100 Community Conversations

The Crow Wing County community’s self-perceived strengths, challenges, and future

Family Services Collaborative of the Lakes Area and Crow Wing Energized, with technical support from More Resilient Minnesota, a partnership between FamilyWise Services, and the Minnesota Department of Health to grow resilient communities across Minnesota.
Purpose of the Report
The More Resilient Minnesota project seeks to improve the health and resilience of current and future generations in the state. As part of this effort, over 100 interviews were conducted with members of the Crow Wing County community. This report describes the input gathered from these conversations, specifically pertaining to participant perceptions of the community’s (1) needs, challenges, and barriers; (2) strengths and assets; and (3) recommendations for developing a community resilience plan.

Methods
A diverse group of 125 Crow Wing County community members were invited to participate in conversations with volunteers from Crow Wing Energized and ACEs Resiliency Coalition. Trained volunteers then conducted 105 interviews with individuals between October 2021 and March 2022. They used a standardized interview guide of closed- and open-ended questions designed to accomplish the three previously outlined objectives. Structured notes from these sessions were also recorded by volunteers and used in the following analysis. Descriptive statistics were used to analyze quantitative information, with qualitative data assessed by following Walden’s RADaR technique.1

Key Findings
The most common communities that participants identified with included the city of Brainerd (42%), mental/behavioral health or in recovery (41%), and faith-based groups (41%). While females outnumbered all other gender groups by 8 percentage points (37%), almost one-third of interviewees did not have gender information collected. Similarly, 39% of participants were between the ages of 30-60, but one-third of interviewees did not have age information collected.

The needs, challenges, and barriers most often cited by interviewees were obtaining needed healthcare and mental health services (35%), problems related to housing availability and affordability (30%), and issues related to diversity, inclusion, and discrimination (30%). The overlap between areas of strengths and challenges may indicate that while programs and resources addressing these areas are done well, the need in these areas is still greater than what these services have the capacity to sufficiently address. The findings may also reflect divergent perceptions and experiences within Crow Wing County.

The most frequently specified areas of strength for the community were the diverse number of organizations and resources available for those with needs (27%), a sense of togetherness and caring among family, friends, and neighbors (22%), and the accessibility and vibrancy of natural spaces in the area (21%). The accessibility to community-based organizations (54%; e.g., Lutheran Social Services, warming house and emergency supports for homelessness, recovery programs) as well as opportunities for health, healthcare, and wellness (45%; e.g., mental health clinics, recovery supports) were also highlighted by participants as something done well by their community for supporting the health, safety, and healing of community members.

When participants were asked to identify things the community could do right now that would make a difference for them or their families, the most common replies were to increase mental health education, awareness and services (12%), and housing supports (12%).

Recommendation
Develop a community resilience plan by continuing to reach out to interviewees and the broader community. A starting point for the plan should highlight the findings described above with future actions that incorporate the following:

- The Principles of a “Self-Healing Community”
- Crow Wing Energized Guiding Principles
- Adverse Childhood Experiences (ACES) and Resiliency Training
Crow Wing Energized (CWE) has focused on the mental health and well-being of the community members that in Crow Wing County. CWE has a Mental Fitness Goal Group that has focused on stigma reduction of mental illness. The ACEs Resiliency Coalition (ARC) has focused on ACEs education and building resiliency. ARC has collaborated with FamilyWise Services to train community members in ACE Interface presentations. ACE presentations include neurobiology and epigenetics; the adverse childhood experiences study; and resilience and core protective systems. Prior to the COVID epidemic, CWE offered regular ACE interface presentations in our community. The most recent phase for our More Resilient Minnesota project is 100 Conversations; our goal is to work together to create conditions for all families to flourish. The next phase will include developing a community resilience plan as well as piloting community resilience initiatives.

100 Conversations is a community-driven framework that listens to the voices of those who are not typically at the decision-making table. The format of 100 Conversations is simple – volunteer interviewers hold one-on-one conversations with community members. Questions center around community values, priorities, strengths, challenges, and next steps for the future.

The interviews started in October 2021, with the 105th interview held in March 2022. Interviewees and other community members are encouraged to be a part of the Crow Wing Energized Team and the projects that emerge from the 100 Conversations findings.

This report provides a window into the responses of average citizens with exceptional ideas. It is intended to be an example of the power of asking, engaging, and building a connection. Community capacity can be strengthened by intentionally connecting people, and building a network that is deep and wide so that when adversity strikes, we are linked, invested, talk, and heal.

The Crow Wing Energized Team would like to thank all who participated in the 100 Conversations project as an interviewer, interviewee, or other helper role. The Team hopes that this report influences what issues are prioritized, what strengths are celebrated, and who gets to help make decisions that build the future.

Evaluation designed and data collected by FamilyWise Services and Crow Wing Energized.
Sponsored by ACEs Resiliency Coalition and Crow Wing Energized.
Data analyzed and report prepared by Michelle Sikkink, MPH, Sophie Hillmeyer, Anthony Olson, PhD at Essentia Health

Key Findings

Housing availability and affordability were noted to be a barrier among many interviewees. Many interviewees noted that land and nature is valued in the Crow Wing County area.

Access to healthcare, specifically mental healthcare, was noted to be a barrier among many interviewees, along with difficulties obtaining health insurance and cost of care. Interviewees also noted that there are supportive resources within the community and that friends, family, and neighbors are important.

For questions or to learn more, please contact Karen Johnson at Karen.Johnson@EssentiaHealth.org
Who was interviewed?

105 people

Gender

- Male (29%)
- Female (37%)
- Nonbinary (1%)
- Genderfluid (1%)
- Not collected (32%)

Age

- Under 30 (17%)
- 30-44 (20%)
- 45-60 (19%)
- 61+ (10%)
- Not collected (33%)

*Note: Some interviewees were not asked their age or gender so are accounted for in the ‘not collected’ categories above.

In terms of geographic representation, the cities or lands that interviewees identified as their communities are included above. The city of Brainerd was the most frequently mentioned area with some individuals differentiating between northeast Brainerd (n=3) and southeast Brainerd (n=6). Baxter was the next most frequently mentioned city (n=15), followed by Crosby (n=11). There were 5 individuals who identified with the Mille Lacs Band. Each of the following cities or towns were mentioned twice: Pequot Lakes, Onamia, Deerwood Township, and Crosslake. The cities or towns with the least mentioned frequencies were Aitkin, Breezy Point, Ironton, Leech Lake, Pine River, Hackensack, and Red Lake Nation, which were each mentioned only one time. It is also important to note that 35 individuals identified with the Cuyuna Lakes Area.

*Note: Interviewees were able to identify with more than one community, therefore some individuals are counted in more than one category. Also, some participants did not list a city or geographic area as a community they identified with.
Interviewees were able to identify with more than one community, therefore some individuals are counted in more than one category.

The categories above are comprised of the following individual statements identified by interviewees:

- **Mental or behavioral health or in recovery**: those with mental health illnesses, behavioral challenges, or substance use disorder. Within this community, 20 individuals identified as being part of the recovery community. Many recovery resources and organizations were identified including Alcoholics and Narcotics Anonymous and the Sober Squad.

- **Faith community**: those who belong to a church in the community or are involved in church-related groups. Interviewees claimed relations to several churches and faith-based organizations in the community.

- **Community member**: individuals who feel a sense of belonging to the place they live and use services/resources the area has to offer. These individuals may also have friends/family throughout the location.

- **Parent or guardian**: individuals who are primary caregivers of a child, including adoptive parents and parents who are caring for a child with disabilities or special needs. Some parents interviewed also identify with organizations dedicated to serving, advocating, or caring for children.

- **Community advocate/supporter**: those who are part of a group or organization that provides support and resources for the community including topics such as art and hobbies, as well as organizations that provide resources for women and families. Individuals who identified as civic volunteers or members of a community organization who donate their time to collaborate toward a common goal, are also included in this category (n=16).

- **Disability**: those who identify as having a disability ranging from chronic diseases and conditions to mental health illnesses.

- **BIPOC (Black, Indigenous, People of Color)**: those who identify as BIPOC and are often a minority in the Brainerd area community. Interviewees referenced being part of the Native American community as well as the Asian community.

- **LGBTQIA2S+**: individuals who identify as lesbian, gay, bisexual, transgender, questioning, intersex, asexual, two-spirit, or another sexual/gender minority.

- **Student**: those enrolled in an educational institution (interviewees were typically enrolled in higher education)

- **Healthcare community**: includes those who identify with a healthcare organization – whether that be as a provider or patient.

- **Youth serving organization**: those involved in an organization geared toward serving children or youth. The Shop in Brainerd came up on multiple references as a safe space for youth to connect, enjoy meals and work with mentors.

- **Place of employment**: those who identified themselves by where they work.
What are the most important needs, barriers, or challenges facing your community?

Healthcare, mental health services, and health insurance were the most noted challenges among the interviewees. Interviewees described personal challenges in finding a provider that suited their needs as well as services for youth. Although not specifically identified from responses to this question, data collected from other areas of the survey suggest that interviewees experienced difficulties and confusion in obtaining health insurance.

Housing is a challenge for several interviewees. The lack of housing available (n=11), as well as the lack of affordable housing (n=15) options, were cited. Additionally, the topic of homelessness (n=11) was discussed as well as the need for more resources for those without stable and permanent housing.

Diversity, inclusion, and discrimination present challenges of racism, specifically in the Latinx, Asian, and Native American communities, and lack of services for minoritized groups, including the LGBTQ community.

Substance use and addiction include those identifying as having a substance use disorder. This presents itself as a challenge among interviewees for both those struggling with the disease, their loved ones, and resources in the community.

Poverty and income disparities could be struggles with finding a job that pays a liveable wage, or issues being able to afford basic needs and necessities.

Transportation presented a challenge for several interviewees. This was mainly regarding the limited availability of public transportation and how that is an additional barrier for the community.

Lack of understanding to someone who feels like their fellow community members fail to see things from their perspective. Some interviewees with disabilities noted experiences where they struggled to communicate with others that do not have a disability.

Isolation and disconnection presented as a challenge for interviewees who have struggled to cope with the COVID-19 pandemic and the switch from in-person to virtual platforms. Individuals who identified this as a challenge also noted transportation barriers and difficulties getting to the grocery store or other activities.

COVID-19 pandemic also presented as a challenge for interviewees with some individuals mentioning struggles related to the shift to distance learning (n=1) and decreased support group meetings (n=2) due to social distancing.
Values and Strengths

What do you find valuable in your community?

When interviewees were asked about what is most valued in the community, the most common theme that emerged was **community support services and resources**. Additionally, **family, friends, and looking out/caring for others** as well as **land and nature** were mentioned as being valuable to community members.

Interviewees identified community support services and resources as having a variety of resources available for those in need. There was also a common theme of support among interviewees (n=13) which was defined as having support from various community organizations and resource hubs.

Family, friends, and looking out/caring for others was also identified to be valued in the community. Interviewees stated that there is a sense of togetherness and that there is a sense of safety in asking for help when it is needed.

Land and nature also emerged as a valued asset in the community. Interviewees noted the benefits of having accessible, clean, and safe parks and trail systems that are free-of-charge.

**Communal gathering spaces and events** were noted as being valued in the community. Within this category, interviewees mentioned the public library (n=4) and The Shop (n=4) as valuable spaces.

**Respect, human decency, compassion, and grace** was mentioned by 18 interviewees with examples such as community members showing that they care and an understanding that if you help others now, they will help you in the future.

**Culture(s) of community**, also mentioned 18 times, related to an overall feeling in the community based on commonly shared ways of life, including arts, beliefs, institutions, and more.

**Inclusivity, equity, diversity, and a sense of belonging** was also noted to be valued in the community, with interviewees mentioning the Asian community as well as having books about Native American culture available at the library.

**Health and wellness** was mentioned multiple times with interviewees stating specific services being valued such as mental healthcare services (n=3), Crow Wing Energized (n=1), and treatment resources available (n=1), among others.

Other assets in the community valued by interviewees include **schools and community education opportunities** as well as **businesses like restaurants and stores** and the conduciveness for being able to open new businesses.
Community Connections and Support

What are some things your community does well to support the health, safety, and healing of people in your community?

When interviewees were asked what the community does to support the health, safety, and healing of its members, the top two themes that emerged were the **Impact of access to CBOs** (community-based organizations) and the **health, healthcare, and wellness** opportunities.

The impact of access to CBOs was the most frequent response to what the community does well. Interviewees described these organizations as interesting, beneficial, and engaging for the community. More specifically, individuals mentioned Lutheran Social Services, emergency supports for homelessness and the warming house project, organizations dedicated to those in recovery, and organizations to support survivors of sexual assault and domestic abuse. The resources available within these organizations was also a highly mentioned topic (n=25).

As for the health, healthcare, and wellness options within the Crow Wing County area, interviewees discussed the availability of programs, groups, and activities that promote health, healthcare, and wellness among community members. Within this category, individuals expressed their appreciation for different healthcare resources such as healthcare organizations, mental health clinics, recovery supports and sober housing, and sexual healthcare options.

The **community programs and activities** conducted by community-based organizations, government agencies, and churches were also identified to be valued by interviewees.

**Housing** was mentioned here as well, with interviewees stating that there are housing opportunities, such as access to affordable housing options, rent/utility assistance programs, and resources to help with homelessness or shelter for those in immediate need of temporary housing.

**Support for youth** outlined opportunities for support and recreation for youth and school-aged children. Interviewees mentioned positive support from Teen Challenge, the Lighthouse Project, and The Shop.

Interviewees also mentioned the positive impact of having **opportunities to engage, collaborate, and connect** to get to know other community members as well as the benefit of having efforts and activities in the community that promote **unity and inclusivity**, even if they are not always successful.

**Recreation opportunities** were also mentioned here as being beneficial for the community, including access to parks and trails. Interviewees mentioned that they do feel as though community members **support one another**, which is an asset to the community.
What’s something you know that you wish people in your community knew and paid attention to?

In the question above, interviewees were encouraged to expand on their responses. Some of their statements are included below:

- “People with mental health issues are not dangerous. We are just like everyone else.”
- “That there is a welcoming church community. That the trans community are just like others, not a threat. Wider community needs to come forward to be allies.”
- “That people are more than their labels.”
- “More awareness of how the recovery community helps the community at large.”
- “Value of nature as a healing place. The stigma around mental health needs to be addressed.”
- “More understanding of seemingly invisible disabilities.”
- “Financial barriers to mental health help and the amount of diversity other than racial diversity.”
- “Housing gap in resources and what is available for low-income people who don’t meet income requirements.”
As defined by the Centers for Disease Control and Prevention, Adverse Childhood Experiences (ACEs) are potentially traumatic events that occur before adulthood and can have long-lasting effects on an individual’s health, safety, and well-being as well as negatively affect life opportunities in education, careers, and other areas.\(^2\)

Individuals with ACEs may be at increased life-long risk of injuries, sexually transmitted infections, maternal and child health problems, and chronic diseases (e.g., heart disease, cancer, diabetes, and suicide).\(^2\) Specific childhood events in one’s life that may classify as ACEs include witnessing or experiencing violence and abuse at home or in the community. Other examples of ACEs include experiencing neglect or having a family member attempt or die from suicide.

The environments in which children or adolescents live or spend most of their time may also contribute to ACEs (e.g., substance use, mental and behavioral health difficulties, separated parents, or other forms of instability in the home.)
In your community, how often do you...?

<table>
<thead>
<tr>
<th>Activity</th>
<th>Never or rarely</th>
<th>Sometimes</th>
<th>Often or very often</th>
</tr>
</thead>
<tbody>
<tr>
<td>Help a neighbor/community member in need</td>
<td>10</td>
<td>28</td>
<td>61</td>
</tr>
<tr>
<td>Receive help from a neighbor/community member</td>
<td>43</td>
<td>27</td>
<td>33</td>
</tr>
<tr>
<td>Volunteer at community events</td>
<td>46</td>
<td>29</td>
<td>31</td>
</tr>
<tr>
<td>Participate in community events</td>
<td>39</td>
<td>28</td>
<td>37</td>
</tr>
<tr>
<td>Greet children in your neighborhood by name</td>
<td>30</td>
<td>10</td>
<td>63</td>
</tr>
<tr>
<td>Volunteer elsewhere in the community, such as at a school, food shelf,</td>
<td>51</td>
<td>19</td>
<td>29</td>
</tr>
<tr>
<td>community center, etc.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Number of Responses

Community member experiences and perceptions about opportunities to work towards positive community change

<table>
<thead>
<tr>
<th>Perception</th>
<th>Never or rarely</th>
<th>Sometimes</th>
<th>Agree or strongly agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>There are opportunities to share ideas with community policymakers</td>
<td>46</td>
<td>24</td>
<td>30</td>
</tr>
<tr>
<td>There are opportunities to discuss community strengths and challenges</td>
<td>31</td>
<td>30</td>
<td>39</td>
</tr>
<tr>
<td>I feel a sense of belonging in my community</td>
<td>18</td>
<td>31</td>
<td>53</td>
</tr>
<tr>
<td>There are people I can turn to for help in my community</td>
<td>9</td>
<td>16</td>
<td>76</td>
</tr>
<tr>
<td>There are adequate support services in our community for individuals and</td>
<td>30</td>
<td>29</td>
<td>39</td>
</tr>
<tr>
<td>families</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Number of Responses

*Note: Responses from interviewees that were not whole numbers were removed from the chart above (example: a response of ‘2.5’ or ‘2 & 4’)*
In addition to the responses noted above, interviewees provided more information about other ways they would like to be actively involved in their community. Some of their responses included speaking at community events, volunteering in different capacities and at various events in the community, helping to arrange community event days, providing technical support to those who need it, and helping community members with leadership and development opportunities.

It is also important to note that numerous individuals currently partake in various community support opportunities, such as volunteering at local soup kitchens and food pantries and sharing their recovery stories with others (n=4).

*Note: Interviewees were able to select more than one response in the question above so may be represented more than once in the chart.*
Interviewees were asked to provide additional information on the things they think would help address the needs, barriers, and challenges brought forth through this project. Some community members discussed the need for better housing, more educational activities and programming, more public transportation, and better mental health and recovery and sobriety resources. Other community members expressed their desire for more opportunities for community involvement and engagement to get to know their community better. Further, interviewees discussed their ideas of community members being more open to other people’s views and having opportunities within the community to address systemic racism and bias.

- “Encourage people to step back and breathe, [to] be more open the world view of others.”
- “More food shelves and help for the homeless.”
- “[There should be] policy change to train people on diversity, equity and inclusion, health and recovery.”
- “Bring more awareness to the recovery field and have more peer recovery specialists in our area.”
- “More income-based housing.”
- “Need more funding and resources. Community organizations need to pull together to address these needs [because] agencies are not working together.”
- “Accept differences”
- “Service organizations work together as a team. [Have] one application form/release of information that can be shared between agencies.”

**Addressing Needs**

Do you have any ideas about how to address needs, barriers, or challenges that are facing your community?

<table>
<thead>
<tr>
<th>Idea</th>
<th>Number of Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Housing supports</td>
<td>21</td>
</tr>
<tr>
<td>Educational activities and programming</td>
<td>19</td>
</tr>
<tr>
<td>Opportunities for community members to get to know one another</td>
<td>14</td>
</tr>
<tr>
<td>Additional public transportation</td>
<td>13</td>
</tr>
<tr>
<td>Supports for youth and families</td>
<td>12</td>
</tr>
<tr>
<td>Accessing mental health services</td>
<td>12</td>
</tr>
<tr>
<td>Recovery and sobriety resources</td>
<td>11</td>
</tr>
<tr>
<td>Lack of awareness of existing resources</td>
<td>11</td>
</tr>
<tr>
<td>Openness to others’ views</td>
<td>10</td>
</tr>
<tr>
<td>Opportunities to address systemic racism and bias</td>
<td>10</td>
</tr>
</tbody>
</table>
What's one thing the community do right now that would make a difference for you or your family?

Responses for the question above align closely with the challenges experienced by interviewees. Increased or improved mental health education, awareness, and services continue to be mentioned as something that would help alleviate the problem. Housing was also discussed as being an immediate source of assistance that would help community members in need. Additionally, the concepts of withholding judgment, eliminating racism and discrimination, improving communication and collaboration, and increasing awareness education, and acceptance of diversity came through as topics that would make a difference for community members and their families right now. There were responses in which community members were not able to identify anything that would help them immediately, however, based on responses from other interviewees and the emerging themes brought forth from this project, there are still recommendations for next steps that will likely help many community members in need.

Are there things you have heard about that could improve and make a difference for you or your family?
The overarching themes that presented as challenges to the community members interviewed for this project were healthcare, mental healthcare, and health insurance as well as housing struggles, including housing availability and lack of affordable housing. Additionally, there was discussion surrounding racism and discrimination, and lack of inclusion. Community members also discussed challenges surrounding substance use, poverty and income disparities, and transportation issues.

With this information, the Crow Wing County Energized Team in collaboration with FamilyWise Services will be working toward facilitating change through further community conversations. We will be reaching out to interviewees and the broader community to develop a community resilience plan based on the information that was shared through 100 Community Conversations. We will be sharing the wisdom we learned from this project with decision-makers, employers, faith communities, and other community organizations.

When developing a community resilience plan, we will incorporate the following:

**The Principles of a “Self-Healing Community”**
- Building Self-Healing Communities is about investing in the people who have the most at stake – especially people affected by trauma – so they can be expert leaders in their own community’s change.
- People do best when they are nested in flourishing families and communities.
- Understanding the needs of others leads to better solutions.
- Coming together to share leadership, take collective action, and build relationships is critical.
- Community capacity can be strengthened by intentionally connecting people, and building a network that is deep and wide so that when adversity strikes, we are linked, invested, and can talk.
- We are all working together - those most affected by adversity, those committed to improving lives, and those ready to offer resources.
- This work requires hope, optimism, and efficacy.
- We are the ones who are creating a better future for our children. We’re in this together.

**Crow Wing Energized Guiding Principles**
- Collaborate towards solutions with multiple stakeholders (e.g. schools, worksites, medical centers, public health) to improve community health.
- Build trust through collaboration with community members experiencing health disparities.
- Prioritize sustainable evidence-based efforts around the greatest community good.
- Create clear, specific, realistic, and action-oriented goals to improve priority health indicators.
- Prioritize strategies that advance health equity, address structural barriers, or reduce/eliminate disparities.

**Adverse Childhood Experiences (ACEs) and Resiliency Training**
The ACEs and Resiliency Coalition can connect you with a trainer who can share the impact of Adverse Childhood Experiences (ACEs) and the hope of resiliency. For more information on the groundbreaking research on these two topics, go to: [https://www.cdc.gov/violenceprevention/aces/index.html](https://www.cdc.gov/violenceprevention/aces/index.html)

Interview Questions:

1. I am going to be asking you questions about "your community." Which community or communities do you most identify with? *(i.e., town, neighborhood)*
   - What other groups do you belong to or identify with in the community?
2. What are the most important needs, challenges, or barriers facing your community?
3. Do you have any ideas about how to address these needs, barriers, or challenges?
4. What are some things your community does well to support the health, safety, and healing of people in your community?
5. What do you find valuable in your community?
6. What’s something you know that you wish people in your community knew and paid attention to?
7. What’s one thing the community could do right now that would make a difference for you or your family?
8. Are there other things you have heard about that could improve and make a difference for you or your family?
9. On a scale from 1 being never to 5 being very often, In your community, how often do you...
   - Help a neighbor/community member in need
   - Receive help from a neighbor/community member
   - Volunteer at community events
   - Participate in community events
   - Greet people in your neighborhood by name
   - Volunteer in the community, such as at a school, food shelf, community center, etc.
10. On a scale from 1, being strongly disagree, to 5, being strongly agree, Community members may have different experiences and perceptions about opportunities to work towards positive community change. To what extent do you agree, or disagree, with each of the following statements?
   - There are opportunities to share ideas with community policy-makers
   - There are opportunities to discuss community strengths and challenges with other community members
   - I feel a sense of belonging in my community
   - There are people I can turn to for help in my community
   - There are adequate support services in our community for individuals and families
   - Expand on any responses from question 10, if necessary
11. In which ways would you like to help take an active role in our community? (Select all that apply.)
   - Help gather information from community members (i.e., conducting community member interviews)
   - Go door-to-door to invite community members to take part in a conversation
   - Help implement strategies recommended by community members
   - Contribute music or art for a community event
   - Provide carpentry or maintenance skills for community members in need
   - Give rides to community members so they can attend community meetings and events
   - Become a mentor or coach for someone
   - Help to get or give food to people in need
   - Other:
12. Were you familiar with Adverse Childhood Experiences before this conversation?
13. Would you like to be added to our initiative's email list/distribution?
   - If yes, what is the best way to contact you? ___________________________
14. Are there other people who you think we should interview?
15. Would you be interested in receiving a summary of key findings from our interviews?
16. What else would you like to share?