoking and drug use (Centers for Disease Control and Prevention [CDC], n.d.). Long term consequences of social isolation are associated with increased risk of dementia by 50%, heart disease by 29%, and stroke by 32% (CDC, n.d.). These risks are even higher for those in marginalized communities that face stigma and discrimination. Immigrants and LGBTQ+ members report fewer social ties and higher levels of social isolation compared to U.S. born residents and heterosexual/cisgender individuals (CDC, n.d.).

Alternatively, high levels of social support are associated with healthy diets and exercise (*Social and Community Context- Healthy People 2030*, n.d.). Strong social support systems serve as a protective factor against depression, even among those with adverse childhood experiences (Brinker & Cheruvu, 2017). Social and community support is connected to social capital which can impact access to employment, health care, and education. (Family and Social Support, n.d.). Healthy People 2030 use the percentage of adults who talk to their friends and family about their health to measure levels of social support among communities (*Social and Community*

Context – Healthy People 2030, n.d.). This indicator would be a helpful measurement in determining perceived levels of social support among Durham residents.

Geographic and Historical Context

Durham County, North Carolina, is rich and diverse with communities that embrace culture and innovation, and promote the values of accountability, commitment, integrity, teamwork, and collaboration (*Culture & Community | Discover Durham*, n.d.). Figure A1 visually represents Durham’s population by race and ethnicity based on 2019 data (see Appendix A). Socioeconomic and health disparities exist between community groups; 24.1% of Hispanic residents and 16.5% of Black residents live at or below the poverty line compared to only 6.83% of White residents. Black residents experience higher unemployment (7.1%) compared to the average unemployment rate of 4.7%, and immigrants report higher levels of depression and anxiety than U.S. born residents (Durham County, 2020; Durham County Community Health Assessment [CHA], 2020). Structural racism stemming from a long history of redlining, high interest loans, and the school-to-prison pipeline contribute to these disparities (Durham County CHA, 2020). LGBTQ+ individuals also experience disparities from government bias, societal stigma, and discrimination. Transgender residents reported reduced social support following North Carolina’s “bathroom bill” in 2014 and increased alcohol and drug usage to cope with the stress induced from limited access to affirming public spaces (North Carolina Coalition Against Domestic Violence [NCCADV], 2019). Durham County is actively addressing these disparities through initiatives such as Bank Black Durham, the Durham Master Aging Plan, increased funding for mental health resources, and LGBTQ+ inclusive data collection (Durham County CHA, 2020). Durham County’s strong assets including Duke University, Research Triangle Park, and The Durham LGBT Community Center, offer resources for BIPOC and LGBTQ+ communities.

Priority Population

Durham County is proud to be the 2nd largest home for LGBTQ+ North Carolinians, with 5.8% - 9.7% of their population being LGBTQ+ (Lapinski, n.d.). Due to recent political attacks

on the LGBTQ+ community nationwide, improved social and community support for Durham LGBTQ+ residents is crucial. Durham County passed non-discrimination legislation for government employees but there are no federal or North Carolina state-level laws to protect LGBTQ+ individuals from employment or housing discrimination on the basis of sexual orientation or gender identity (Durham County CHA, 2020). While Durham is more progressive compared to surrounding areas, there is an increased need for accurate data collection to better understand the elevated health problems of LGBTQ+ residents. Sexual minorities are three times as likely to be diagnosed with depressive disorder and face higher risks of death by suicide (Durham County CHA, 2020). Without proper data, funding for LGBTQ+ focused initiatives (e.g., prevention services for mental health, substance use, violence victimization) is limited (Durham County CHA, 2020). A survey conducted by Carolina Partners in Mental Healthcare says over 65% of clinicians need increased education on LGBTQ+ issues to improve healthcare services (Durham County CHA, 2020). Improved quality of care is extremely important, but much of the daily stress, unhealthy coping behaviors, and mental health issues experienced by LGBTQ+ people are due to lack of acceptance in their communities. Figure A2 demonstrates the difference in anxiety and depression levels between LGBTQ+ and non-LGBTQ+ adults (see Appendix A).

Measures of SDOH (Social & Community Support)

Durham has limited data on the LGBTQ+ community's perceived levels of social support. However, qualitative data from one study emphasizes LGBTQ+ Durham residents' reliance on social support to cope with stress and discrimination (NCCADV, 2021). See Figure B3 from a nationwide survey comparing the perceived levels of support in LGBTQ+ friendly areas, not LGBTQ+ friendly areas, big cities, and small communities (see Appendix B).

Levels of support vary among different LGBTQ+ identities with transgender individuals reporting lower levels of support. This is backed by data showing transgender individuals face higher risks of depression and suicide compared to their LGB peers (Virupaksha et al., 2016). Figure B4 and Figure C5 show the variance in acceptance of transgender people (see

Appendix B). It should be stressed that BIPOC LGBTQ+ adults face higher risks of negative health outcomes due to the intersectionality of marginalized identities (Durham County CHA, 2020).

Rationale

In addition to the targeted discriminatory policies against the LGBTQ+ community nationwide, North Carolina has recently passed legislation that prevents transgender girls and women from competing on sports teams that align with their gender identity. Other proposed discriminatory bills that negatively impact LGBTQ+ communities include limitations on DEI trainings, 12-week abortion bans, and redistributing political power that unfairly benefits Republican counties (Schoenbaum, 2023; Chen & Kelly, 2023; *Democracy Alerts*, 2023). LGBTQ+ people may relocate to Durham due to the progressive reputation in the hopes of finding equitable healthcare and societal acceptance. LGBTQ+ identification has steadily increased over the past decade with younger generations being more likely to claim identities outside of the heterosexual or cisgender binary. Nearly 20% of Generation Z identify as LGBTQ+ and we can expect this number to grow with future generations (Jones, 2023). This pattern underscores the need for increased LGBTQ+ social support. Social support initiatives will raise awareness of LGBTQ+ specific issues and potentially increase funding to improve healthcare access and prevent violence. This is an opportunity for Durham to utilize their resources and improve the health of their residents, build stronger social cohesion, and promote economic growth.

Disciplinary Critique

Public health leaders are trained to view health through a broad lens to consider the impact of social factors (e.g., ethnicity, employment, education, identity) on health behaviors and outcomes. This allows health to be viewed from a population perspective to identify complex problems that contribute to mental and physical health issues rather than treating individual symptoms in clinical settings. Public health professionals aim to create environments that promote health equity and reduce health disparities. Due to the long history of societal and government discrimination against the LGBTQ+ community, an upstream approach is necessary to address

systemic bias that contributes to health problems disproportionately impacting LGBTQ+ people. Social support serves as a protective factor against chronic disease and mental health issues; increased social support will build community resilience, improve generational health, and reduce spending on reactionary health interventions (Reblin & Uchino, 2008).

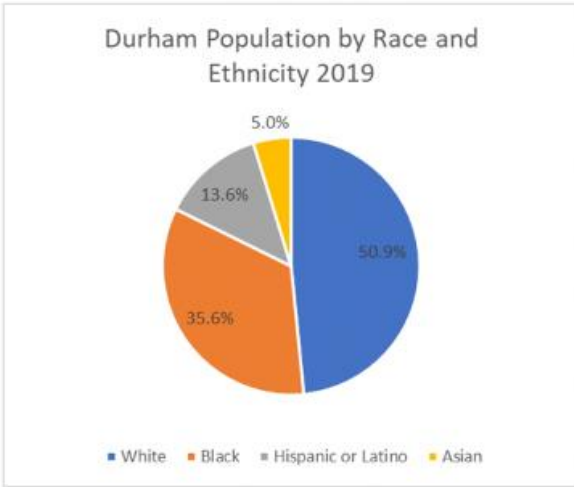
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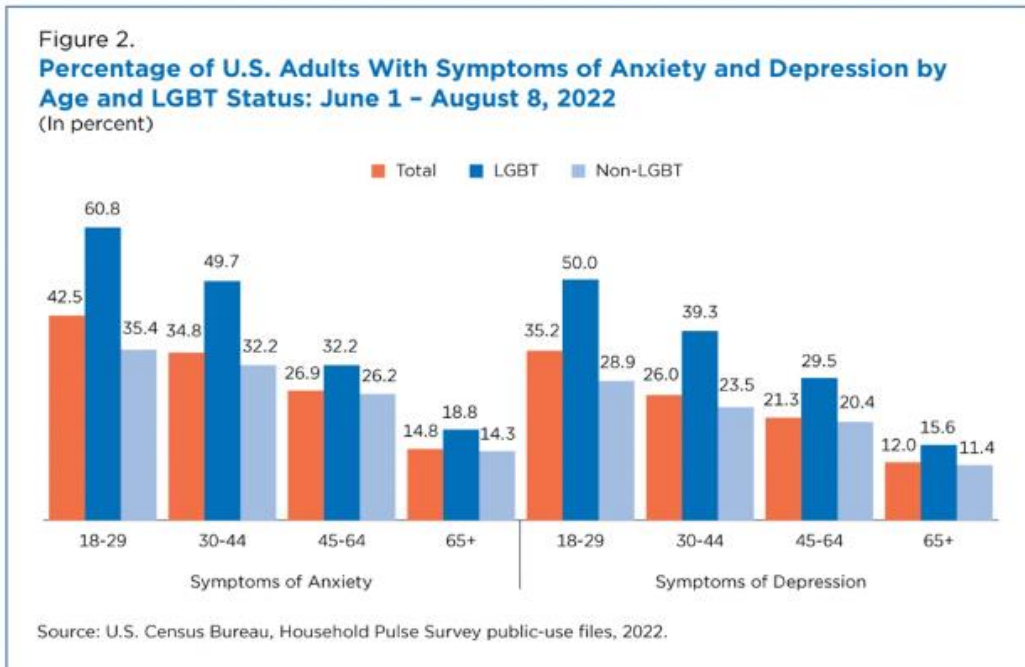
APPENDIX A

Figure A1
Durham Population



Note. Reprinted from 2021 State Health Report by Partnership for a Healthy Durham (2021). Retrieved from <https://healthydurham.org/cms/wp-content/uploads/2022/09/2021-Durham-SOTCH-Report.pdf>

Figure A2
Percentage of U.S. Adults with Symptoms of Anxiety and Depression by Age and LGBT Status



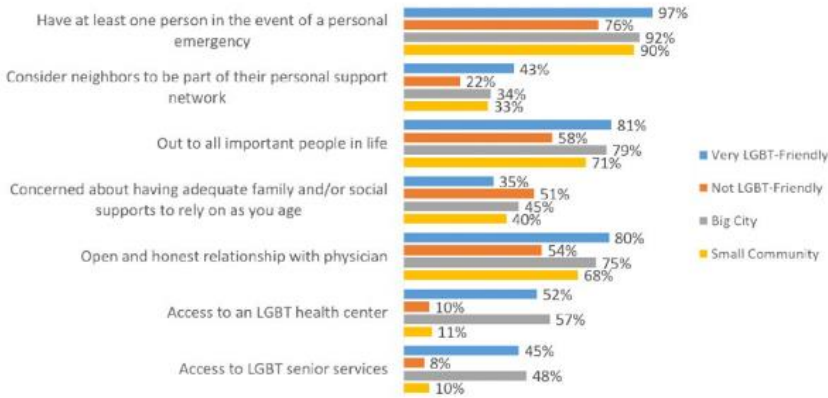
Note. Reprinted from Mental Health Struggles Higher Among LGBT Adults Than Non-LGBT Adults in All Age Groups by Marlay, et al., (2022) Retrieved from <https://www.census.gov/library/stories/2022/12/lgbt-adults-report-anxiety-depression-at-all-ages.html>

APPENDIX B

Figure B3

Perceived Social Support among LGBTQ+ Adults Age 45 and Up

Support and Quality of Life by LGBT-Friendliness and Size of Community among LGBT adults age 45 and older



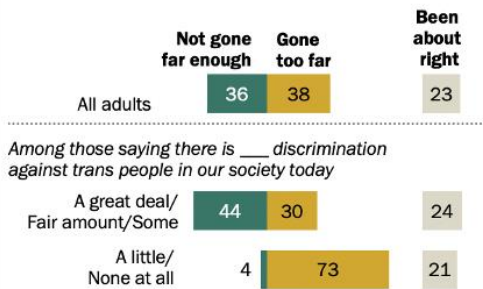
Note. Reprinted from *Maintaining Dignity: A Survey of LGBT Adults Age 45 and Older* by Houghton (2018) Retrieved <https://www.aarp.org/research/topics/life/info-2018/maintaining-dignity-lgbt.html?CMP=RDRCT-PRI-OTHER-LIFE-030618>

Figure B4

Public Acceptance of Transgender People

Public is divided over whether society has gone too far or not far enough in accepting transgender people

% saying our society has ___ in accepting people who are transgender



Note. Reprinted from *Americans' Complex Views on Gender Identity and Transgender Issues* by Pew Research Center (2022) Retrieved <https://www.pewresearch.org/social-trends/2022/06/28/americans-complex-views-on-gender-identity-and-transgender-issues/>

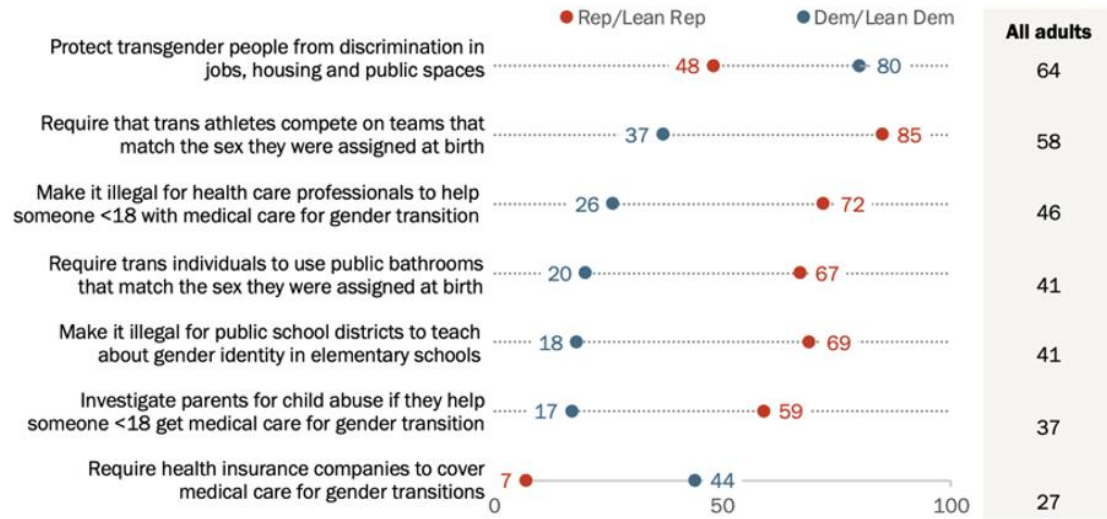
APPENDIX C

Figure C5

Views of Laws and Policies Related to Transgender Issues Based on Political Party

Views of laws and policies related to transgender issues differ widely by party

*% saying they would **strongly favor or favor** each of the following laws or policies that are either in place or being considered in the U.S.*



Note. Reprinted from Americans’ Complex Views on Gender Identity and Transgender Issues by Pew Research Center (2022) Retrieved <https://www.pewresearch.org/social-trends/2022/06/28/americans-complex-views-on-gender-identity-and-transgender-issues/>

Appendix B.2: Community Partner Analysis

Social Determinant of Health

Social determinants of health (SDOH) refer to the environments people are exposed to and how that environment impacts their physical and mental health (*SDOH- Healthy People 2030*, n.d.). Social and community support includes relationships and access to resources within family units, neighborhoods, workplaces, cultures, and friend groups (*Social and Community Context- Healthy People 2030*, n.d.). The level of support people receive influences their quality of health. Low support is associated with higher risk of negative health outcomes and social isolation that can lead to unhealthy behaviors (Reblin & Uchino, 2008). Alternatively, high levels of social support are associated with healthy diets and exercise, lower rates of depression, and increased access to employment, healthcare, and education (Brinker & Cheruvu, 2017; Family and Social Support, n.d.).

Priority Population

Due to stigma and discrimination, LGBTQ+ people are more likely to experience low levels of social and community support. Sexual minorities are three times as likely to be diagnosed with depressive disorder, and in 2022, 75-85% of transgender adults considered death by suicide (Durham County CHA, 2020; Statista, 2023). Durham County is proud to be the 2nd largest home for LGBTQ+ North Carolinians, with 5.8% - 9.7% of their population being LGBTQ+ (Lapinski, n.d.). Recent nationwide political attacks on the LGBTQ+ community emphasize the need for improved social and community support for Durham LGBTQ+ residents. LGBTQ+ individuals may relocate to Durham because of the progressive reputation in the hopes of finding equitable healthcare and societal acceptance. Our team proposes an intergenerational program that will foster connections and positive relationships among LGBTQ+ adults aged 18-75 years to promote social support, community cohesion, and shared experiences. Intergenerational programs are intended to bridge gaps between younger and older generations, especially from marginalized communities, through educational, creative, and engaging events (County Health Rankings & Roadmaps, 2023).

Stakeholder Map

Our team has identified stakeholders within the non-profit, activist, government, political, business, research, and health sectors, as well as the LGBTQ+ community and allies, to collaborate on the best strategies for improving social and community support for Durham residents. See Figure A1, Appendix A, for a Power Interest Grid that visually maps our stakeholders based on their influence and interest in this initiative. This tool was used to easily categorize stakeholders into varying levels that will help our team establish appropriate communication channels and engagement strategies to best maximize resources. The tool also allows for quick adjustments within our engagement plan; as our team learns more about community needs, the initiative may require more or less participation from certain stakeholders.

Community Partners

Within the government sector, our team proposes partnerships with the Durham Community Safety Department – Community Services Division, Durham Democrats and Republicans, Durham County Department of Social Services, Durham County Library, Durham City Council, and Durham Parks and Recreation. These partners perform civil services to enhance the wellness and safety of Durham residents and offer knowledge on available government resources and funding to support social and community programs. The Durham County Public Health Department and mental health professionals will serve as health experts and consider community health impact during program planning and implementation (*Durham County - NC - Public Health | Home*, n.d.). The Research Triangle is a valuable resource that can help our team gather community needs and evaluation data to determine program priorities and quality improvement strategies (*The Triangle*, n.d.). The Durham Small Business Collaboration can help our team connect with local business owners and develop plans on how to highlight their goods and services that contribute to Durham’s community identity, diverse marketplace, and economic stability (Durham Small Business Collaboration | Durham, NC, n.d.). LGBTQ+ business owners may be especially interested in providing safe spaces for LGBTQ+ community members to socialize and enhance community connectedness (LGBTQIA-

Owned & Operated Businesses in Durham | Discover Durham, n.d.). The Durham County Arts Council is committed to supporting equity, access, and inclusion in the cultural and art community and would serve as a great resource in promoting creativity and education within social support programs (*Who We Are - Durham Arts Council, 2023*). Statewide human rights organizations such as the Southern Coalition for Social Justice, The North Carolina Coalition Against Sexual Violence, Equality NC, Alliance of Disability Advocates, and the Human Rights Campaign North Carolina advocate for equal rights and would champion the efforts to increase social and community support for the LGBTQ+ community. The LGBTQ+ Center of Durham serves as a local resource for LGBTQ+ community members and allies to find health, legal, education, basic needs, and support services. They work directly with community groups such as Friends Aging Quirkily (F.A.Q.), Project F.A.M., and Durham Queer Sports that will help our team connect with LGBTQ+ members of all ages (*LGBTQ Center Durham, n.d.*). Lastly, our team will strive to connect with local LGBTQ+ adults that may not have pre-existing affiliations with organizations or support groups, to ensure that we are responding to the interests and needs of the community as a whole.

Participation and Impact

Our team recognizes the value of diverse experiences and perspectives to reach collective impact within the community. We hope a social justice approach will foster trust between stakeholders and encourage participation, especially from those in the most affected communities. The long history of stigma and discrimination against the LGBTQ+ community may present participation barriers among those within and outside of the LGBTQ+ community. The politicization of transgender identities has made many public spaces hostile and unsafe for transgender people and will require special consideration and compassion from our team to address these concerns (Astor, 2022). Additionally, the HIV/AIDS epidemic in America disproportionately hurt Black and Brown gay and bisexual men, impacting the demographic landscape of older LGBTQ+ generations (Centers for Disease Control and Prevention, n.d.). Fortunately, Durham has affirming organizations that are passionate about LGBTQ+ advocacy and highlighting the voices of

the most marginalized communities. We hope that the importance of social and community support aligns with our partners' values and will facilitate equitable participation in prioritizing support programs.

CATWOE Comparisons

See Figure B2 and B3, Appendix B, to view detailed stakeholder comparisons for F.A.Q. and the Durham County Republican Party. F.A.Q. is a program within the LGBTQ+ Center of Durham that aims to build support among LGBTQ+ adults aged 50 and older (F.A.Q. – LGBTQ Center Durham, n.d.). They recognize the need for a collective effort towards social support and community acceptance to create sustainable support systems for LGBTQ+ adults. The Durham County Republican Party aims to reduce government intervention and advocate for traditional conservative values (About - Durham County Republican Party, n.d.). They view social support as an individual responsibility that can be obtained through hard work and self-discipline (Atske, 2020). Participation from F.A.Q. and the LGBTQ+ Center of Durham will be critical in developing a successful intergenerational support program for LGBTQ+ adults and fostering positive relationships within the community. The Durham County Republican Party may oppose these efforts due to their opinion on appropriate use of government resources. However, our team should be aware of their views to address conflicts or barriers that prevent the implementation of community-based social support programs.

Questions and Conclusions

To develop shared objectives and goals amongst our stakeholders, our team has the following questions for our partners: What ideas do you have that could increase social and community support for Durham residents? What do you view as the biggest challenge in the improvement for social and community support? What outcome do you hope to achieve? What expectations do you have about this partnership? How much time can you dedicate to this initiative? What resources or knowledge do you have that could benefit this initiative? What resources or technical assistance do you need? What are your competing priorities?

This analysis provides an overview of stakeholders in Durham County that can contribute to and/or benefit from participating in the efforts to improve social and community support for Durham residents. Our team hopes this analysis highlights the assets and resources available in Durham to successfully implement social and community support programs. Durham has a diverse and active LGBTQ+ population that contributes to the county's vibrant and caring community. The lack of defined roles for who is responsible in addressing social and community support could hinder program planning and implementation. The Power Interest Grid shows that many of our stakeholders hold a moderate level of interest and influence on social and community support as a social determinant of health. However, our team feels that this is an opportunity for Durham to utilize their resources and invest in their residents' well-being to promote greater community cohesion and economic stability.

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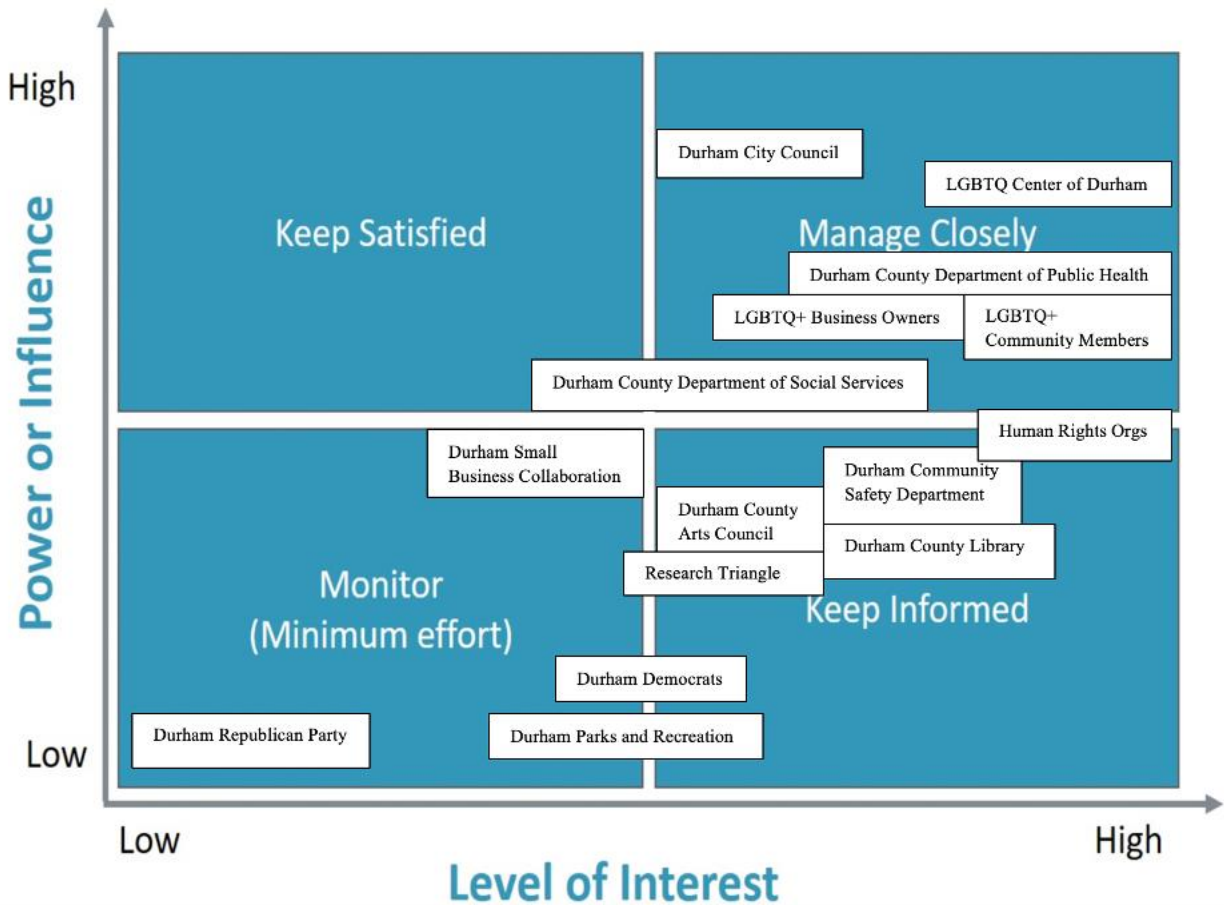
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APPENDIX A

Figure A1
Power Interest Grid



Note. The blank Power Interest Grid was Reprinted from Stakeholder Management using the Power Interest Matrix (n.d.). Retrieved from <https://www.solitaireconsulting.com/2020/07/stakeholder-management-using-the-power-interest-matrix/>

Influence definition: decision making power and resource allocation ability to organize and implement events to host intergenerational program. **Interest definition:** commitment to improving social and community support for LGBTQ+ residents in Durham.

Stakeholders:

1. LGBTQ Center of Durham
 - a) Friends Aging Quirkily
 - b) Durham Queer Sports
 - c) Project F.A.M.
2. Durham Business Owners/Durham Small Business Collaboration
 - a) LGBTQ+ Business Owners
 - a. Arcana Bar and Lounge, Everlou Coffee Co., Flowers by Gary, Grub Durham, Indulge Catering, LLC., Rofhiwa Book Café, Pinhook

3. Durham County Arts Council
4. Republican Party
5. Durham City Council
6. Durham County Department of Public Health/Mental Health practitioners
7. Research Triangle
 - a) North Carolina State University
 - b) University of North Carolina at Chapel Hill
 - c) Duke University
8. Durham Community Safety Department
 - a) Community Services Division
9. Durham Democrats
10. Durham County Department of Social Services
11. Durham County Library
12. Durham Parks and Recreation
13. LGBTQ+ community members
14. Human Rights Organizations/Advocacy groups
 - a) Southern Coalition for Social Justice, The North Carolina Coalition Against Sexual Violence, Equality NC, Alliance of Disability Advocates, Human Rights Campaign North Carolina

APPENDIX B

Figure B2

CATWOE Friends Aging Quirkily

CATWOE: Friends Aging Quirkily	
Customer	LGBTQ+ adults aged 18-75 in Durham County
Actor	Friends Aging Quirkily (Program within the LGBTQ Center of Durham)
Transformation	Building community relationships among older and younger LGBTQ+ adults
Worldview	All LGBTQ+ community members deserve to feel safe, respected, and included. Older LGBTQ+ adults have lived experiences and wisdom that should be shared with younger generations.
Owner	Elderly LGBTQ+ adults, LGBTQ+ Center of Durham, Allies, Transitions Life Care, business owners, Durham Center for Senior Life
Environment	Lack of support, stigma, violence, public opposition, lack of transportation, lack of event spaces, lack of interest
Root Definition:	The community support system is a collective effort to improve social connections and community support for LGBTQ+ adults through events and interactions between LGBTQ+ adults of all ages to promote acceptance and share lived experiences.

Figure B3

CATWOE Durham County Republican Party

CATWOE: Durham County Republican Party	
Customer	LGBTQ+ adults aged 18-75 in Durham County
Actor	Durham County Republican Party
Transformation	Promote conservative principles and place responsibility of social support onto individuals and traditional family units
Worldview	“The proper role of government is to provide for the people only those critical functions that cannot be performed by individuals or private organizations, and that the best government is that which governs least” (About - Durham County Republican Party, n.d.).
Owner	Voters, City council, Republican politicians
Environment	Progressive principles, Democrat Politicians, voters, lack of support, community needs
Root Definition:	The community support system is a system where individuals and family units are responsible for improving social connections and community support for LGBTQ+ adults through personal or private financial means to promote self-discipline and reduce government overreach.

Appendix B.3: Engagement and Accountability Plan

Purpose

Social determinants of health (SDOH) refer to the conditions in the environments people are exposed to and how that environment impacts their physical and mental health (SDOH- Healthy People 2030, n.d.). Social and community support is one of five categories of SDOH and includes relationships and access to resources within family units, neighborhoods, workplaces, cultures, and friend groups (Social and Community Context- Healthy People 2030, n.d.). The lack of social and community support for marginalized communities is a wicked problem that stems from a long history of systemic racism, discrimination, and stigma. “Wicked” is a term used to describe the complexity of social problems and is defined by ten characteristics (Rittel & Webber, 1973). One of those characteristics states that the planner who is addressing the wicked problem has no right to be wrong because “Planners are liable for the consequences of the actions they generate; the effects can matter a great deal to those people that are touched by those actions” (Rittel & Webber, 1973, p.167). Therefore, efforts to improve social and community support for marginalized communities must be intersectional, intentional, and considerate. Developing positive relationships with communities and organizations can help foster trust and communication that brings awareness to the social determinants that negatively impact the health of residents in Durham, North Carolina. To improve social and community support for all residents, there needs to be a shared understanding of what that support looks like for diverse community members. Encouraging partnerships and collaboration between stakeholders will highlight diverse experiences and perspectives that are needed to ensure that efforts to improve community conditions and social networks are equitable and will meet the needs of the most marginalized groups. Another wicked problem component states, there is “no stopping rule,” meaning there will never be one permanent solution (Rittel & Webber, 1973). Humans are social beings that will always require social support to thrive physically and mentally. Communities will have to work together to identify and plan initiatives that can be sustained long term and lead to lasting change.

Lesbian, gay, bisexual, transgender, and queer/questioning (LGBTQ+) people are more likely to experience low levels of social and community support (Centers for Disease and Control [CDC], n.d.). Our team proposes an intergenerational community program that involves workshops and classes open to LGBTQ+ adults between the ages of 18-75 years to facilitate shared experiences that will foster connections and positive relationships to promote social support, community cohesion, and well-being. Intergenerational programs are intended to bridge gaps between younger and older generations, especially from marginalized communities, through educational, creative, and engaging events (County Health Rankings & Roadmaps, 2023). It's especially important to work with community partners in this initiative to not only provide social support for LGBTQ+ individuals, but also support the existence of sexual and gender minorities by advocating for inclusive data collection, improved public policy, and access to affirming healthcare. In a collective transformation where the LGBTQ+ community is fully supported, we must work together in creating support at the individual, relationship, community, and societal level (Bailey, 2018).

Priority Partner

The LGBTQ Center of Durham will serve as a priority partner and oversee the planning, development, implementation, and evaluation of the proposed intergenerational community program. The LGBTQ Center of Durham serves as a local resource for LGBTQ+ community members and allies seeking health, legal, education, basic needs, and support services (*LGBTQ Center Durham*, n.d.). Their mission to support the wellbeing of LGBTQ+ people aligns with the goal of using an intergenerational community support program to promote positive relationships and social connectedness among the LGBTQ+ community. The staff members represent diverse identities across the sexuality and gender spectrum (*LGBTQ Center Durham*, n.d.). Their lived experiences with navigating social and community support systems in Durham County are directly related to the SDOH in focus. They are familiar with the support needs of the community and can help connect our team with potential program participants. For other proposed community partners, please see Appendix A.

Engagement Barriers and Facilitators

The LGBTQ+ community has faced a long history of systemic discrimination, stigma, and neglect (Schroeder, 2022). This has contributed to health disparities, increased risk of unemployment and homelessness, violence, and mistrust of the government and medical system (*Understanding Poverty in the LGBTQ+ Community*, n.d.). Acts of government discrimination have not been left in the past. The Supreme Court just granted businesses open to the public “a constitutional right to refuse to serve members of a protected class” (Gerstein & Frazier, 2023). Understandably, LGBTQ+ organizations may be hesitant to invest in partnerships without a solid foundation of trust and communication. Actively participating in community mobilization efforts inherently increases visibility, which can contribute to increased violence and victimization towards LGBTQ+ community members (Jones & Kishi, 2022). The Center of American Progress published a report in 2022 showing that LGBTQ+ adults experience high levels of discrimination in public spaces (see Appendix B; Miller, 2023). Fear of violence and discrimination can deter interactions and limit collaboration efforts. The politicization of transgender identities has made many public spaces hostile and unsafe for transgender people, further validating caution when participating in community initiatives (Astor, 2022).

Competing priorities may influence the LGBTQ Center of Durham’s participation in the proposed intergenerational community program for adults. There are currently three active bills being considered in North Carolina that target LGBTQ+ youth, especially transgender youth (*NC Is Ready for LGBTQ Protections*, n.d.). With the recent opening of the LGBTQ+ Youth Center, resources may be directed towards support for youth during this especially vulnerable time (Richardson, 2019).

An intergenerational community program was chosen due to the compelling indication of success and reported satisfaction from LGBTQ+ participants. The LGBTQ+ Intergenerational Dialogue Project is a program that started at an art school in Chicago and has been running strong for four years (The Intergenerational Dialogue Project, 2022). Participants share positive experiences including improved connection to the queer community, inspiration for creative work, and healthy dialogue around generational differences (The LGBTQ+ Intergenerational Dialogue Project, 2022). We hope this evidence

encourages participation from the LGBTQ Center of Durham and other local organizations. The LGBTQ Center of Durham centers the experiences of queer, transgender, people of color (QTPOC), which directly aligns with the Project Team's social justice approach that when the needs of the most marginalized communities are centered, then everyone will be served (Gomez & Boldt, n.d.). We believe this approach combined with the compelling evidence that intergenerational programs successfully improve support networks for LGBTQ+ people, will act as an engagement facilitator despite the aforementioned barriers. Additionally, accessibility will be a priority when planning social events; the Project Team will consider physical limitations, transportation access, sensory needs, and financial barriers and attempt to accommodate the needs of the community to increase participation in the program.

Engagement Methods

To highlight the experiences and priorities of our target population during the design phase of our initiative, the Project Team will collaborate with the LGBTQ Center of Durham in facilitating narrative interviews. Staff and community members will be invited to participate in sharing their perceived levels of social and community support and experiences with existing social networks in Durham County. To reach our target audience, we will use multi-level engagement tools such as social media posts, flyers, announcements, and word-of-mouth. These interviews will be offered in individual and group settings to prioritize comfort and protect participants' privacy. Narrative interviewing is a common qualitative research tool used to promote storytelling and enable a deeper understanding of certain issues (Cleland, 2017). These interactions will offer opportunities to discuss the idea of an intergenerational community program, how support systems impact physical and mental health, and the importance of social support for LGBTQ+ adults.

An advisory committee including representatives from other affirming community organizations will be developed with the LGBTQ Center of Durham to foster trust, help alleviate participation concerns, and communicate clear expectations around social and community support goals. The committee will embrace diversity, collaborate on objectives, and advise decision-making during the design, improvement, and sustain phase of the program. Work groups and committees representing many sectors

of the community have been used to enhance the mobilization of resources, strengthen partnerships, and promote equity in change efforts (Ahmed & Palermo, 2010). Monthly meetings lasting approximately 90 minutes will occur to enhance productivity and promote collective action.

Once our program has been implemented, the Project Team will work with the LGBTQ Center of Durham during the improvement phase to collect survey responses from program participants and other community stakeholders. Individual survey data will be compiled, interpreted, and communicated in a report accessible to the public. We can use this data to determine participant demographics, satisfaction with event themes and locations, inclusivity, accessibility of events, how many community members were served, and perceived levels of support. Satisfaction surveys are frequently used to identify gaps and develop quality improvement action plans (Al-Abri & Al-Balushi, 2014). This information will help program improvements and contribute to the available research on social and community support for LGBTQ+ adults, hopefully generating interest in future studies. One of our goals for this initiative is to highlight the impact of social and community support on LGBTQ+ adult health. Storytelling is a commonly used strategy to promote public health education, spark discussion, and improve community buy-in (McCall et al., 2019). Our team can utilize storytelling to spread awareness about LGBTQ+ social support needs and encourage participation in our events to sustain partner and community engagement. We recognize that resources are allocated to address other priorities but hope that our program underscores the positive impact of improving social connectedness among LGBTQ+ adults.

Engagement Leadership

The US Surgeon General recently declared social isolation and loneliness as a public health crisis in America that deserves immediate attention (Murthy, 2023). In response to the advisory guidelines to increase social support efforts, the Durham County Public Health Department should act as a leader in this initiative. They will serve as a centralized information source that can facilitate communication between stakeholders and organize administrative program components, including data collection and program evaluation. Data collected from our engagement evaluation measures (see Appendix C) will allow us to see the participant demographic breakdown and identify room for improvement. The data may

reveal participation gaps in age, race, or socioeconomic status that could potentially be addressed by developing stronger partnerships with other community partners. For example, if we find that we have much lower participation from LGBTQ+ community members aged 18-25, we might reevaluate our event locations or strengthen partnerships with local schools and universities to increase our opportunities of engaging with young LGBTQ+ adults. Additionally, we can address conflict within the internal work group and improve communication strategies, alternate leadership responsibilities, or use different tools for improved meeting management. See Appendix D for a detailed MOU with initial proposed roles and responsibilities. The County Commissioners can promote sustainable change by funding a full time Support Specialist position within the Durham County Public Health Department. The role would be responsible for continued community engagement, further data collection, and fundraising for additional support programs.

Disciplinary Critique

A partnership between The LGBTQ Center of Durham and the Durham County Public Health Department can be reflected in a Memorandum of Understanding (MOU) which includes mutually agreed upon roles and responsibilities, project scope, communication and engagement plans, and other relevant matters. This is a valuable contract that ensures aligned goals and commitment expectations. Please see Appendix D for an example MOU outline that describes the nature of this partnership and information regarding the joint project initiative.

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APPENDIX A

RASCI Table		
<u>Policy/Program</u> –We propose the implementation of an Intergenerational Community Program to improve social support and connection for LGBTQ+ adults (18+) in Durham North Carolina.		
RASCI Levels Who is...	Community Partners	Rationale
Responsible =owns the challenge/ project	The LGBTQ Center of Durham and the Durham County Public Health Department	The Durham County Public Health Department and the LGBTQ Center of Durham will work together to address public health concerns of social isolation and loneliness among the LGBTQ community by improving social and community support. The health department serves as population health experts and the LGBTQ center provides direct support to LGBTQ people. Collectively, they will carry out program objectives and evaluation efforts. The team will be responsible for consistent communication between stakeholders, meeting program deadlines, and reporting the process/outcomes to the appropriate sources.

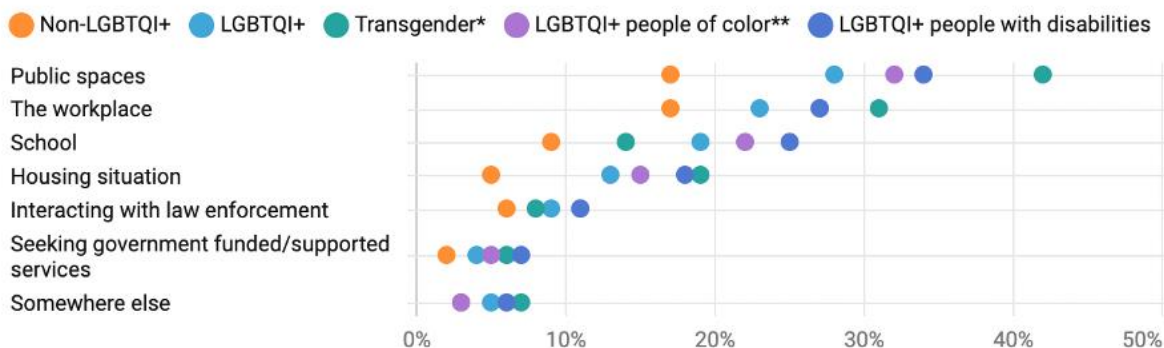
<p>Accountable=ultimately answerable for the correct and thorough completion of the deliverable or task, and the one who delegates the work to those <i>responsible</i></p>	<p>The Durham County Commissioners</p>	<p>The Durham County Commissioners will be accountable for the program because they will locate funds needed to carry out the project. They represent the interests and needs of the community and communicate with state and federal legislators.</p>
<p>Supportive=can provide resources or can play a supporting role in implementation</p>	<p>The LGBTQ Center of Durham, LGBTQ+ Business Owners, Durham Small Business Collaboration, Durham County Arts Council, Durham Community Services Division, Durham County Library, Human Rights Organizations</p>	<p>All these stakeholders offer services or hold community spaces that would aid in the implementation of intergenerational community events for LGBTQ+ adults. For example, the Durham County Library may host an educational event; human rights organizations may help champion our efforts by improving awareness of our mission and the importance of social support. The Durham County Arts Council will play a significant role in facilitating events centered around art and culture.</p>

<p>Consulted=has information and/or capability necessary to complete the work</p>	<p>LGBTQ+ Community members</p>	<p>The Project Team will consult with LGBTQ+ community members to gauge interest in the program, brainstorm diverse event ideas, and develop a shared understanding of program goals, expectations, and priorities. The lived experiences of LGBTQ+ people must be respected and considered during each phase of this program.</p>
<p>Informed=must be notified of results, process, and methods, but need not be consulted</p>	<p>Durham City Council,</p>	<p>Durham City Council should be aware of the program and the projected benefits of improved emotional and physical health among the LGBTQ+ community. They can utilize our data in future efforts to sustain the program and implement other initiatives to support marginalized communities.</p>

APPENDIX B

LGBTQI+ adults experience high levels of discrimination in public spaces, in the workplace, and at school

Shares of LGBTQI+ and non-LGBTQI+ adults who reported experiencing discrimination in various settings, by demographic group and location



Hover or click to see values.

Note: Proportions for each individual question exclude respondents who answered "Not applicable" as well as respondents who chose to skip the question.

* The statistics for transgender individuals include nonbinary, gender-nonconforming, genderqueer, and agender respondents.

** For the purposes of this survey, people of color include Black, Hispanic, Asian, and multiracial individuals, as well as those identifying as "other, non-Hispanic."

Source: Center for American Progress and NORC at the University of Chicago online survey, June 2022, on file with the authors.
Chart: Center for American Progress

Note: Image reprinted from *Discrimination and Barriers to Well-Being: The State of the LGBTQI+ Community in 2022* by Miller, 2023. <https://www.americanprogress.org/article/discrimination-and-barriers-to-well-being-the-state-of-the-lgbtqi-community-in-2022/>

APPENDIX C

Engagement Method	Related Facilitator(s) / Barrier(s)	Timing	Performance measure		
			Description	Data source	Frequency
Narrative interviews (group and individual)	Competing priorities/evidence of program success	Design	Number of interviews completed, demographic of participants (to make sure we are reaching diverse voices)	Recorded interviews Demographic survey data	Every six months
Advisory committee (group)	Lack of trust/fear of discrimination	Design, Improve, Sustain	Satisfaction of partnership (disaggregated by communication, performance, progress, leadership), number of meetings held, quality of meetings (meeting productivity, structured agendas, decision making process)	Survey data, Meeting agenda/minutes, survey data	Quarterly
Survey (group)	Competing priorities/importance of LGBTQ+ adult social support	Improve	Number of survey responses, demographic of participants, satisfaction with event themes, location, and inclusivity, are events accessible, perceived levels of support, satisfaction with survey distribution	Survey data Process evaluation surveys from work group	Quarterly

APPENDIX C: CAROLINE DUGAN FINAL DELIVERABLES

Appendix C.1: Social Determinants of Health Analysis

Social and community context is one of five categories of social determinants of health and has a large impact on a person’s well-being. Social and community context refers to an individual’s relationship with their family, friends, and community (OASH, 2023). Social support is a large part of this and can be defined as “a network of family, friends, neighbors, and community members that is available in times of need to give psychological and physical help” (Ozbay, 2007, p38). Many studies indicate that having adequate social support is essential in maintaining physical and mental health. In the short term, lack of social support is associated with increased heart rate, high blood pressure, and excess cortisol. Having social support in the long term can help foster resilience, reduce the rate of engaging in risky behaviors, and reduce the risk for developing mental illness. (Ozbay, 2007, p35). The proven benefits of social support on overall health and well-being indicate the need for evidence-based public health interventions aimed at increasing social support for at-risk populations.

Healthy People 2030 sets data-driven goals to improve health throughout communities and is a valuable tool for indicating the need for selected interventions. Within the social and community context’s overarching goal of increasing social and community support is a health communication goal – “Increase the proportion of adults who talk to friends or family about their health – HC/HIT-04”— which is worsening, and an increase is desired (OASH, 2023). Below are the relevant metrics for this goal.

Percent of adults aged 18 years and over reported having social support (OASH, 2023)		
Baseline (2017)	Most Recent Data (2020)	Target
86.9 percent	80.9 percent	92.3 percent

To increase social support in communities like Durham County, North Carolina, it is imperative that the public health team utilizes evidence-based data and prioritizes at-risk populations— like those who identify as gay, lesbian, bisexual, queer, or other sexual orientations (LGBTQ+).

Geographic and Historical Context

Durham County is located in central North Carolina, and is recognized for its diversity, civic engagement, and roots in the tobacco and textile industries (Durham County, 2021) The majority of Durham County residents are White (42.5%), and the proportion of African American residents in Durham County (36.5%) is higher than that rest of the state (21.5%) (Durham County, 2021)— see Appendix A. Durham County residents exhibit a wide range of educational attainment, and are more likely to have bachelor’s and graduate degrees compared to the rest of North Carolina and the United States (Durham County, 2021)— see Appendix B. Durham is considered to be one of the healthiest counties in North Carolina, ranking 9th out of 100 counties (CHR&R, 2023). Only 12% of its residents are of poor health, compared to the state statistic of 14% (CHR&R, 2023). It is also a metropolitan and diverse community with a rich history of faith-based and political community organizations. This community clearly values community engagement and has a high percentage of membership in community organizations (10.2%) compared to the rest of the state (11.2%) (CHR&R. 2023).

Despite Durham’s reputation for having generally healthy and diverse communities, minority populations like the LGBTQ+ community lack social support. Of the 311,848 individuals that live in Durham County, 6.3% identify as LGBTQ+ (Durham County, 2021). This is considerably more than the 4% of North Carolina residents that identify and indicates that a larger population of LGBTQ+ adults reside in Durham County compared to the rest of North Carolina (Durham County, 2021). There are currently no North Carolina nondiscrimination laws that protect individuals on the basis of sexual orientation or gender identity (Durham County, 2023). In addition to this lack of state protection, discrimination and stigma contribute to a lack of social support and poor mental health among LGBTQ+ adults. There are significant barriers to mental health care for this population, and therefore are a variety of existing resources for LGBTQ+ individuals seeking care, like the LGBTQ Center of Durham, Project Uplift, and Radical Healing, LLC. These community efforts are committed to supporting LGBTQ+ individuals through different services and resources (LGBTQ Center Durham, 2023).

Priority Population

The priority population for this public health effort is the LGBTQ+ adults in Durham County, North Carolina. Compared to heterosexual individuals, members of the LGBTQ+ community have higher rates of mental illness and related health behaviors like substance abuse. (Chan, et al., 2022). Additionally, LGBTQ+ individuals are discriminated against at higher rates than heterosexual individuals, and this results in physical and mental health disparities (Durham County, 2021). Psychosocial stress is directly influenced by social support, like familial disapproval and social stressors like stigma, criticism, and victimization (Chan, et al., 2022). Almost 40% of LGBTQ+ adults have been rejected by a family member or a close friend due to their sexual orientation or gender identity, and perceptions of discrimination vary greatly among LGBTQ+ adults (Pew Research Center, 2020)— see Appendix C.

When a group of individuals like the LGBTQ+ community is discriminated against and not accepted in the general community, social exclusion and isolation occurs. This is especially true for LGBTQ+ adults that are also racial and ethnic minorities, as the intersection of marginalized identities makes them more suspect to societal stressors (Balsam et al., 2011). Fear of exclusion and discrimination often results in individuals concealing their true sexual and/or gender identity, which further heightens psychosocial stress (Durham County, 2021). Additionally, this contributes to the marginalization and loneliness of LGBTQ+ adults since their authentic self is not accepted by the community (Chan et al., 2022). Unfortunately, accurate and relevant data specific to Durham County is scarce, and therefore an accurate portrayal of the health of its LGBTQ+ community is difficult.

Measures of Social Determinant of Health

As mentioned previously, lack of social support contributes to both physical and mental health disparities. This discrimination and lack of social support manifests in physical and quantifiable ways, like higher rates of depression, excessive alcohol or drug use, and suicide. Given the strong connection between poor mental health and lack of social support in LGBTQ+ adults, these measures of occurrence can be utilized in both setting goals at the beginning of the intervention, as well as demonstrating the multifaceted consequences of entire communities exhibiting a lack of social support.

In North Carolina, LGBTQ+ adults are three times as likely to be diagnosed with depression (Durham County, 2021). Suicide risk is also higher among LGBTQ+ adults (Durham County, 2021). Risk for suicide is highest among transgender individuals, as 82% have lifetime suicidal thoughts, and 40% have a history of suicide attempt. (Durham County, 2021). Tobacco use, excessive alcohol use, and drug use is also higher among LGBTQ+ individuals compared to heterosexual individuals. Tobacco use is highest among bisexual and transgender members of the LGBTQ+ community (Durham County, 2021). Additionally, binge drinking is higher in LGBTQ+ individuals compared to heterosexual individuals, and is highest among bisexual women, lesbians, and transgender members. (Durham County, 2021). Stigma, stress, depression, and lack of social support all contribute to these statistics.

Rationale & Importance

Identifying lack of social support among LGBTQ+ adults in Durham County, North Carolina will benefit the priority population across a range of public health issues. LGBTQ+ adults have high rates of mental health, physical health, and poor social behaviors compared to their heterosexual counterparts. While there are many efforts in place to help these problems, downstream, directing public health efforts to more upstream solutions will be a more efficient use of resources. It has been proven that having adequate social support is essential in maintaining physical and mental health, and therefore multiple problems can be addressed at once. One challenge that will present itself throughout this project is missing and non-relevant data to the population at hand. This challenge is also further rationale for taking on this project, as new strategies and more awareness must be generated for the LGBTQ+ community.

Disciplinary Critique

In identifying and researching the priority population, it is easy to focus on what is not going well in the community. After all, LGBTQ+ adults were chosen as the priority population given lack of social support, high prevalence of discrimination, and poor mental health outcomes. It is the role of a public health leader to find strengths in the community to capitalize on. There are pre-existing strengths to utilize throughout the intervention, and perhaps even a solution. It takes an open-minded leader to humble themselves and realize that they do not have all the answers. Additionally, it takes an equitable leader to

work with a minority population to promote social justice in communities that are discriminated against. It is important to reflect on the role a public health leader plays in this project, and what strengths to utilize to ensure the most effective intervention.

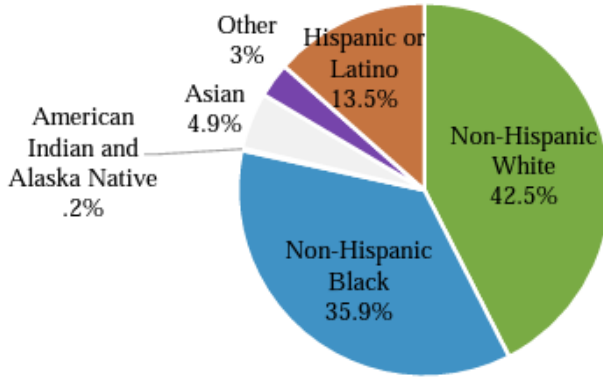
Addressing lack of social support in Durham County is critical in mitigating other public health problems among the LGBTQ+ community. This should appeal to County Commissioners who are not as concerned with health equity, as addressing lack of social support upstream will benefit mental health outcomes like depression, anxiety, suicide, and excessive drinking downstream. After all, mental health is one of five Durham County health priorities and should therefore appeal to the County Commissioners.

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APPENDIX A: Race and Ethnicity in Durham County, 2015-2019

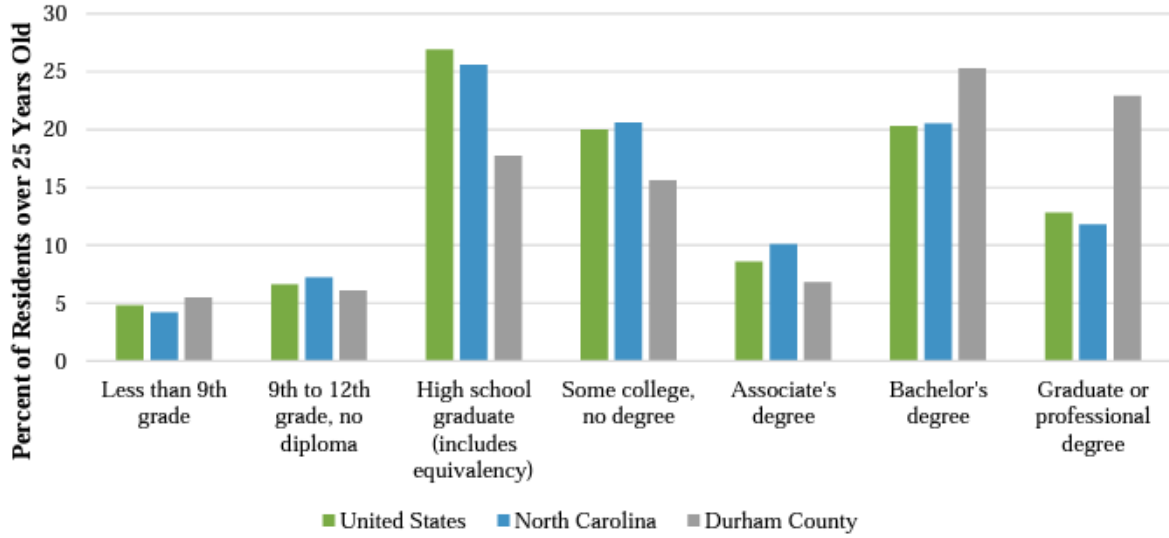
Race and Ethnicity in Durham County, 2015-2019^{xiii}



Durham Community Health Assessment, (2020).

APPENDIX B: Educational Attainment among Residents over Age 25 in Durham County, North Carolina, U.S., 2015-2019

Educational Attainment among Residents over Age 25 in Durham County, North Carolina and U.S., 2015-2019

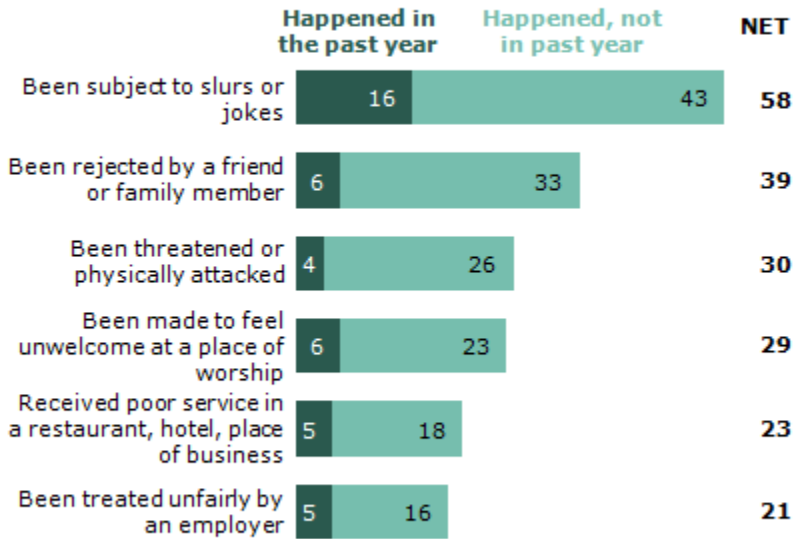


Durham Community Health Assessment, (2020).

APPENDIX C: Perceptions of Discrimination in LGBTQ+ Adults

Perceptions of Discrimination

% saying this ... because of their sexual orientation or gender identity



Notes: Based on all LGBT (N=1,197). "Net" was computed prior to rounding.

PEW RESEARCH CENTER

LGBT/82a-f

Pew Research Center, (2020, May 30).

Appendix C.2: Community Partner Analysis

Introduction

Social and community context is one of five categories of social determinants of health and has a large impact on a person's well-being. Social and community context refers to an individual's relationship with their family, friends, and community (OASH, 2023). Many studies indicate that having adequate social support is essential in maintaining physical and mental health. Lack of social support is associated with increased heart rate, high blood pressure, and excess cortisol. Having social support in the long term can help foster resilience, reduce the rate of engaging in risky behaviors, and reduce the risk for developing mental illness. (Ozbay, 2007). The proven benefits of social support on overall health and well-being indicate the need for evidence-based public health interventions aimed at increasing social support for at-risk populations.

LGBTQ+ adults aged eighteen and older face distinct challenges, discrimination, and social isolation in their everyday life, and it is important now more than ever that they interact and connect with each other throughout different stages of adult life (SAGE, 2023). Intergenerational programs are important in bridging gaps between younger and older generations of marginalized communities. The public health team is proposing an intergenerational activity program that facilitates social and educational events that encourage social support and connection. This program will operate through the LGBTQ Center of Durham and organize events with an art focus. These art workshops will bring diversity and fun to community engagement and will be aimed at fostering relationships between different generations of LGBTQ+ adults in a creative way.

The primary advantage to this program is fostering connections across generations by minimizing social isolation and improving community health (SAGE, 2023). In strengthening generational connections between LGBTQ+ adults in Durham County by creating a welcome space and facilitating activities, this initiative will foster social support. In encouraging social support across generations,

expected benefits include improved health outcomes, improved well-being, reduced isolation, and improved intergenerational attitudes (CHR&R, 2023).

Community Partner Mapping & Analysis

Community partners that would be involved in this transformation include LGBTQ+ adults in Durham County (especially those who are survivors of stigma and discrimination), the LGBTQ Center of Durham, the County Commissioners, Services and Advocacy for Gay, Lesbian, Bisexual, and Transgender Elders (SAGE), Durham Arts Council, LGBTQ+ business owners, and other Durham County residents. Community partner mapping and analysis is an essential step in not only identifying key stakeholders in power and influence, but also their interest and level of support in the issue. The power interest matrix is a valuable tool in outlining and analyzing these factors in a clear and useful way. See the power interest matrix outputs in Appendix A.

Seeing where community partners are on the power interest matrix can inform how they will be involved throughout the program planning and implementation processes, and that is why this tool was chosen. Those who are high influence, low interest are to be kept satisfied and informed; low influence and low interest partners are to be monitored; high influence, high interest partners are to be managed closely and actively engaged; low influence, high interest partners are to be kept informed and shown consideration (Oguz, 2022).

The prior mentioned partners should be prioritized for involvement in the Intergenerational Community task force in order to foster social support among LGBTQ+ adults in Durham County, and the varying levels of influence and interest can be used to the project team's advantage. The County Commission is high influence and high interest, and they have the power to fund and make this program successful if they are satisfied. The LGBTQ Center of Durham is high influence and high interest, as they will not only facilitate the program through their organization but are dedicated to supporting LGBTQ+ people through programming and social networks (LGBTQ Center Durham, 2023). Another high influence and high interest organization to engage and actively consult is SAGE given their expertise and dedication to providing services to elderly LGBTQ+ adults (SAGE, 2022). Other partners like LGBTQ+

adults in Durham County and the Durham Arts Council have high interest in this issue given their direct involvement and benefit from the program but lack the influence that the other partners have. Lastly, partners with low influence and low interest like LGBTQ+ business owners and other Durham County residents do not have direct stake in the issue yet should be informed for potential future involvement.

There are three factors that may influence the equitable representation and participation of these identified partners in the task force— stigma, increased awareness, and intersectionality. The LGBTQ+ community has been long stigmatized and still is to this day, and this may alter the input of the general Durham County community as well as the participation of the LGBTQ+ community across generations. LGBTQ+ stigma has lessened throughout generations, and therefore maintaining thoughtful, nonjudgmental input will be important for the group. Conversely, increased awareness over recent years may improve community participation in both the LGBTQ+ and non-LGBTQ+ communities. Lastly, it is irresponsible to assume that all LGBTQ+ adults in Durham County will give the same input across all races and ethnicities. Maintaining awareness that a lot of feedback may come from non-BIPOC individuals is the best way to overcome this.

Worldview Exploration

In Appendix B and Appendix C, a CATWOE analysis and root definition was generated for an LGBTQ+ adult living in Durham County and the Durham County Commissioner, respectively. The CATWOE analysis for an LGBTQ+ adult in Durham County clearly outlines how they visualize the issue and what improvements could be made. Their root definition is “to increase social support for and within the Durham County LGBTQ+ community (P), through creating social programs with county funding through existing organizations (Q), in order to increase social support and decrease negative mental health outcomes in the LGBTQ+ community.” From their perspective, there is a clear lack of support and poor mental health outcomes within the community, and the county has the resources to help solve the issue.

The CATWOE analysis for the Durham County Commissioner is not as straightforward. While they want to improve mental health in Durham County as a whole, they find it difficult to prioritize and become directly involved in fostering social support for LGBTQ+ mental health. Their root definition is

“to assist existing LGBTQ+ organizations create social programs (P), by encouraging these programs with some financial help (Q), in order to improve the health of LGBTQ+ members of Durham County and therefore the overall health of Durham County residents.” This is a partner that needs to be strategically motivated to support the program.

Conclusions

While reflecting on this community partner analysis, there are some issues that need to be addressed regarding the community partners outlined above. One question regarding the community partners that were proposed to be included is of the diversity of the LGBTQ+ community members on the task force. The project team strives for equitable representation and values a diverse intervention—therefore the proposed community partners must reflect this and all perspectives must be heard. Additionally, the County Commission’s knowledge of LGBTQ+ health disparities may be incomplete, and therefore should ensure a full understanding of the importance of this matter. The strengths and limitations of this analysis echo the aforementioned factors that may influence the equitable representation and participation of these identified partners in the task force— stigma, increased awareness, and intersectionality— and how that is reflected in the analysis. These factors compound other limitations, such as different partners having unequal interest in the issue, or having a lack of resources to contribute in a way the program requires. These issues can be mitigated through thoughtful tailoring of program priorities and effective partner engagement.

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APPENDIX A: POWER INTEREST MATRIX

Level of Influence <i>Low</i> <i>High</i>	County Commissioners	LGBTQ Center of Durham SAGE
	Durham County residents Business owners	LGBTQ+ adults in Durham County Durham Arts Council
	<i>Low</i>	<i>High</i>
	Level of Interest	

APPENDIX B: CATWOE ANALYSIS FOR AN LGBTQ+ ADULT LIVING IN DURHAM COUNTY

Customer	LGBTQ+ adults aged 18 and over living in Durham County, North Carolina
Actor	LGBTQ+ adult in Durham County, North Carolina
Transformation	Further broadening and strengthening networks within the LGBTQ+ community will make members like themselves feel less isolated and lonely.
Worldview	LGBTQ+ community members lack social support and have higher rates of mental illness— and therefore need more resources to build community.
Owner	Leadership partners have the funding to help LGBTQ+ organizations facilitate social support in the community.
Environment	The long term stigmatization and disregard for the LGBTQ+ community in North Carolina

Root Definition: To increase social support for and within the Durham County LGBTQ+ community (P), through creating social programs with county funding through existing organizations (Q), in order to increase social support and decrease negative mental health outcomes in the LGBTQ+ community.

APPENDIX C: CATWOE ANALYSIS FOR THE DURHAM COUNTY COMMISSIONERS

Customer	LGBTQ+ adults aged 18 and over living in Durham County, North Carolina
Actor	Durham County Commissioners
Transformation	Mental health is one of the Durham County top health priorities, and therefore mental health for Durham County residents should be improved
Worldview	Improve the health and wellbeing of all Durham County residents in the most fiscally efficient way possible
Owner	There are existing LGBTQ+ organizations in Durham County that should be able to put on these programs with minimal help from the county
Environment	There is only so much funding available, and the LGBTQ+ community is a small percentage of the county

Root Definition: To assist existing LGBTQ+ organizations create social programs (P), by encouraging these programs with some financial help (Q), in order to improve the health of LGBTQ+ members of Durham County and therefore the overall health of Durham County residents.

Appendix C.3: Engagement and Accountability Plan

Purpose

Engagement of community partners is an essential stage in any public health intervention, as it both increases the likelihood that projects will be supported and creates more effective public health programs (PSU-DAESE, 2023). It is especially important to engage community members in the context of efforts to increase social support and context for LGBTQ+ adults in Durham County, North Carolina. With a topic like social support and mental illness, it is essential to gain information and experiences from a variety of perspectives and experiences. A community is appropriately engaged when everyone is playing a meaningful role in the discussion, planning, and implementation of projects like this (PSU-DAESE, 2023).

Effective engagement is not only important for the program that the project team is proposing, but also for long term systemic change efforts. Community engagement plays an important role in the scale-up of evidence-based programs like intergenerational programs (SAMHSA, 2021). Through gaining community trust, the project team will be able to cultivate opinions and perspectives for this program and beyond. The program will be more effective when considering the experiences of members of the community, and fostering community trust is a key element in long-term success and sustainability (PSU-DAESE, 2023).

Priority Partner

One essential priority partner is the Durham Arts Council, who is dedicated to creating a vibrant community through the arts (Durham Arts Council, 2023). It has been made clear throughout this project that lack of social support is associated with poor physical mental health, and having social support mitigates these outcomes. Taking this a step further, the arts have emerged as an opportunity to foster social connectedness and reduce loneliness, as evidence has shown that art facilitates social opportunities,

sharing, commonality, and belonging (Perkins, et.al, 2021). LGBTQ+ adults experiencing loneliness can benefit from art-based activities.

Community art programs are also a promising tool for addressing loneliness in older adults, as it can foster social engagement, inclusion, and communication (Perkins, et.al, 2021). Given the benefits of fostering social support through art, it is essential to have a stakeholder like Durham Arts Council that not only understands this connection but also strives to fulfill the notion. The Durham Arts Council is dedicated to expanding arts education and developing Durham County's arts and cultural community, and therefore is relevant to this project. Art and social support go hand in hand, and having a community partner like the Durham Arts Council will prove to be extremely beneficial. See Appendix A for further analysis of relevant community partners.

Engagement Barriers and Facilitators

It is anticipated that the Durham Arts Council will be a valuable and contributory community partner throughout the engagement process and beyond. In the initial stakeholder analysis, the Durham Arts Council was identified as a high interest, low influence stakeholder. One factor that is likely to positively influence their participation is their existing presence in the community as a pillar for art and culture, it is evident that this is a community group that values the spread of art and culture around Durham County, and therefore this program and engagement process benefits them as well. Given that their organization can benefit from this program, it is likely that they will participate meaningfully throughout the engagement process.

Another factor that is likely to positively influence their participation is their preexisting interest in the social well-being of LGBTQ+ adults in Durham County. Art installations like *Spectrum of Hope: What We See at the End of the Rainbow*, a “multi-generational visual conversation” engage the LGBTQ+ community in Durham County and beyond (Durham Arts Council, 2023). An organization that is passionate about the social and community context of LGBTQ+ adults in Durham County is an extremely valuable community partner to have, as this existing interest ensures meaningful participation in the

program. Subsequently, meaningful participation of community partners ensures accountability and long-term success (SAMHSA, 2021).

A factor that may negatively influence their participation is the organization's size and bandwidth. The Durham Arts Council is a small organization that greatly relies on the support of the community, and it may be difficult for them to delegate enough time, resources, and staff to contribute to the engagement process reliably and consistently. Therefore, it is important to use their limited resources efficiently and effectively and guarantee a culture of trust and shared decision-making from the beginning (SAMHSA, 2021).

Engagement Methods

Throughout the community engagement process, it is important to identify and utilize different engagement methods that will be effective for the community stakeholders at hand. Three engagement methods that would work for community partners are focus groups, status reports, and annual meetings. Focus groups will take place in both the design phase— when the project team is deciding exactly what to do and how to do it, and the improve phase— when the project team is gathering data to improve the program. This engagement method will involve meeting with the community partner in a collaborative way in a group setting. This could be used to leverage the Durham Arts Council's preexisting interest and experience in the social well-being of LGBTQ+ adults for acquiring their expertise and experience.

Status reports will also be essential for communicating program progress and outcomes with community partners, and will take place in the design phase, improve phase, and sustain phase— as the project team continues collective efforts. This will take place during all phases of the intervention, as there is an obligation to inform and assess community partners at all phases of the engagement process and intervention. These status reports will be sent quarterly, will be sent to inform a large group of partners and individuals. This method will facilitate engagement from partners that have a limited amount of time and resources. Keeping this organization informed with program progress and leaving the option for feedback will address previously mentioned barriers to engagement.

Once the program is implemented, the project team will conduct annual meetings of the advisory committee in both the improve and sustain phases. This will take place in a group format and would be both informational and collaborative. At the annual meeting, community partners will be informed regarding in-depth program progress and outcomes. Partners will also have an opportunity to provide feedback for the upcoming year, establishing an efficient way to inform program improvements and issues.

Engagement Leadership

Reflecting on the totality of this engagement plan, the LGBTQ Center of Durham and the Durham Arts Council are engagement leaders. The LGBTQ Center of Durham will be responsible for leading engagement in Durham County regarding social support among LGBTQ+ adults. The mission of the LGBTQ Center of Durham is to “support LGBTQ+ people through services, programming, resources, and support networks that center their wellbeing and allows them to thrive” (LGBTQ Center Durham, 2023). The rationale for identifying this partner as engagement leader is the Centers unparalleled commitment to the social well-being of LGBTQ+ adults in Durham County and their preexisting ties with community members, leaders, and other useful connections. Their expertise and network will provide the program with a reliable foundation throughout the engagement process.

The LGBTQ Center of Durham will also be able to utilize collected data more effectively to improve efforts and engage partners to address social support among LGBTQ+ adults. Additionally, they will be able to synthesize and compare project data to existing data that they already have. This fortified data along with their expertise will demonstrate project legitimacy, help build partner trust and confidence in the program, and subsequently improve engagement efforts. Some key considerations for action throughout the engagement process by County Commissioners include the creation of a task force that is dedicated to mitigating loneliness and other mental health issues among LGBTQ+ adults. This will demonstrate a clear interest in the issue and support participation among other community partners.

Disciplinary Critique

Articulating accountability through a Memorandum of Understanding (MOU) is a valuable tool to achieve an understanding between two partners regarding expectations and goals. It would be especially beneficial to conduct an MOU between the priority partner, the Durham Arts Council, and the engagement leader, the LGBTQ Center of Durham. The scope and purpose of their MOU is to effectively mitigate a lack of social support among members of the Durham County LGBTQ+ community through the collaboration of resources. The leadership team in the context of this proposal includes the LGBTQ+ Center of Durham and the project team that is working through the LGBTQ+ Center of Durham, who are responsible and accountable for this project, respectively. Other members of the team include LGBTQ+ business owners and the Durham Arts Council—supportive partners, SAGE and Equality NC—consulted partners, and the County Commission and Durham County residents—informed partners.

The methods and commitment for partners throughout the program are briefly outlined in Appendix B, though different engagement methods will be utilized differently between partners. The Durham Arts Council and LGBTQ Center of Durham will meet regularly and conduct focus groups with the LGBTQ+ community. Status reports and annual meetings will maintain contact between these two essential partners to ensure proper communication throughout the process. At this annual meeting, review and endorsement goals will also be identified for the upcoming year to ensure longevity and success for this program.

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APPENDIX A: RASCI ANALYSIS

RASCI Table		
<p>Program – With the purpose of mitigating a lack of social support and bridging gaps between younger and older generations of the LGBTQ+ community, the project team is proposing an intergenerational community program in Durham County for LGBTQ+ adults ages eighteen and older. This program will operate out of the LGBTQ Center of Durham and will organize events with an art focus— these art workshops will bring diversity and fun to community engagement and will be aimed at fostering relationships between different generations of LGBTQ+ adults in a creative way. These social and educational events will encourage social support and connection in the LGBTQ+ community of Durham County.</p>		
RASCI Levels Who is...	Community Partners	Rationale
<p>Responsible = owns the challenge/ project</p>	<p>LGBTQ Center of Durham, Project Team, Durham Arts Council</p>	<p>Responsible partners will manage the work of the project team and provide the general framework for the program</p>
<p>Accountable = ultimately answerable for the correct and thorough completion of the deliverable or task, and the one who delegates the work to those <i>responsible</i></p>	<p>County Commission</p>	<p>The County Commission will ultimately be held responsible for the engagement, planning, and implementation of this program</p>
<p>Supportive = can provide resources or can play a supporting role in implementation</p>	<p>LGBTQ+ business owners, Durham Arts Council</p>	<p>LGBTQ+ business owners and the Durham Arts Council can provide resources like time, space, event ideas, program information, and support for the project team</p>
<p>Consulted = has information and/or capability necessary to complete the work</p>	<p>SAGE, Equality NC</p>	<p>SAGE and Equality NC are considered to be experts on the subject matter and should therefore be consulted prior to program planning and implementation</p>
<p>Informed = must be notified of results, process, and methods, but need not be consulted</p>	<p>County Commission, Durham County residents</p>	<p>Durham County residents need to be informed regarding decisions and outcomes along the way</p>

APPENDIX B: MEASUREMENT TABLE

Methods, Timing, and Measures Table					
Engagement Method	Related Facilitator(s) / Barrier(s)	Timing	Performance measure		
			Description	Data source	Frequency
Focus group	Dedicating the time and resources to regularly meet and discuss the program	Design, Improve	# of focus groups conducted, % of community partner satisfaction	Meeting records, participant survey data	Quarterly
Status report	Finding an adequate level and amount of information to share regarding the program process	Design, Improve, Sustain	# of reports sent, # of individuals receiving reports	Report record	Quarterly
Annual meeting	Finding an equitable space and accessible time for <i>all</i> community partners to meet	Improve, Sustain	# of individuals participating in the meeting, % of individuals that feel this program is beneficial	Meeting attendance, surveys at the meeting	Annually

APPENDIX D: KAYLA RUBINSTEIN INDIVIDUAL ASSIGNMENTS

Appendix D.1: Social Determinant of Health Analysis

Increasing social and community support to address the social determinants of health is a goal outlined in Healthy People 2030 (Office of Disease Prevention and Health Promotion, n.d.). As a social determinant of health, social support plays a crucial role in influencing health outcomes. Social support refers to the network of relationships, resources, and assistance provided by family, friends, colleagues and communities. It encompasses emotional, instrumental, and informational behaviors (Glanz, n.d.). Strong social support can positively influence health outcomes through behavioral and psychological pathways. Social support can influence healthy behaviors such as exercise and healthy eating. Having someone to talk to and rely on during challenging times can also help individuals cope with stress and anxiety. Conversely, lack of social support increases the risk of mental health issues such as depression as well as chronic conditions such as high blood pressure, heart disease and diabetes (Office of Disease Prevention and Health Promotion, n.d.). Chronic isolation has also been connected to an increased risk of premature death from all causes.

Geographic and Historical Context

Durham, a single-city county in North Carolina, began its growth in the late 19th century as a major center for the tobacco and textile industries. With a population today of approximately 312,000 people, Durham has since diversified its economy and is known as a hub for healthcare, education, and research. The city is known for its diverse population, vibrant cultural scene, and progressive values. With institutions like Duke University and the Research Triangle Park driving innovation and entrepreneurship, Durham offers a unique blend of history, economic opportunities, and a strong sense of community. Durham's diverse community has a history of supporting both faith-based and politically based community initiatives to improve the health of the local community (Hicks, 2021).

The legislative landscape surrounding LGBTQ+ communities in Durham and the larger North Carolina Community has been complex with a history of advancements and setbacks over the past few years. Same-sex marriage was not legal in North Carolina until the federal law was passed in 2014. In

2016, the “bathroom bill” (HB2), required individuals to use restrooms in government buildings that corresponded to sex listed on the birth certificate rather than gender identity and limited local governments on establishing nondiscrimination ordinances (Mezey, 2020). Although this bill was repealed and the new law provided enhanced protections to the LGTBQ+ community, recent legislation has passed SB631 which bans transgender young people from participating in sports congruent with their gender identity. Additionally, there are other recent bills filed that include a drag ban, an anti-LGTBQ+ curriculum and gender affirming care bans. These policies often reinforce societal prejudice and discrimination, creating a hostile environment that isolates and marginalizes LGBTQ+ individuals (Liloia, 2023).

Priority Population

Social support is especially important for populations that experience discrimination or exclusion. Narrowing in on the LGBTQ+ community, which is comprised of individuals of various races, ethnicities, religions, and economic classes, data indicates that this group is discriminated against at much higher rates than heterosexual people. LGBTQ+ is a term that refers to a diverse community of people who identify as lesbian, gay, bisexual, transgender, queer, questioning and other self-identifying terms related to gender and sexuality (Hicks, 2021). According to a national survey conducted by the Williams Institute in 2019, “LGBTQ+ adults aged 18 and older make up approximately four percent of the state's population” (Hicks, 2021). This aligns with the findings of the 2016 Durham County Community Health Survey, which reported that around 4% of residents self-identified as gay, lesbian, or bisexual based on the provided survey options (Hicks, 2021).

Measures of SDOH

LGBTQ+ individuals often experience higher rates of loneliness. They are more likely to report fear of discrimination, have a higher likelihood of being single and living alone, and are less likely to have children compared to their heterosexual counterparts (Family and social support, 2023). Consequently, these factors contribute to elevated rates of physical, psychological, and social health disparities, including social phobia, depression, preventable diseases, substance abuse, and even suicide.

In North Carolina, sexual minorities are diagnosed with depressive disorders at a rate three times higher than that of their heterosexual counterparts (Hicks, 2021). Higher risk for depression and anxiety amongst the LGBTW+ community is thought to be linked to increased sources of bias and minority stressors such as lack of legal protections and anti-LGBTQ+ legislation (Hicks, 2021). Suicide risk, including lifetime suicidal thoughts and self-injury is high among LGBTQ+ adults both in North Carolina and US data. In North Carolina, 82% of transgender and non-binary adults have suicidal thoughts and 40% have attempted suicide (Hicks, 2021). Additionally, rates of non-suicidal rates of self-injury are 41% and 47% amongst bisexual and transgender individuals respectively (Hicks, 2021).

Rationale/Importance

Prioritizing the reduction of social isolation for the LGBTQ+ population in Durham can lead to improved mental health, reduced health disparities, enhanced community resilience, increased social support, and positive economic outcomes. When the LGBTQ+ feel supported they will be more engaged in educational pursuits, employment, and entrepreneurship. According to Cigna's report, workers who experience loneliness missed more than five additional workdays per year and were twice as likely to report quitting their job in the next 12 months (Hartman, 2023). The impact of social isolation on workers engagement and productivity in the workplace can cost employers across the US \$154 billion annually (Hartman, 2023). By addressing the social determinants of health, the county can create a more inclusive and equitable environment that benefits the overall well-being and health of LGBTQ+ individuals and the community.

Disciplinary critique

A public health leader plays a vital role in addressing social isolation as a social determinant of health. Public health leaders are skilled at building partnerships and collaborations across sectors. Addressing social isolation requires a multi-sectoral approach involving healthcare providers, community organizations, policymakers, and other stakeholders. Public health leaders can bring together diverse stakeholders, facilitate collaboration, and mobilize resources to develop comprehensive strategies and interventions. They can also advocate for inclusive policies that promote equality, acceptance, and social

connectedness for LGBTQ+ individuals and other marginalized populations. By influencing policy development, public health leaders can create environments that support social integration, reduce discrimination, and foster community resilience. The County Commissioners should focus their attention on social isolation within the LGBTQ+ population, as it can have a profound impact on the local economy.

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Appendix D.2: Community Partner Analysis

Introduction

Social support is a crucial social determinant of health outlined in Healthy People 2030 (Office of Disease Prevention and Health Promotion, n.d.), influencing health outcomes through behavioral and psychological pathways (Glanz, n.d.). Lack of social support increases the risk of mental health issues and chronic conditions, while chronic isolation is connected to an increased risk of premature death. LGBTQ+ individuals, who face discrimination at higher rates, are a priority population, experiencing elevated rates of loneliness and health disparities. Reducing social isolation among LGBTQ+ individuals in Durham is important for improved mental health, reduced disparities, enhanced community resilience, and positive economic outcomes (Office of Disease Prevention and Health Promotion, n.d.). Public health leaders play a vital role in addressing social isolation through partnerships, collaboration, and advocacy for inclusive policies.

The proposed Intergenerational Community Program for LGBTQ+ Adults, ages 18+, in Durham County aims to bridge gaps between younger and older generations of marginalized communities by fostering social support and connection through various practices such as history, arts, advocacy, sports, and traveling (SAGE, 2022). The program will recruit a diverse set of participants through LGBTQ+ channels and prioritize equitable and accessible spaces to ensure a comfortable and inclusive environment (CHR&R, 2022). While evidence suggests there are benefits to intergenerational programs such as social connectedness, community health, and improved attitudes, the lack of research specific to the LGBTQ+ community presents a challenge (CHR&R, 2022). Overcoming generational differences, unfamiliarity with LGBTQ+ spectrum, and addressing the legacy of the AIDS epidemic are important considerations in implementing this program, but it holds potential to foster resilience and social support in the LGBTQ+ community of Durham County (Masheswari-Aplin, 2022).

Community Partner Mapping and Analysis

To address social isolation in Durham North Carolina, both broadly and within the LGBTQ+ community, a task force will need to be established with a wide range of stakeholders. A power grid

analysis (Appendix A) was used to map stakeholders that were identified to join the taskforce. A power grid is a valuable tool for stakeholder mapping because it helps identify stakeholders' level of influence and interest in a project. By visualizing stakeholders on a grid based on their power and interest, it allows for strategic prioritization of engagement efforts and resource allocation. Individuals of high interest and power should be regularly engaged. For individuals who have low power and high interest, their relationships should be maintained, but not to the degree of stakeholders with high power (Improvement Service, 2020)

The project team will need to ensure the County Commissioners are kept satisfied, as they have high power and low interest. The county commissioners may support the project team's goal, but it likely won't be their top priority, resulting in lower interest. However, the County Commissioners have the authority to allocate financial resources to fund the intergenerational community program and influence policies related to social support.

Stakeholders to manage closely are the Executive Director of LBGTQ Center of Durham and the CEO of SAGE, who both have high power and high interest. The LBGTQ Center of Durham aims to support the LGBTQ+ community through services, programming, resources, and support networks. The Executive Director has the power to determine if their organization will be facilitating the program (LBGTQ Center Durham). SAGE, who provides advocacy and support for LGBTQ+ elders, is a key organization for the project team to actively consult with. Although they are not a direct decision maker in the program, they have the experience and resources to provide guidance in developing the program and receiving community funds (SAGE, 2023).

It is important to keep high interest and low power partners involved such as LGBTQ+ community members, LGBTQ+ business owners, and the Durham Arts Council. Partnering with LGBTQ+ community members are essential for project success, as they will ultimately be the ones who will participate and can benefit from the program. LGBTQ+ business owners and the Durham Arts Council can provide resources to help execute the program (e.g. facilities, food, classes) and will have high interest due to the benefits their organization and/or themselves as individuals.

Low interest and low power partners such as the Director of Durham Parks and Recreation, Durham County Residents and Durham County Republican Party should be monitored, but not excessively. The Director of Durham Parks and Recreation focuses on building parks and park facilities for the general community and can provide resources such as county facilities for the program to leverage. Although they do not benefit directly from the program, and it won't be on the top of their agenda, alignment with their objectives will increase involvement and decrease potential roadblocks for the project team. Durham County Residents can also benefit from the program, however their interest will vary based on the population. It is likely that the Durham County Republican Party will be against the program's mission, with the belief that government should not intervene in social aspects of the community, but their voices will have to be addressed and monitored as they do represent a portion of the population and can have a negative impact on the project.

There are various factors that may influence the equitable representation and participation of the identified partners in the task force. Resources, both monetary and non-monetary are likely a potential barrier for certain stakeholders. For example, some business owners may be more well off and can afford to donate their services to the program, while others will likely need financial reimbursement in order to make ends meet. Additionally, time is a valuable resource which will likely vary by stakeholder. Stakeholders with more time available can dedicate more time to the program while others will be less engaged. Lastly, the political environment in North Carolina has increased discrimination and stigma around the LGBTQ+ population. Stigma among the North Carolina population may hinder participation of certain partners in the task force such as the Republican Party and Durham residents.

Worldview Exploration

The CATWOE analysis and root definitions (Appendix B) highlight key implications for participation in the task force and overall Social Determinants of Health (SDOH) change efforts in Durham County. In the first scenario, the focus is specifically on LGBTQ+ adults, while the second scenario aims to foster social support and connection among the entire Durham community. The worldview described in each scenario highlights different concerns and disparities. In the first scenario,

the emphasis is on addressing higher rates of discrimination and subsequent physical and mental health disparities faced by LGBTQ+ individuals. In the second scenario, the focus is on improving mental health outcomes as one of Durham County's top priorities. The owners identified in each scenario differ. In the first scenario, Durham County Commissioners and the Executive Director of the LGBTQ Center of Durham are the owners, while in the second scenario, it is the local policy and Durham County Commissioners. This suggests that participation in the task force and SDOH change effort may involve collaborating with the relevant owners to secure necessary resources, such as county funds, and navigate any policy considerations that may impact the implementation of intergenerational community programs. Tailoring engagement strategies, addressing specific disparities, aligning with priorities, and collaborating with relevant owners are crucial for effective participation and driving positive outcomes in each context.

Conclusion

Before moving forward with the identified partners, I have a few questions that I would ask each partner. First, do you have the resources to assist with the program? Second, do you anticipate any limitations with the program's goals and our goals for your participation? Third, do you believe your strengths properly support the program or are there other ways you wish we have you participate that would be more beneficial to the program itself? Lastly, do you believe there are key partners that we have not identified that we should engage?

In conclusion, the proposed Intergenerational Community Program for LGBTQ+ Adults in Durham County holds great potential to address social isolation and improve mental health outcomes. In terms of the analysis, a strength lies in the systematic approach used to identify and assess stakeholders based on their power and interest. This provides a clear understanding of the stakeholders' potential influence and level of engagement required. Additionally, the identification of high-power, high-interest stakeholders and the consideration of their expertise and resources contribute to effective collaboration and resource allocation. However, a limitation of the analysis is the need for ongoing monitoring and assessment of stakeholder power and interest levels. Stakeholder dynamics can evolve over time, and their power and interest may change, requiring continuous evaluation and adjustment of engagement

strategies. Additionally, the analysis would benefit from a more comprehensive exploration of potential risks and challenges associated with each stakeholder group to ensure proactive risk management. Overall, the analysis provides a foundation for effective stakeholder engagement and collaboration, highlighting key partners and their roles in achieving the program's goals while acknowledging the need for ongoing monitoring and adaptation.

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APPENDIX A

Power Analysis Grid:

Level of Influence High	County Commissioners	Executive Director of LGBTQ Center Durham CEO of SAGE
Low	Director of Durham Parks and Recreation Durham County Residents Durham County Republican Party	LGBTQ+ community members LGBTQ+ business owners Durham Arts Council
	Low	High
	Level of Interest	

APPENDIX B

CATWOE for LGBTQ+ Adult in Durham County, North Carolina

Customer	LGBTQ+ adults ages 18+ living in Durham, North Carolina
Actor	Program directors & participants at LGBTQ Center Durham
Transformation	To foster social support and connection amongst the LGBTQ+ adult community through various intergenerational practices such as history, arts, advocacy, sports, and traveling
Worldview	LGBTQ+ individuals are discriminated at higher rates than heterosexual individuals, resulting in higher rates of physical and mental health disparities
Owner	Durham County Commissioners, Executive Director of LGBTQ Center Durham
Environment	Financial resources & social stigma and discrimination against the LGBTQ+ community,

Root Definition: To foster social support and connection amongst the LGBTQ+ adult community (P) by creating intergenerational community programs at existing organizations, with county funds (Q), in order to close the gap of physical and mental health disparities between LGBTQ+ and heterosexual individuals (R).

CATWOE for Director of Parks and Recreation

Customer	LGBTQ+ adults ages 18+ living in Durham, North Carolina
Actor	Durham Parks and Recreation event coordinators and staff Ref
Transformation	To foster social support and connection amongst the entire Durham community
Worldview	Mental health is one of Durham Counties top five health priorities
Owner	Local Policy Durham County Commissioners

Environment	Financial resources & social stigma and discrimination against the LGBTQ+ community,
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Root Definition: To foster social support and connection amongst the entire Durham community (P) by creating intergenerational community programs at existing organizations, with county funds (Q), in order to improve mental health outcomes (R)

Appendix D.3: Engagement and Accountability Plan

Purpose

Engaging community partners is essential for creating change in social support for LGBTQ+ adults aged 18+, in Durham North Carolina. The Intergenerational Community program aims to facilitate social and educational events that encourages social support and connection. The identified partners possess firsthand experience of the community's unique challenges, strengths, and dynamics. By involving them, their insights can inform the development of contextually relevant and sensitive strategies that address the community's needs. Involving community partners in the decision-making and change process fosters a sense of ownership and agency within the community, as active participants in shaping the impact on their peers and neighbors. Collaboration among community partners facilitates the pooling of diverse resources, expertise, and perspectives, enabling comprehensive and holistic approaches. It also establishes and strengthens trust among stakeholders, including residents, organizations, and institutions, which is essential for effective collaboration, open communication, and successful intervention implementation. Furthermore, community partner engagement enables advocacy for policy changes and systemic interventions to address underlying inequities. Ultimately, this empowerment of communities drives long-lasting systemic change, leading to improved health outcomes and overall well-being for the community.

Priority Partner

LGBTQ+ business owners hold a significant relevance as community partners in creating change in social support for LGBTQ+ adults aged 18+. As LGBTQ+ individuals themselves, LGBTQ+ business owners have personal experience and firsthand understanding of the social determinants of health (SDOH) affecting the LGBTQ+ community. They are familiar with the unique challenges, barriers, and discrimination faced by LGBTQ+ individuals, including issues related to social support. This lived experience enables them to provide valuable insights and perspectives that can inform strategies in the development and implementation of program. As visible members of the LGBTQ+ community, LGBTQ+ business owners serve as role models and representatives of success and empowerment. Their active

involvement in the program can inspire and motivate LGBTQ+ adults LGBTQ+ business owners can also offer inclusive and safe spaces for the art workshops to take place. By hosting the workshops, and collaborating with the other community partners, individuals can feel comfortable, respected, and supported. Furthermore, LGBTQ+ business owners are likely to support the goals of the program and may be willing to donate both financial and non-financial resources to the program

Engagement Barriers and Facilitators

Three factors that may influence the LGBTQ+ business owners' participation are sense of alignment and inclusion, capacity and resources, and level of collaboration and engagement. A positive factor influencing their participation is the degree of alignment between the proposed program's goals and values and those of the LGBTQ+ business owners. If they perceive the program as aligned with their own mission and vision of creating community engagement to increase social support within the LGBTQ+ community, they are more likely to actively participate and contribute. On the other hand, if they feel that the program does not align with their values or lacks inclusivity, their participation may be negatively impacted.

The capacity and resources available to LGBTQ+ business owners can significantly influence their participation. If they have the necessary resources, such as time, staff, and financial capabilities, they are more likely to engage actively in the program. This includes their ability to allocate resources for hosting or supporting the art workshops, contributing to the program's success. However, if they face limitations in terms of capacity or resources, it may hinder their ability to fully participate or offer extensive support. Understanding that some of the businesses are small, it is likely going to be difficult for them to provide resources and staff to contribute to the engagement process consistently.

The level of collaboration and engagement between LGBTQ+ business owners and other stakeholders, such as the LGBTQ Center of Durham, program organizers, and other community partners, can greatly influence their participation. Positive and open communication, active involvement in decision-making processes, and a sense of being valued as equal partners can foster stronger engagement (Han, 2021). Conversely, if there are challenges or conflicts in collaboration, lack of communication, or a

perceived imbalance in decision-making power, it may negatively impact their level of participation and commitment.

Engagement Methods

The first phase of the engagement process is to inform the community of the challenges the LBGTQ+ community is facing and to invite the community to participate in discussions (Arnold, 2021). The project team will issue monthly newsletters to inform LBGTQ+ business owners on the challenges in the community and as a method to collect feedback and interest for providing resources. The newsletters will be developed by the project team and will be released to business email addresses. There will be a need to collect email addresses, which will involve calling business owners directly to add them to the list serve. As outlined in further detail in Appendix B, the project team will measure success of this approach by the number or percentage of LBGTQ+ business owners who provide feedback via the online form & fill out the interactive surveys.

After informing the community on the initiative, consulting the community is the next step in engagement. Community focus groups will be held with LBGTQ+ business owners. Focus groups are a useful tool for gathering information from specific interest groups in the community. They are an entry point for the public to participate in the planning process (Arnold, 2021). There will be a total of six focus groups that will be spread out across all phases of the program (e.g., design, improve and sustain/scale). The focus groups will be collaborative group sessions, where each session will contain 5 to 10 business owners. To accommodate schedules, there will be a sign-up sheet with different times that account the hours businesses are open and days they are closed to encourage higher participation. The project team understands that the structure of focus groups will be a larger lift but wants to ensure that the partners engagement is an ongoing, interactive process. As outlined in further detail in Appendix B, the project team will measure success of this approach by the number or percentage of LBGTQ+ business owners who actively engage in the community focus groups.

An advisory committee of three LBGTQ+ business owners will be selected to help with collaboration and drive decision making. An advisory committee is a group of people who bring past

experiences and knowledge related to the goal or problem that is being achieved or fixed in a community. Although the Director of the LGBTQ Community center is still the ultimate decision maker, the goal will be to build consensus with the advisory committee and build trust with their involvement. Business owners will nominate who they would like to represent them, as they will be the primary liaisons between the business owners and the project team. The advisory team will meet with the project team biweekly, where there will be monthly meetings with other key stakeholders and the Director of the LGBTQ community center. As outlined in further detail in Appendix B, the project team will measure success of this approach by the attendance of the biweekly meetings.

The project team, who are contractors to LGBTQ Center Durham will lead the engagement plan described above. The engagement method will require preparation of facilitation guides for focus groups, development of monthly newsletters and leading committee meetings. The project team is the only dedicated resource to the project and will have the time and training to prepare. The project team is also responsible for reporting back to the Director of the LGBTQ Center. The project team will provide biweekly updates to the Director on the success of the engagement and any key findings. The project team will use the data collected to influence the way the project is set up, and to ensure it is culturally competent. The project team will also use the data to determine what resources they have available to them to keep costs down. Although there are no direct policies the project team needs to drive their project, the data they collect may provide insights to the stigma and barriers the LGBTQ+ population faces. The project team will provide a letter to the Commissioner every six months to report social and systematic barriers that are impacting the health and well-being of the LGBTQ+ population. The project team will include recommendations in how the commissioner can influence change. For example, if businesses are concerned about security due to the stigma and political environment, they can provide grants for new LGBTQ+ businesses to cover costs of security cameras.

Engagement Leader

Reflecting on the totality of the engagement plan, the project team, contractors to LGBTQ Center Durham will lead the engagement plan. LGBTQ Center Durham will ensure the project team selected are

dedicated resources to the project and supports their mission. The LBGTQ Center Durham mission is to, “Support LBGTQ+ people through services, programming, resources, and support networks that center their wellbeing and allows them to thrive” (LBGTQ Center Durham, 2023). The project team, supported by LBGTQ Center Durham, was selected to lead the project since their mission align closely to the vision of the project, The project, “Envisions a community where LBGTQ+ individuals are supported by the community and have an equal opportunity for health and well-being.” The LBGTQ Center Durham has the resources and experience to train and select the proper project team and will be a reliable foundation for the project team throughout the engagement plan,

The project team will continue to receive oversight and guidance from the LBGTQ Center Durham. Throughout the engagement process, the project team will provide regular updates, summarizing the data collected to the LBTQ Center Durham. The center has numerous other initiatives within the LBGTQ+ community and the data collected can help influence their ongoing programs and future initiatives. Some considerations for action by the County Commissioner is to hire an advisor that is an LBGTQ+ advocate onto their team. By doing this, the County Commissioner will demonstrate that they support the LBGTQ+ Community and they are committed to creating change in future policy and programs.

Disciplinary Critique

Articulating accountability through a Memorandum of Understanding (MOU) between the LBGTQ+ business owners, the 'priority partner' and the project team leader the, 'engagement leader', provides several valuable benefits. The MOU establishes clear expectations and responsibilities for both parties, ensuring they are aligned and working towards the same objectives. It fosters enhanced communication and collaboration between the priority partner and the engagement leader, promoting a stronger working relationship. The MOU establishes a framework for mutual accountability, outlining metrics, targets, and methods for monitoring progress. It promotes transparency by providing stakeholders with a clear understanding of the partnership's nature and shared goals (Association of State and Territorial Health Officials, 2018). The MOU serves as a reference document that can be revisited to

ensure alignment and track progress throughout the engagement. It also helps mitigate risks associated with misunderstandings or unmet expectations, providing a mechanism for addressing conflicts or disputes. Overall, the MOU strengthens the foundation of the partnership, increasing the likelihood of successful outcomes (Association of State and Territorial Health Officials, 2018).

As outlined in Appendix C, the MOU's purpose is to establish a formal collaboration and partnership between the program and LBGTQ+ business owners, recognizing their significant relevance as community partners in creating change in social support for LBGTQ+ adults aged 18+. The goal is to leverage their personal experience and firsthand understanding of the social determinants of health (SDOH) affecting the LBGTQ+ community to enhance the program's impact. The partners envision a community where LBGTQ+ individuals are supported by the community and have an equal opportunity for health and well-being. The MOU is supported by the following values: respectful, equity, honesty, open-mindedness, loyalty, education. As outlined in further detail in Appendix C, the goals outlined in the MOU can be accomplished through regular collaboration meetings, joint program development, and resource sharing. To evaluate the effectiveness and adherence to the goals outlined in the MOU, the program and LBGTQ+ business owners can utilize outcome measurement, surveys/questionnaires, and participant observation

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APPENDIX A

RASCI Analysis:

RASCI Table		
<p><u>Policy/Program</u> – The public health team is proposing an Intergenerational Community program for LGBTQ+ Adults, ages 18+, that facilitates social and educational events that encourage social support and connection. This program will operate through the LGBTQ Center of Durham and events will have an art focus.</p>		
RASCI Levels Who is...	Community Partners	Rationale
<p>Responsible=owns the challenge/ project</p>	<p>Project Team- Contractors to LGBTQ Center Durham</p>	<p>The project team takes on the primary responsibility for implementing and coordinating the program, including event coordination, social support facilitation, educational event planning, art focus integration, funding, and program evaluation. The project team will be contractors to the LGBTQ Center Durham.</p>

<p>Accountable=ultimately answerable for the correct and thorough completion of the deliverable or task, and the one who delegates the work to those <i>responsible</i></p>	<p>Director of LGBTQ Center Durham LBGTQ+ Business owners</p>	<p>The Director of the LGBTQ+ Center Durham will be held accountable for the Intergenerational Community program, ensuring that the objectives are met and overseeing the overall implementation process. As a key leader within the LGBTQ+ community, the director is well-positioned to provide guidance, strategic direction, and ensure alignment with the center's mission and vision. The LBGTQ+ business owners will be led by An advisory committee of three LBGTQ+ business owners. The three selected will be responsible for collaboration and driving decision making</p>
<p>Supportive=can provide resources or can play a supporting role in implementation</p>	<p>1. Durham Arts Council</p>	<p>The Durham Arts Council play a supportive role by providing resources, guidance, or collaborating in the art-focused events.</p>

<p>Consulted=has information and/or capability necessary to complete the work</p>	<p>1. CEO of Sage</p>	<p>Consulting with the CEO of Sage ensures that the program aligns with best practices, addresses relevant issues, and benefits from the knowledge and expertise of a recognized LGBTQ+ organization.</p>
<p>Informed=must be notified of results, process, and methods, but need not be consulted</p>	<p>1. County Commissioner</p>	<p>The County Commissioner should be informed about the initiative to ensure transparency and alignment with local government entities. Additionally, the Director of the LGBTQ+ Center Durham, Durham Arts Council, and LGBTQ+ business owners should also be kept informed to maintain effective communication channels and foster collaboration.</p>

APPENDIX B

Measurement Table Template: Methods, Timing, and Measures Table

Engagement Method	Related Facilitator(s) / Barrier(s)	Timing	Performance measure		
			Description	Data source	Frequency
<i>Example: Community conversations</i>	<i>Lack of a venue and support for engaging on the issue</i>	<i>Design; Improve</i>	<i># of conversations held. % of participants partially, completely satisfied comm. conversations</i>	<i>Record review. Participant survey data</i>	<i>Quarterly</i>
Monthly newsletters to inform LGBTQ Business owners & encourage participation	Business owners can facilitate participation through word of mouth and can dedicate resources if they feel the project aligns with their goals and mission	Design	The number or percentage of LGBTQ+ business owners who provide feedback via the online form & fill out the interactive surveys	Project team will include a feedback portion of the newsletter for business owners to consolidate feedback	Ongoing
Community focus groups-held twice during each phase of the project for community partners to collaborate	Level of collaboration and engagement influences participation	Design through improve	The number or percentage of LGBTQ+ business owners who actively engage in the community focus groups.	Attendance records or sign-up sheets from the community focus group sessions.	After each focus group session

<p>An advisory committee of three LGBTQ+ business owners will be selected to help with collaboration and drive decision making.</p>	<p>Level of collaboration and engagement influences participation</p>	<p>Design through improve</p>	<p>Percent of committee members who attend the biweekly sessions</p>	<p>Attendance records</p>	<p>Biweekly</p>
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