

Minnesota Thrives Survey Form

Thank you for creating a thriving Minnesota!

Thank you for your work and your willingness to share information on MN Thrives. MN Thrives is a collectively sourced and interactive database of current Minnesota based efforts that promote mental well-being and inclusive, thriving communities. MN Thrives is intended to help Minnesota communities:

- Have a comprehensive picture of current mental well-being strategies, locally and statewide, to inform and guide planning efforts,
- Actively connect and learn from each other, and
- Grow and spread mental well-being strategies across communities and sectors.

Mental Well-being

The emphasis of this database is on upstream promotion and prevention strategies for mental well-being and resilience. MN Thrives aligns with the World Health Organization definition of mental health as "A state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community." Creating mental well-being and thriving communities is complex, involving many factors. Many key activity categories are broadly outlined in this [Framework for Mental Health Promotion \(https://www.health.state.mn.us/docs/communities/mentalhealth/commframework.pdf\)](https://www.health.state.mn.us/docs/communities/mentalhealth/commframework.pdf). While this definition is broad and inclusive of the many contributing strategies to promote mental health and well-being in a community, MN Thrives is not designed or intended to capture direct individual clinical services.

What is an initiative? What should be included?

An initiative is any project, program, practice, policy effort, training series, communications campaign, community coalition, community process or other activity that contributes to mental well-being and thriving communities in Minnesota.

Number of Entries: You can decide the number of entries to capture your work. If there are a set of activities that fall under one umbrella, you may choose to include them all in one entry. If there is, among them, an initiative that stands out and would build more awareness if described in a separate entry, please add more than one entry. For example, you may have a community coalition that builds community capacity through planning, community conversations, and fundraising. The coalition may have launched a community-wide campaign about promoting access to nature, which could warrant a separate entry.

Current or Previous Efforts Only: Please only include currently active or occurred in the past, and the locations in which they took place. This database is not intended as a tool to market services that are available anywhere in the state.

For more information: Mental Health Promotion (state.mn.us) Anna.lynn@state.mn.us.

MN Thrives Survey Worksheet

Apply online:

[MN Thrives Entry Form \(https://redcap.health.state.mn.us/redcap/surveys/?s=C4ADKRT8LH\)](https://redcap.health.state.mn.us/redcap/surveys/?s=C4ADKRT8LH)

Contact Information

1. First Name:
2. Last Name:
3. Phone Number:
4. Email:
5. Name of organization or group you represent:
6. Select the type of organization or group you represent (business, civic, government, etc.):

<input type="checkbox"/> Business	<input type="checkbox"/> otherwise specified	<input type="checkbox"/> Police, Public Safety
<input type="checkbox"/> Civic organization	<input type="checkbox"/> Government-State, Not otherwise specified	<input type="checkbox"/> Public Health
<input type="checkbox"/> Community Coalition- not otherwise specified	<input type="checkbox"/> Government-Tribal	<input type="checkbox"/> School/ Education System
<input type="checkbox"/> Corrections/Jail	<input type="checkbox"/> Health Care Provider	<input type="checkbox"/> Substance Abuse Coalition
<input type="checkbox"/> Early Childhood Program	<input type="checkbox"/> Health Plan	<input type="checkbox"/> Senior Services/ Program
<input type="checkbox"/> Family Service or Mental	<input type="checkbox"/> Holistic Healer	<input type="checkbox"/> Transportation
<input type="checkbox"/> Health Collaborative	<input type="checkbox"/> Hospital	<input type="checkbox"/> University Extension Program
<input type="checkbox"/> Government- City, Not otherwise specified	<input type="checkbox"/> Library	<input type="checkbox"/> Youth Development
<input type="checkbox"/> Government- County, Not otherwise specified	<input type="checkbox"/> Mental Health Provider	<input type="checkbox"/> Other (<i>Please describe</i>)
<input type="checkbox"/> Non-profit		
7. Have you entered information about this initiative in MN Thrives previously?

Yes No

Description of Initiative

An initiative is any project, program, practice, policy effort, training series, communications campaign, community coalition, community process or other activity that contributes to mental well-being and thriving communities in Minnesota.

8. Title of the initiative:
9. Website (Can be any website including Facebook):
10. Upload attachments (Describe the initiative if a website is not available. This will not be posted online but will be available if requested).
11. Brief description of the initiative (1000 characters maximum):
12. Which domain or activity category does this initiative primarily fit? (Select up to three)

MINNESOTA THRIVES SURVEY FORM

- Supporting relationships, social connectedness and belonging
- Supporting skill development (social, emotional, life skills)
- Promoting community, culture, and faith
- Promoting healthy lifestyle (exercise, nutrition, tobacco cessation)
- Promoting healthy environment and access to nature (built and natural environment)
- Promoting equitable social and health policies
- Addressing trauma, adversity, and healing
- Addressing basic needs (housing, food, child-care, etc.)
- Building Community Capacity (e.g., education, building community consensus, funding, etc.)
- Other (Please describe)

13. Does the initiative focus on any of the following issues? (Select all that apply)

- | | |
|-----------------------------------------------------------------------------|-----------------------------------------------------------------------------|
| <input type="checkbox"/> Academic performance | relationships, caregiver-child attachment |
| <input type="checkbox"/> Anti-bullying | <input type="checkbox"/> Peer leadership/ mentoring |
| <input type="checkbox"/> Awareness/ anti-stigma | <input type="checkbox"/> Policy |
| <input type="checkbox"/> Childcare | <input type="checkbox"/> Positive relationships |
| <input type="checkbox"/> Civic participation | <input type="checkbox"/> Poverty/ economic disadvantage |
| <input type="checkbox"/> Community laws & norms | <input type="checkbox"/> Prosocial behavior/ prosocial involvement |
| <input type="checkbox"/> Culture/ language | <input type="checkbox"/> School commitment/ school involvement |
| <input type="checkbox"/> Delinquency/ truancy/ discipline | <input type="checkbox"/> Self-care/ coping skills/ stress management |
| <input type="checkbox"/> Employment/ living wage | <input type="checkbox"/> Sleep |
| <input type="checkbox"/> Exercise/ physical activity | <input type="checkbox"/> Social connectedness/belonging /isolation/cohesion |
| <input type="checkbox"/> Family and household management | <input type="checkbox"/> Social emotional learning |
| <input type="checkbox"/> Food support/ nutrition | <input type="checkbox"/> Social justice/ equity/ anti-racism |
| <input type="checkbox"/> Housing/ living situation | <input type="checkbox"/> Substance misuse and abuse |
| <input type="checkbox"/> Incarceration | <input type="checkbox"/> Teen pregnancy |
| <input type="checkbox"/> Life skills | <input type="checkbox"/> Trauma and resilience |
| <input type="checkbox"/> Mindfulness/ gratitude | <input type="checkbox"/> Violence Prevention |
| <input type="checkbox"/> Nature | <input type="checkbox"/> Other (Please describe) |
| <input type="checkbox"/> Neighborhood attachment/ community disorganization | |
| <input type="checkbox"/> Parenting (supports, involvement, | |

14. MN County where the initiative is currently active or available (statewide, counties)? (Select all that apply) (Note: Identify only locations where the initiative HAS occurred or is in development, do not list locations where it could potentially occur.)

- Statewide
- List counties (This will be a drop down in the application.)

15. Is there a particular setting in the community where this initiative is happening? (Select all that apply)

- | | |
|----------------------------------------------------------|--------------------------------------------|
| <input type="checkbox"/> Community wide (no one setting) | <input type="checkbox"/> Housing Facility |
| <input type="checkbox"/> Community centers | <input type="checkbox"/> Faith Communities |
| <input type="checkbox"/> Libraries | <input type="checkbox"/> Workplace |
| <input type="checkbox"/> Schools | <input type="checkbox"/> Jails/Prisons |
| <input type="checkbox"/> Early Childhood Programs | <input type="checkbox"/> Other |
| <input type="checkbox"/> Parks/Rec | |
| <input type="checkbox"/> Clinics | |
| <input type="checkbox"/> Hospitals | |

Goals and Intended Outcomes

16. What is the overall goal or intended outcome of this work?

17. Are you using any data from publicly available source (s) to measure impact (e.g., MN Student Survey data)?

- Yes
- No
- Unsure

If yes, please list the data point and source.

Types of Evidence Definitions

Innovative

- New or community-supported ideas that are not specifically informed by research but may be:
- Essential to make other work possible,
- A component of a larger initiative,
- A logical practice that enhances mental well-being,
- Narrative or community informed activity, or
- Modification of some aspect of an existing evidence-informed practice, such as the implementation method or population.

Culturally Informed

Includes culturally appropriate best practices, culturally based adaptations to evidence-based or research-informed practices, or traditional practices (practice-based evidence) that have stood the test of time within a culture and community that may or may not have a body of scientific evidence to support it currently.

Evidence-based

Activities that have been validated by documented high-quality research, such as controlled clinical studies.

Research-informed or Promising Practice

Activities that use the best available research and practice knowledge to guide program design and implementation, also defined as emerging models or theory-based practices. This allows for innovation while incorporating lessons learned from current research.

18. Which best describes the initiative? (Select all that apply) Note: Your initiative may fit multiple categories. See definitions below for guidance. If you are uncertain of the evidence, that is ok; select what seems most appropriate and it can always be updated as new information is available.

- Innovative
- Evidence-based Practice
- Research-informed or Promising Practice
- Culturally Informed
- Not sure

Focus Areas

19. What is the population of focus? (Select all that apply)

- | | |
|-----------------------------------------------------|-----------------------------------------------------------------------------------------|
| <input type="checkbox"/> All of the community | <input type="checkbox"/> Black, Indigenous or People of Color (BIPOC) |
| <input type="checkbox"/> Young children (under 5) | <input type="checkbox"/> Lesbian, Gay, Bisexual, Transgender, Queer (LGBTQ+) |
| <input type="checkbox"/> School age children (5-18) | <input type="checkbox"/> Rural communities |
| <input type="checkbox"/> Young adults (19-24) | <input type="checkbox"/> Farmers |
| <input type="checkbox"/> Middle age (25-65) | <input type="checkbox"/> Justice involved families (including incarcerated individuals) |
| <input type="checkbox"/> Older adults (65+) | <input type="checkbox"/> Employees |
| <input type="checkbox"/> Parents | <input type="checkbox"/> Veterans |
| <input type="checkbox"/> Foster care providers | <input type="checkbox"/> Immigrants, Refugees |
| <input type="checkbox"/> Child care providers | <input type="checkbox"/> College students/community |
| <input type="checkbox"/> Caregivers | <input type="checkbox"/> Other (Please describe) |
| <input type="checkbox"/> Low-income | |
| <input type="checkbox"/> Homeless | |

20. Is the initiative specifically focused on or designed to address inequities?

Yes

No

If yes, please describe briefly.

Process

21. Who are your partners? (Select all that apply) (Note: Partners are groups or organizations that support the goals of the initiative in some way either formally or informally. Partners may provide: input and consultation, space, resources, connections or referrals, share information or key messages about the initiative, or play another role.)

Business

Media

Faith community

Schools

Federal Government

State Government

Tribal Government

Local Government

Local Public Health and Human Services

Jail/ law enforcement

Neighborhood organizations (e.g., Block Clubs)

Community based, non-profits/social profit

Health care providers (including mental health)

Community members

Foundations

Other (List other partners)

22. Is this initiative tied to any of the following established plans in Minnesota? (Select all that apply)

Community Health Improvement Plan (CHIP)

State Health Improvement Partnership (SHIP) Work Plan

Economic Development Plan

Community Resilience Plan

Community Development Plan

Organizations Strategic Plan

Head Start Plan

Early Childhood Initiative Plan

Community Strategic Plan

Children's Mental Health or Family Services Collaborative Work Plan

School District Plan

Other (Please describe)

MINNESOTA THRIVES SURVEY FORM

23. How is this initiative currently funded? (Select all that apply)

- | | |
|----------------------------------------------------------------|----------------------------------------------------------------|
| <input type="checkbox"/> Federal funding | <input type="checkbox"/> Business sponsorship or contributions |
| <input type="checkbox"/> State funding | <input type="checkbox"/> School funding |
| <input type="checkbox"/> Local funding | <input type="checkbox"/> Medicaid |
| <input type="checkbox"/> Private foundation funding | <input type="checkbox"/> In-kind |
| <input type="checkbox"/> Donations | <input type="checkbox"/> No expenses |
| <input type="checkbox"/> Local public health or human services | <input type="checkbox"/> Other (Please describe) |
| <input type="checkbox"/> Fees | |

24. Is there additional information about funding source(s) that you can add? (e.g., name of grant, type of fee, etc.)

25. What is the annual budget for this initiative (not including staffing)?

- Under \$1,000
- \$1,001-\$5,000
- \$5,001-\$20,000
- \$20,001-\$50,000
- \$50,001-\$100,000
- Over \$100,000
- Unknown currently

26. Are there FTE formally assigned or dedicated to this initiative? Yes No

If formal dedicated staff = Yes

27. How many total FTE staff are dedicated to this initiative?

If formal dedicated staff = No (i.e., only informal staff time or no staff at all)

28. Approximately how many weeks did staff work on this initiative in a year?

29. Approximately how many combined staff hours per week did they work on this initiative in a year? (e.g., 2 staff @ 5 hours each = 10 hours combined)

30. How many people does this initiative serve annually (estimate)?