WE’RE ALL IN THIS TOGETHER
Strengthening Community Engagement Strategies Through a Collaborative Technical Assistance Model

PREPARED BY:
PUBLIC HEALTH INSTITUTE CENTER FOR WELLNESS & NUTRITION
# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Page</th>
<th>Section</th>
</tr>
</thead>
<tbody>
<tr>
<td>03</td>
<td>Introduction</td>
</tr>
<tr>
<td>04</td>
<td>Methods &amp; Results</td>
</tr>
<tr>
<td>05</td>
<td>Results Part I: Successful Community Engagement Recruitment and Promotion Strategies</td>
</tr>
<tr>
<td>07</td>
<td>Success Story: American Heart Association</td>
</tr>
<tr>
<td>08</td>
<td>Results Part II: Identifying Facilitators and Barriers to Community Engagement</td>
</tr>
<tr>
<td>11</td>
<td>Success Story: Eastern Michigan University</td>
</tr>
<tr>
<td>12</td>
<td>Results Part III: PHI CWN Efforts to Support Community Engagement Strategies</td>
</tr>
<tr>
<td>15</td>
<td>Success Story: Healthy Savannah</td>
</tr>
<tr>
<td>16</td>
<td>Discussion</td>
</tr>
<tr>
<td>17</td>
<td>Limitations &amp; Recommendations</td>
</tr>
</tbody>
</table>

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INTRODUCTION

The Public Health Institute Center for Wellness and Nutrition (PHI CWN) through funding from the Center for Disease Control and Prevention provided trainings and technical assistance to the 2018 Racial and Ethnic Approaches to Community Health recipients across the country. More specifically, the trainings and technical assistance were focused on community engagement utilizing participatory approaches and lifting community voice and participation in local coalitions using a health equity framework. In 2019, PHI CWN conducted baseline key informant interviews with the Racial and Ethnic Approaches to Community Health recipients to measure their level of community engagement before the training and technical assistance provided by PHI CWN.

In 2021, PHI CWN conducted follow-up key informant interviews with recipients to identify the following:

- Progress with implementation of community engagement strategies;
- Facilitators and barriers in implementing community engagement strategies;
- Ways in which PHI CWN technical assistance, trainings, and peer learning opportunities supported recipients’ community engagement work.

In addition to the results from the key informant interviews, specific case examples of community engagement work will be highlighted through a selection of Success Stories.
METHODS

Eight recipient organizations had been previously interviewed by the PHI CWN in 2019 and had received high-touch technical assistance (TA) and training from PHI CWN were selected to participate in follow-up key informant interviews. High-touch TA refers to recipients that attended trainings with PHI CWN in addition to participating in 1:1 technical assistance. Once selected, representatives from all eight organizations received an invitation to participate in key informant interviews. In total, seven recipient organizations participated in both baseline and follow-up interviews.

Interviews were conducted virtually via Zoom, with participants providing verbal consent to participate and record the interviews. Notes were transcribed from each interview and were combined into an Excel file. Qualitative analysis was conducted, first examining responses to identify themes, and then categorizing responses by theme. Quotes were extracted to serve as illustrative support for identified themes.

In addition, Success Stories were gathered from recipients to highlight specific examples of successful community engagement work. A story template was provided by CWN and completed during calls.

RESULTS

Seven of the eight selected recipient organizations agreed to participate in the key informant interviews. Most organizations selected one to two individuals to participate in the interview. Participants included program managers, community engagement specialists, program evaluators, and community health workers, among others.

Figure 1: DNPAO Recipients receiving CWN TA
Part I: Successful Community Engagement
Recruitment and Promotion Strategies

Successful recruitment and engagement strategies included snowball recruitment, recruiting through established community organizations, social media outreach and community promotions and campaigns, and partnering with trusted community sites like barber shops or local churches. Recipients reported community promotions and campaigns through distributing flyers, putting up posters, and using television or radio advertisements.

Respondents shared several strategies that they used to engage community residents. The use of snowball recruitment strategies through engagement with community leaders, community-based groups, or local businesses was commonly reported. Snowball recruitment is a technique in which participants ask community leaders to identify other potential leaders or groups to become involved. Respondents shared that identifying strong community leaders led to greater trust in the project, resulting in more community members becoming involved in a participatory role. One grantee described their experience partnering with a community navigator:

"We have a great community navigator...that is really involved in those communities, and we found that trying to engage residents and get participants for events or things like that is way more effective when it's coming from someone like [the community navigator] than when it's coming from us and so I think that that's again an area where we really lean on our community partners, to kind of generate that engagement."

One recipient shared that they engaged community members in health education and screenings in barbershops and beauty salons. The recipient described this approach as a way to connect with community members in trusted community spaces.

"It's very important because [salons] are where people literally and figuratively "let their hair down" and really speak on personal issues – where people are more comfortable and can address what really their health issues are or their concerns or fears."

In addition to leaning on trusted leaders in the community for recruitment, some respondents shared that partnering with community-based organizations, doing similar work was the most effective approach for them. One recipient stated:
“A lot of times being a [non-Community-Based Organization] will already be the first roadblock to us actually doing community work in that we are kind of that “ivory tower”, you know, not fully in the community, especially right now with the pandemic – and so, [we] partner with a lot of local non-profits.”

Recipients also reported the use of social media outreach for their recruitment, although some admitted that a “boots on the ground” or community “word of mouth” approach had been more effective in their work.

“Social media pushes are also being done but it can be hard to confirm if we are reaching our target population with that, but we have had some success.”

Recipients also shared that putting up flyers in locations where community members frequented and trusted was important and that using translated materials was critical for recruitment within the communities they served.

**Role of Community Residents**

Recipients were asked to share the roles that community residents played in their Racial and Ethnic Approaches to Community Health (REACH) projects. Several recipients shared that community residents act as community champions, promotoras, or in some cases breastfeeding counselors. In addition to acting as community champions or health workers, the role of community residents was described as one in which they were invited to share information through focus groups and invited to participate in planning meetings.

Recipients were then asked to share about the processes used to engage community residents in identifying problems and solutions in their community. One respondent described a community resident coalition that was formed from a walk audit that was conducted for the improvement of physical activity infrastructure in their city.

“We've engaged residents in walk audits where residents of the city actually completed walk audits entirely on their own, and we were able to gather that data and then create a community coalition to really pinpoint areas that need direct action right now and things that they would like to see...to give them as much power within the initiative as possible.”

Next, a Success Story will be shared by the American Heart Association that highlights the role of community residents in a smoke-free campaign.
Background
Horizon City, a suburb of El Paso, Texas, was the last municipality without a smoke-free policy for public places including workplaces. Previous efforts to pass smoke-free policies were unsuccessful as perceptions of efforts were driven by outside influence and not community residents. Through the Centers for Disease Control and Prevention’s (CDC) REACH grant, the American Heart Association (AHA) garnered community buy-in with support from a Horizon City coalition comprised of community residents, parents, youth, and school district officials. The PHI CWN, a TA provider, offered trainings, tools, and insights to support authentic community engagement strategies.

Community Engagement Successes
In January 2020, AHA gauged community sentiment for smoke-free environments and hosted town hall meetings about the health risks of second-hand indoor/outdoor smoke that disproportionately impacts low-resourced Latinos. The Smoke-Free Horizon City Workgroup was created, comprised of 15 community residents.

Due to the COVID-19 pandemic, workgroup members shifted capacity, resources, and activities online. AHA and collaborators utilized social media to educate, engage, and gain residents’ support, resulting in a local champion and influential church leaders. PHI CWN provided TA and photovoice resources. AHA facilitated regional tobacco training sessions with workgroup members, which led to the development of educational videos and other social media posts increasing community awareness. Students produced videos in their own words as to why a smoke-free Horizon City is important and boosted them on social media resulting in 11,831 views and 22 messages from community residents supporting smoke-free environments.

In October 2020, four invited workgroup members provided public comments on the benefits of a smoke-free policy. The workgroup recruited community residents to share their own stories and testimonials. Through the tenacity of engaged community residents, Horizon City now has a smoke-free ordinance: No smoking in all indoor air and outdoor parks. An unexpected outcome is a young person engaged in this effort is now with the national tobacco-free campaign serving on the AHA youth advisory board.

Future Efforts
AHA will continue engaging parents and youth and partner with local school districts interested in adopting and implementing a holistic, non-punitive approach regarding students caught on campus using any tobacco product.

AHA will continue to partner with PHI CWN to expand its community engagement efforts and acquire new tools and strategies. The participatory process that AHA followed put the power back into the community’s hands and has started a local movement towards community-led approaches.
Part II: Identifying Facilitators and Barriers to Community Engagement

Facilitators to Community Resident Engagement

One main facilitator of community engagement was co-developing a plan of action for implementation with community members. Six of the seven organizations described involving community residents in the decision-making process surrounding the project and resource development and some described co-developing an implementation plan.

Several recipients stated that providing resources and building skills to empower community residents was critical to the success of continued community engagement and their REACH work. One recipient described an example of a youth who participated in local city council meetings:

>*Giving [community residents] those steps and resources on how to participate. We gave [a 6th grader] flyers and infographics...that he could then take back to his school to his teachers and principal – so, giving them the resources and empowering them to talk about that subject, that way they can continue to stay engaged.)*

Recipients also described the importance of partnering with trusted community leaders to ensure there was buy-in for successful community resident engagement. One respondent stated that “[community leader] support is big because they’re the messengers [to the community].”
Outcomes from Engaging with Community Residents

Respondents reported the benefits they observed from engaging community residents in their work. Some common themes that emerged were a “domino effect” of community engagement, increased community trust, community resident ownership of projects, and improved initiatives that included community voices and ideas.

Recipients shared that when community residents would see others involved, they felt comfortable and inspired to also get involved. One recipient stated that “community engagement begets community engagement” and another shared that when one community is involved in local infrastructure or policy improvements, neighboring communities see this and feel motivated to do something similar.

"With [us] developing the [breastfeeding] training based on feedback from community residents – the information really resounded with the people who participated in the program...we believe that the community has the answer and so when you do that, the program is developed in a way so that it speaks to [community residents], versus us just being in the room coming up with the curriculum or deciding ‘this is what I think they need to know’.”

Recipients also shared that involving community residents builds deeper trust in relationships over time between the community and those funding and/or leading the project. Recipients also described the beneficial outcome of community residents taking ownership of the projects in their communities, as well as community residents being hired on as staff in certain cases.

"One of our resident champions - she has been able to help us running the EBT cashier stand at the farmer’s market. Last year, she was a volunteer and this year she is hired by the administration."
Barriers to Community Resident Engagement

Recipients described some barriers that they faced with engaging community residents in their REACH work. Several recipients shared that community residents had a difficult time generally trusting projects like these. However, recipients shared how they approached establishing trust with community residents through showing up consistently, maintaining transparent communication, and working with trusted local community leaders. Recipients also reported barriers related to competing priorities for resources, like the time of residents and community leaders and the underfunding of city and county programs. In addition, recipients cited community fatigue as a barrier to engaging community residents. One recipient stated that the community fatigue is related to the mistrust that residents have around government projects.

“The [city comes] in so many times and they the community didn’t get what they wanted out of it. People are sick of taking surveys and not seeing changes out of it.”

Accessibility barriers were cited by multiple recipients, including transportation, weather, and technology barriers. In addition, several recipients cited the importance of having translators on-site to reach the intended population in the appropriate language, as language could be a barrier to community engagement without this support. Accessibility barriers were also cited as they related to virtual programming. One site, stated that “the digital divide” was a challenge, particularly for some of their older community resident participants.

“Finding the virtual space to make everyone feel comfortable, that it was accessible for everyone, that they knew how to navigate through it, was the most challenging part.”

Next, another Success Story from Eastern Michigan University demonstrates how engaging with community residents led to successful outcomes to improve street safety and active transportation.
Background
In 2011, Hamtramck, a small city surrounded by Detroit, was named Michigan’s most walkable community; but in recent years, crumbling infrastructure and dangerous traffic speeds have left residents with safety concerns. Many Hamtramck residents do not drive, further establishing the importance of safe active transport options. A team from Eastern Michigan University (EMU) partnered with the Community and Economic Development Department to address Hamtramck’s infrastructure concerns. They developed a comprehensive plan to improve safety and walkability, but through TA provided by PHI CWN, they quickly realized the importance of involving community residents in the process. EMU went back to the drawing board, to authentically engage the community in a resident-informed plan of action.

Community Engagement Success
A multi-generational community coalition known as the Quick Build Team was formed with local business owners, high school students, and residents. EMU provided education on quick builds and infrastructure principles and residents shared their experiences riding bikes and walking through town. The Quick Build Team contributed to drawing design mockups of where to put bike lanes and midblock crosswalks. EMU team polished the mockups into professional designs and they collaboratively presented their plan to the City Planning Department. The result: An alley activation plan that would align with the Joe Lewis Greenway, a 27.5-mile largescale greenway development project in the area.

As plans progressed, the Quick Build Team elevated concerns expressed by the larger community about including the alley activation. They began plans for the quick build event, as an opportunity to get feedback from more residents on the design and to ask questions in real-time. Through TA calls with PHI CWN during the planning process EMU brainstormed numerous techniques to engage the community in providing valuable feedback at this event as possible. The Quick Build Team with 20 community volunteers coordinated and facilitated a successful 3-day ally activation. The event engaged more than 52 community residents with QR code virtual surveys, interactive dot surveys, and community-facilitated speed rating observations.

Future Efforts
The Quick Build Team is still actively engaged and planning to incorporate community feedback into future infrastructure designs. Murals are being painted and two small-scale art installations are planned for the Spring. Truly, the alley activation was not a one-time event—it is a dialogue that will continue as the Hamtramack community leads efforts to improve street safety and active transportation in their city.
Part III: CWN Efforts to Support Community Engagement Strategies

Recipients were asked to share their experiences working with PHI CWN on community engagement and how the TA, trainings, and peer learning opportunities provided by PHI CWN supported their work. Respondents cited two resources as most useful to their work: 1) the Community Engagement Spectrum from the PHI CWN-facilitated trainings (Figure 2) and 2) the PHI CWN-developed toolkit, “Community Engagement Toolkit: A Participatory Action Approach Towards Health Equity and Justice”. During the interviews, several recipients shared about their experiences incorporating the tools into their REACH work.

Figure 2: Community Engagement Spectrum

In addition, respondents cited TA calls as supportive in developing ideas and in planning community engagement activities. One respondent stated that the TA calls helped them to prioritize the inclusion of all stakeholders when scheduling meetings, a strategy PHI CWN encouraged sites to use. Respondents also shared that the trainings and peer-learning opportunities were supportive of their REACH work, as they provided a space to hear from others about strategies used in their work. Recipients mentioned several PHI CWN trainings as helpful to their REACH work. These included the set of initial in-person regional community engagement trainings and the training titled “Sustaining Systemic Change: Through equitable practices, partnerships, and community engagement”.

*Based on the IAP2 Public Participation Spectrum, developed by the International Association for Public Participation. 2014 http://cymcdn.com/sites/www.iap2.org/resource/resmgr/foundations_course/IAP2_P2_Spectrum_FINAL.pdf
How Working with PHI CWN Supported REACH Recipients’ Work (e.g., TA, Trainings, Tools, Etc.)?

Several recipients shared that the PHI CWN TA and trainings offered them new approaches and supported existing ones which helped to provide validation and reassurance about the work they were doing.

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“Speaking with [PHI CWN]—it confirmed that we were on the right track and also pushed us forward to help us make relationships with those who were heads of these [community] organizations. That really helped me take a different approach—to directly connect with the leader.”

One recipient described how the TA calls had helped keep their work “on track” stating that:

“The monthly calls that we do...are incredibly helpful. [CWN staff] is just absolutely wonderful pointing out areas where there’s more opportunity for engagement...[they] talk...it all through with me again and really helps point out the areas where this is going really well, this is what needs more attention, this is what we can do about it and so that is always really helpful—just keeps us on track [ ] and always brings it back to what that main goal is of community engagement and what the purpose is.”

Another recipient shared how learning about the Community Engagement Spectrum helped support their existing community engagement approaches and stated, “The Community Engagement Spectrum—I was doing it just on the fly—by seeing the spectrum and really understanding it I knew I was [going] in the right direction.”

Several recipients also referenced using the Community Engagement Spectrum in their work, including using it as a tool for community resident feedback and reflection on where their project falls on the spectrum.

“I love the toolkit that talks about the continuum (e.g., educating vs opinion vs part of process). To me that is critical. I’ve been doing this for a long time, that was just like RIGHT ON! Most of public health stays in steps 1 and 2 and [doesn’t] get to higher steps. It’s the communities at the higher level that are still making positive changes in their communities.”
One recipient shared their experience incorporating the “Ideal vs. Real” activity into their work.

“As I was preparing to take more of a lead role in the meetings that I was holding where we were discussing policy, [the PHI CWN staff] had a great idea – they pointed me to the activity “Ideal vs. Real” and I was able to do something similar for one of my group meetings. I think it was great and a great idea and then being able to see it in the [PHI CWN] training later on, I think that it was helpful to just see how [PHI CWN staff] use some of the resources that are provided in the toolkit...and as I continue to expand the program, as I go to new congregations, I think definitely that the toolkit will be a useful resource for that.”

Overall, recipients reported that the PHI CWN TA, trainings, and peer-learning opportunities were supportive of their community engagement efforts. Recipients appreciated opportunities to hear from other REACH recipients about the approaches that they had used for community resident engagement and the resources and ideas shared by PHI CWN staff.

Next, one final Success Story will be shared from Healthy Savannah that showcases how PHI CWN supported their community engagement strategies.
Background
Healthy Savannah is a nonprofit organization that partners with a coalition of over 200 public and private organizations to create a culture of health that benefits all city residents. Healthy Savannah focuses its efforts on low-resourced Black residents using an intentional community engagement process to prioritize community changes and address local health inequities. The PHI CWN has acted as a technical assistant partner since the onset of Healthy Savannah's REACH project.

Healthy Savannah centers on community voice and tailors its work based on these recommendations. Examples of their community engagement efforts include annual surveys, community outreach, community member interviews, listening sessions, and attending neighborhood association meetings. Healthy Savannah supports its partners by sharing community engagement strategies and resources, including inviting partners to strategic planning sessions offered by the PHI CWN. This approach motivates other organizations to conduct community engagement activities and positions Healthy Savannah as a trusted resource.

Community Engagement Success
Two members from the City of Savannah’s Department of Economic Development attended a call with PHI CWN in July of 2021 to plan effective engagement strategies. PHI CWN’s Community Engagement Toolkit’s participatory action approach guided their efforts. They developed asset mapping in three historically hard-to-reach key areas in Savannah. Since incorporating strategies from the toolkit, the reception has been warmer. The Department of Economic Development members now attend Neighborhood Association meetings each month and have established strong relationships with the City of Savannah’s Community Outreach Coordinators. Active listening has been key to their success. The office now leads their actions by asking the following questions: tell us about your neighborhood, what is important to you, and why?

Healthy Savannah received supplemental funding from the CDC for COVID-19 and flu outreach. They recruited a team of Community Health Advocates that worked in their neighborhoods to boost vaccine acceptance and access. This success has inspired Healthy Savannah to build a permanent team to support its work in all areas, including nutrition, physical activity, and community clinical linkages.

Future Efforts
Healthy Savannah will partner with PHI CWN to refine its community engagement strategies. As part of a larger social movement to promote systemic change, the coalition aims to open the space to more partners to expand community engagement efforts throughout the city. Being intentional and improving how the coalition conducts community engagement will better serve the community and truly instill a culture of health.
Respondents from the eight recipient organizations exhibited an understanding of community engagement and shared tangible examples of how they were including community residents in project development and implementation. Baseline interviews with REACH recipients revealed that fewer recipient organizations were conducting community engagement and that many did not understand the distinction between partnering with community organizations and including community residents in the development and implementation of their work. Therefore, over the three years of the project, recipients shifted from beginning to understand community engagement to fully engaging community residents, whereby residents were leading local projects. While each organization was not at the same level of community engagement, overall, the PHI CWN training and TA helped recipients shift from the “Inform” and/or “Consult” levels on the Community Engagement Spectrum to the “Involve”, “Collaborate”, and “Empower” levels. (Figure 2).

At baseline, organizations did not report involving community residents in decisions. However, at the follow-up 6 out of 7 organizations interviewed described co-creating solutions or involving community residents in the decision-making process surrounding project implementation and resource development.

The TA and trainings conducted by PHI CWN were appreciated by recipients and supportive of their community engagement efforts. But more importantly, the evidence presented above demonstrates that the support provided by PHI CWN was also effective in helping organizations deepen their community engagement strategies to involve and collaborate with residents.
LIMITATIONS

This was an in-depth study of how the TA and training provided by PHI CWN influenced changes to the REACH recipients’ community engagement efforts. This study did not gather feedback from REACH recipients that did not receive TA or training, so there is not a counterfactual or comparison group for which to measure impact.

RECOMMENDATIONS

The support that CWN provided REACH recipient organizations led to more effective community engagement efforts. CWN will continue to offer the following support:

- Provide opportunities for recipients to network with one another and share best practices and lessons learned for conducting community engagement.

- Support the development of feedback loops between residents and organizations. While many organizations conduct surveys and/or focus groups of residents, regularly making decisions based on the results and discussing the results and decisions with residents is also a key step to improving community engagement and project outcomes.

- Support recipients in overcoming barriers to community engagement. Specific barriers that were mentioned at baseline were also mentioned again at follow-up (e.g., funding constraints, low trust, time/fatigue, etc.). Since these barriers continue to persist, help recipients to develop creative strategies to address and overcome barriers.

- Continue to open opportunities for TA and training to community-based organizations and partners of recipients as an approach to deepen peer learning, community engagement networks and a local culture shift.