Rallying the Troops

Engaging Your Community for Inclusion
Dr. Casey Herman

Kelly Bonner
Community Engagement

• Under-recognized adapted programs
• Seek community engagement
• Knowledge to Action frameworks
• How NCHPAD is using this framework
What is Knowledge to Action

Framework to guide putting evidence into practice

- Exists to close the gap between what we know and what we do
- Recognizes complex systems
- Slows down implementation to make sure it's done right
NCHPAD’s Inclusive Community Implementation Process

5 new states selected to implement our NiCIP process and adapted health promotion programs to make inclusive health changes in their communities.

Oregon – Go4Life
Iowa – Girls on the Run
Montana – Prevent T2 for All
Kentucky – SNAP-Ed
New Hampshire – BMI²
NCHPAD’s Inclusive Community Implementation Process

**1. STEPS**
- Mobilize an Inclusive Health Coalition
- Conduct community assessments
- Select inclusion solutions and customize to local context

**2. STEPS**
- Invite community feedback
- Identify challenges to implementing inclusion solutions
- Revise inclusion solutions to fit the community needs

**3. STEPS**
- Finalize evaluation
- Pilot test inclusion solutions
- Finalize inclusion plan

**4. STEPS**
- Implement inclusion plan
- Monitor & evaluate inclusion plan
- Update & sustain inclusion plan
Key Components of the Framework

- Stakeholder Input
- Time and Effort
- Sustainability
Stakeholder Input
Inclusive Health Coalition

- **Inclusive Health Coalition (IHC)**= Diverse groups of community leaders and organizations that explicitly promote disability inclusion in programs and services related to physical activity, nutrition and weight management
  - Efforts focus on the removal of barriers that prevent PWD from achieving the same health opportunities available to community members w/o disabilities through adaptations and changes to community health PSEs.
Why go through this if I have a program?

• Build trust with your community
  – Large community change
  – Slow down and ask people what they want
  – Increase social support

• Identify barriers within your community people with disabilities face
  – There could be things unrelated to your program that you didn’t know about that is affecting participation

• Identify assets within your community
  – Mobilize and share resources
  – Work together towards sustainable solutions
Who should be on the IHC?

– Recruit a diverse, relevant multi-sector membership
– Think outside the box
– Cross-disability focus/representation
– Partner with disability agencies that have a cross disability focus
– Include family members or caregivers/support people
– Local thought leaders and opinion leaders
– Organizations and individuals
– Experts in a variety of experiences
Potential Stakeholders

➢ Members of the community
➢ People with and without disabilities
➢ Opinion leaders
➢ Program specific
➢ Who else?
Facilitation of an IHC

- Have a stated mission
- Every member has a purpose and a role
- Consistency in communication
- Facilitation skills
  - Articulate a vision
  - Inform
  - Motivate and persuade stakeholders
  - Solicit support
  - Foster team development
Time and Effort

• It takes time to do it right
• It might not be the easiest way
• Building relationships does not happen overnight
• It will pay off!
Community Engagement
Engaging those already at the table

• Guide new initiatives
• Outreach to bring others to join the table
• Include in meaningful work
  – Assessments
  – Material or content development
  – Evaluation
“Community” and “Engagement” Terminology

These terms can mean different things to different people

“Community”

- People
- Public
- Patients
- Communities

- Consumers
- Stakeholders
- Citizens
“Engagement”

Activities

Participate  Engage  Involve

Collaborate  Consult  Partner
Community Engagement Continuum

**Outreach**
- Some Community Involvement
  - Communication flows from one to the other, to inform
  - Provides community with information.
  - Entities coexist.
  - Outcomes: Optimally, establishes communication channels and channels for outreach.

**Consult**
- More Community Involvement
  - Communication flows to the community and then back, answer seeking
  - Gets information or feedback from the community.
  - Entities share information.
  - Outcomes: Develops connections.

**Involve**
- Better Community Involvement
  - Communication flows both ways, participatory form of communication
  - Involves more participation with community on issues.
  - Entities cooperate with each other.
  - Outcomes: Visibility of partnership established with increased cooperation.

**Collaborate**
- Community Involvement
  - Communication flow is bidirectional
  - Forms partnerships with community on each aspect of project from development to solution.
  - Entities form bidirectional communication channels.
  - Outcomes: Partnership building, trust building.

**Shared Leadership**
- Strong Bidirectional Relationship
  - Final decision making is at community level.
  - Entities have formed strong partnership structures.
  - Outcomes: Broader health outcomes affecting broader community.
  - Strong bidirectional trust built.

Reference: Modified by the authors from the International Association for Public Participation.

What counts as engagement/participation to you? Or Where does your organization fall on the ladder or the continuum?

What counts as engagement/participation to your community partners?

Are they the same?

Consider participation as a process, not an input.
Utilitarian: participation as means to accomplish aims of project

Empowerment: participation as an end, in which the community takes responsibility for working to solve its own health problems

Lynn Morgan’s “Definitional Divide”

Advantages of Community Engagement

1. Recognize multiple causes of health problems, require interventions to impact multiple levels of the social ecological model
2. Community participation has indirect effect on health
3. Encourages shared sense of ownership
4. Facilitates development of interventions integrated into existing community structures
5. Can be very cost effective
Challenges of Community Engagement

1. Implementing with community relevance
2. Representativeness of larger community
3. Power differentials between the organization and different community members
4. Confusion over lines the roles individual members play in the collaborative process
5. Complex, time-consuming process
Cultural Competence

• Delivering culturally appropriate services
• We should critically evaluate our own cultural backgrounds as well as the organizational practices and assumptions that guide our work
• We should have competence and literacy about the dominant social and cultural systems when providing services
Cultural competency is a two-way street!

"I was hoping she'd opt for my way."
Understanding the Community

- Geographic boundaries
- General history
- Key people and leaders
- Demographics
- Important issues
- Morale and involvement levels
- Culture of the Community
- Key allies and rivals
- Expenses and income
Wider community feedback

• Sometimes needed, sometimes not
• Checking your solutions
• Make sure it meets the most needs
• Generating buy-in for your plans
What is part of gaining feedback?

- Formal process
- Feedback collected and incorporated (or not)
- Communication about how the feedback was used should be given to the community
  - How was the feedback used or not used?
  - Who was involved?
Before Gaining Feedback

• Are you ready to explain your plan?
• What is your target audience(s)?
  – Have you considered all potential stakeholders?
  – Are there different priorities between relevant players and agencies?
• Who is leading the feedback effort?
• What funding and resources are needed?
Methods for Collecting Feedback

- Public Forum—Focus Group
- Interviews
- Charrette
- Newsletter
- Survey
- Event Booth/Table
Considerations while gathering feedback

- Do you need to hold a planning meeting?
- What method will you use to gain feedback?
- How formal or informal will it be?
- How will you ensure that you will be able to gather feedback and comments?
- What accessibility issues do you need to consider (e.g., accessible location, accessible technology, accessible reading materials, etc.)?
- How will you advertise and invite members of the community?
Sustainability

The Office of Adolescent Health (OAH) identifies the factors for program sustainability:

✓ Strategize
✓ Assess
✓ Lead
✓ Evolve
✓ Communicate
✓ Integrate
✓ Partner
✓ Diversify

Where are we....

- The right people are at the table
- Feedback gathered from stakeholders
- Program you want to implement
- Plan for sustainability

What next?
GRAIDs

- Built Environment
- Services
- Instruction
- Equipment & Technology
- Policy

Adaptation Framework
What does this look like?

• Implementing a program focused on diabetes prevention
  – Initial focus: getting people to the program
  – After talking to people: doctors were not telling people with disabilities that they were prediabetic so they didn’t know that the program was for them.
What does this look like?

- One state found educated professionals was an issue.
  - Their Solution: 2 days conference for personal trainers
What does this mean for you?

Disability Community
• Have you asked them what they want?
• Are they involved in the process from start to finish?
• Do they help conduct assessments?

Surrounding Community
• Have you asked them what they want?
• Are they involved in the process?
• Do they see the need for what you do?
Questions?

Kelly Bonner: Kellyb@lakeshore.org
Casey Herman: Caseyh@lakeshore.org