

Colorado Maternal and Child Health Community Engagement Strategies and Activities by Levels

Introduction

Colorado’s Maternal and Child Health (MCH) Program identified seven priorities to address for the 2016-2020 Title V MCH Block Grant funding cycle. The MCH Steering Team identified community engagement as a strategic focus across the MCH priorities because it is a public health best practice and is required as part of MCH 3.0, the federal transformation of Title V MCH Block Grant. Colorado’s MCH Program uses “community engagement” to refer to the inclusion of the end user (youth, youth with special health care needs, women, families, etc.) in program planning, implementation and evaluation with the purpose of influencing decisions and improving outcomes.

The information and resources included in Colorado’s community engagement documents were developed as a result of a work group process that involved capturing MCH staff expertise and a literature review of community engagement standards and measures.

Colorado’s community engagement continuum (below) builds on two assumptions: authenticity and motivation. Professionals must be authentic in their approach to engaging community members, integrating personal vulnerability and a sense of hospitality in the processes and efforts. Professionals should also be genuinely motivated to involve the community in the work, in that the “end user” is not just consulted, involved or collaborated with, but rather they are listened to and their input informs processes and products. Unlike other community engagement models, Colorado’s continuum does not include the manipulation or tokenistic involvement of community members.



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Colorado’s Community Engagement Continuum				
Increasing Level of Community Involvement, Impact, Trust and Communication Flow				
Increasing Ownership, Empowerment, Skills, Opportunities and Supports of Both Staff and Community				
<i>Please note: Each level has value.</i>				
Participation		Engagement		Partnership
Outreach	Consult	Involve	Collaborate	Share Leadership
Communication flows from the program or initiative to <u>inform</u> community members.	Community members <u>provide one-time or periodic feedback.</u>	Communication flows both ways and community members provide <u>ongoing participation.</u>	Community members <u>influence decision-making.</u>	Community members <u>share power and responsibility</u> making decisions together.
<u>Outcome:</u> To establish communication and outreach channels, while sharing information with the community.	<u>Outcome:</u> To develop connections.	<u>Outcome:</u> To establish visibility of the partner and increased cooperation.	<u>Outcome:</u> Increased trust and partnership-building	<u>Outcome:</u> A strong partnership with bidirectional trust that affects broader community health outcomes.
<i>(Adapted from CDC’s Report “Principles of Community Engagement: Concepts and Definitions from the Literature and Wong, N. T., Zimmerman, M. A., & Parker, E. A. (2010). A typology of youth participation and empowerment for child and adolescent health promotion. American Journal of Community Psychology, 46, 100-114.)</i>				

Outreach Strategies

- Share information with community members through:
 - ❖ Social media (Facebook, Twitter, community listservs and forums, etc.)
 - ❖ Community bulletin boards (in libraries, schools, grocery stores, recreation centers, faith organizations, etc.)
 - ❖ Public-centric learning opportunities and conferences (such as parent workshops, youth and family summits, support groups, etc.)
 - ❖ Family leaders through the department’s Family Leadership Registry
 - ❖ Community-based events such as health fairs and festivals

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- ❖ Existing community groups or organizations' communication channels (staff or members from community-based organizations, faith-based organizations, PTAs, neighborhood organizations, cooperative development groups, etc.

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Outreach Strategies Cont'd

- Share information and identify motivated and engaged community members through:
 - ❖ Social media
 - ❖ Community events and meetings
 - ❖ Community groups or organizations (staff or members from community-based organizations, faith-based organizations, PTAs, neighborhood organizations, cooperative development groups, etc.)
 - ❖ Family Leadership Training Institute meetings, events, and forums.

Consulting Strategies

- Share information and gather feedback and perspectives from community members through:
 - ❖ Focus groups - Informal or formal
 - ❖ Traditional surveys through email or key informants (e.g. “Roving Reporter”)
 - ❖ Social media trending, polls and surveys
 - ❖ Youth and family advisors (Youth Partnership for Health, CDPHE Youth Advisors and/or Family Advisors; Family Leadership Training Institute participants and graduates; Other organizations’ youth and family advisors)
 - ❖ Participating in community groups or organizations’ events/meetings (staff or members from community-based organizations, faith-based organizations, PTAs, neighborhood organizations, cooperative development groups, etc.)
 - ❖ Hosting community conversations, town hall meetings or other events to learn from the community

Involve

- Ad hoc work group that meets more than one time
- Invite those who participated in the above-mentioned focus groups, community events, key informant interviews to participate in a follow up planning conversation/meetings to share their experiences/stories that highlight gaps and barriers, in addition to recommendations for how to improve the situation/program/initiative.

Collaborate

- Community members participate regularly on a coalition or work group as collaborators whereby they receive the necessary supports (e.g. compensation, child care, travel costs) to participate and provide input. Collaboration includes an environment with a shared goal, whereby accountability is shared across all members of the group

Shared Leadership

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- Support community members to participate regularly on a coalition or work group as equal decision-makers.

Hire advisors from the priority population to co-lead a committee, project or program/initiative where they have equal voting power as other members.

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Standards for Engagement

Scotland National Standards for Community Engagement

Accessed on April 23, 2015 at <http://www.gov.scot/Resource/Doc/94257/0084550.pdf>

1. **Involvement:** We will identify and involve the people and organizations who have an interest in the focus of the engagement.
2. **Support:** We will identify and overcome any barriers to involvement.
3. **Planning:** We will gather evidence of the needs and available resources and use this evidence to agree the purpose, scope and timescale of the engagement and the actions to be taken.
4. **Methods:** We will agree and use methods of engagement that are fit for purpose.
5. **Working Together:** We will agree and use clear procedures that enable the participants to work with one another effectively and efficiently.
6. **Sharing Information:** We will ensure that necessary information is communicated between the participants.
7. **Working with Others:** We will work effectively with others with an interest in the engagement.
(Not included above)
8. **Improvement:** We will develop actively the skills, knowledge and confidence of all the participants.
9. **Feedback:** We will feed back the results of the engagement to the wider community and agencies affected.
10. **Monitoring and Evaluation:** We will monitor and evaluate whether the engagement achieves its purposes and meets the national standards for community engagement. (Not included above)