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NJSHAD Helps NJ's Statewide Parent Advocacy Network (SPAN) Serve Families of Children with Disabilities

What was the problem/situation?

Advocating for New Jersey's 378,000 children with disabilities and their families is a huge undertaking. Diana Autin, Executive Co-Director of the [Statewide Parent Advocacy Network \(SPAN\), Inc.](#), is always looking for additional tools, data, partnerships, and funding to help SPAN enhance services for New Jersey families with children who have special needs. SPAN tackles many issues related to improving the lives of these New Jersey families by improving health care and educational services, linking families with needed services, advocating for improved public policies, evaluating where unmet needs exist, and obtaining funding to serve the needs of eligible families.



What action was taken to resolve the problem?

Ms. Autin regularly uses the [New Jersey State Health Assessment Data](#) (NJSHAD) system in two distinct ways when she is preparing grant applications to increase SPAN's outreach and services:

- To analyze and quantify the difficulties families with children with disabilities are facing, and
- To identify which populations and locations have the greatest need for assistance.



As stated by Ms. Autin, "NJSHAD is a nice, one-stop site for the data and analyses I need when writing grants. I use it to obtain information like the percent of New Jersey [kids living in poverty](#); [infant and fetal death rates](#); and data on maternal health, smoking, nutrition, and obesity by community and demographic group. For example, I used NJSHAD data and information to apply for our current [Improving Pregnancy Outcomes](#) grant. We received \$300,000 per year for three years for Essex County, where we are now funding four full-time community health workers doing health promotion focused on women ages 18 to 35."

Ms. Autin also used NJSHAD for an earlier grant, titled *Innovative Evidence-based Programs for Latino Immigrant Families served by Federally Qualified Health Centers (FQHCs) in Three High-Immigrant High-Poverty Communities* for which they received \$86,500 each year for three years to fund part-time family resource specialists at three FQHCs located in Hudson, Union, and Passaic Counties. “Our staff assisted parents in Spanish through a variety of activities, including workshops on the rights of children with special needs, training on how to work with school systems, advocacy for optimal health practices for children and parents, and we started parent-to-parent support groups. We reached over 750 Spanish-speaking families with over 1,250 children. 100% of parents who attended project workshops indicated that SPAN had helped them increase their skills to collaborate with professionals, their understanding of systems and services, their ability to effectively navigate systems and advocate for their children, their ability to apply or access programs and services, their understanding of their rights and roles as parents, and the integration of their children with special needs in the larger community,” said Ms. Autin.



Based on data from SPAN’s Family Outcomes Survey, over 90% of participating parents showed an increase from baseline to post-initiative implementation in ten or more of the fifteen family outcomes including parent self-confidence, self-competence, knowledge of resources, and navigation capacity. In addition, SPAN was able to improve care coordination, routine developmental screening, and “medical home-ness” at all three participating FQHCs in statistically significant ways. According to Ms. Autin, “Because of the state and local data we were able to access via NJSHAD, we were able to hone in on the communities that most needed our help, justify the funding for the project with the Maternal and Child Health Bureau, and help the targeted FQHCs understand why we were focusing on families in their community.”

As New Jersey Environmental Public Health Tracking partner, Barbara Goun, stated “It is so gratifying to know that CDC-funding is helping New Jersey children and teens with special needs and their families get the assistance they require and deserve. NJSHAD users are the best source of feedback on what is actually helpful, and what still needs to be added.”

NJSHAD serves as the main data portal for NJDOH and provides public access to data and information from the entire New Jersey Department of Health. NJSHAD provides static public health indicators which combine data and information, and dynamic custom public health query tools. The functionality, content, and utility of NJSHAD are constantly being enhanced.