Community Engagement Guide

Vermont Department of Health
Health Equity Integration Team
Spring 2024

Contents

Acknowledgments

This resource is adapted from the Washington State Department of Health. Many thanks for their permission to adapt this framework. We also extend our gratitude to the Health Equity Action Team (HEAT), who wrote Recommendations for Community Engagement in December 2019. We have included their content as well.

If a project collects data and involves research, there are different processes and responsibilities outlined in the Agency of Human Services' Institutional Review Board (IRB). For more information, visit the AHS IRB webpage and the Department's Guide to Data Standards & Systems.

Cover Page Art: Flood by Vermont Artist Amjed Jumaa

Photograph by Jazmin Quaynor

Purpose

This guide is intended to support Vermont Department of Health staff in working with the community. No matter how much experience you have, we hope you find ways to deepen your work with community members and community partners. You do not have to read the guide in order. We hope that you use the Table of Contents to jump to sections that feel most relevant to your work.

This guide **does not intend** to offer a quick fix for repairing relationships with community partners who have been harmed by government systems. It is intended to support Health Department staff in building mutually beneficial partnerships.

EQUALITY:
Everyone gets the same – regardless if it's needed or right for them.

EQUITY:
Everyone gets what they need – understanding the barriers, circumstances, and conditions.

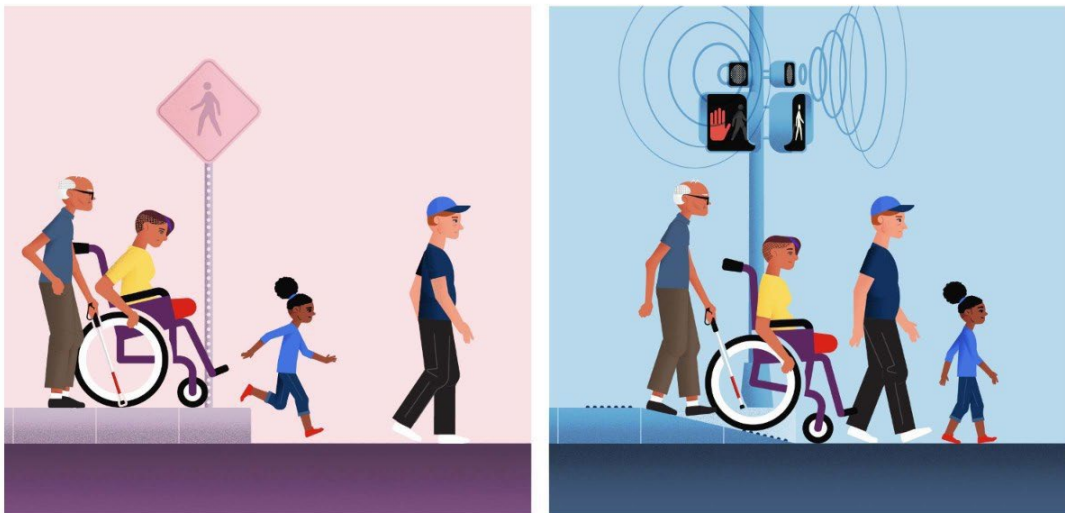Copyright 2022 Robert Wood Johnson Foundation

Figure 1. Crosswalk Equity Graphic, Robert Wood Johnson Foundation

Community Engagement is Health Equity

Health equity exists when all people have a fair and just opportunity to be as healthy as possible. This especially includes those who have experienced socioeconomic disadvantage, historical injustice, and other avoidable systemic inequalities that are often associated with social categories of race, gender identity, ethnicity, social position, sexual orientation, and disability status.[1]

We know that health equity and community engagement are inextricably linked: co-creating programs, processes, and policy with community organizations and individual community members is essential to public health and benefits everyone. For example, curb cutouts benefit those who use mobility devices as well as many other individuals, including those who use strollers and bicycles (Figure 1).

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[1] *VDH Health Equity Integration Glossary*

Communities know what they need based on their lived experience. By working together, we will be more effective. Community Engagement is the process of working collaboratively with and alongside groups of people to address issues that impact their wellbeing. Groups may be affiliated by location, race, ethnicity, age, occupation, lived experience, interest in particular problems or outcomes. It often involves partnerships and coalitions that help mobilize resources and influence systems, change relationships among partners, and serve as catalysts for changing policies, programs, and practices.[2]

As you review this document, you may come across terms that are unfamiliar. A glossary is available on the Health Equity Integration SharePoint. Language is constantly changing and evolving. We all have a responsibility to do our own homework to understand health equity terms and concepts and put them into practice, especially when we engage with community.

Compensation

It is imperative that community members are compensated for their time when informing programs and policies. The Planning Team has developed a standard operating procedure to ensure compensation is consistent and sustainable across the Department. We recommend visiting the HIVE for more information about compensation, including examples of programs within the Health Department who are doing so successfully.

This guide is intended to support you in answering many of the questions that arise when engaging with community members or organizations, including:

- How and when can we engage the community in a project?
- Who is missing from our decision-making tables or services? What may be contributing to this exclusion?
- Have communities (communities of color, LGBTQIA+ people, disabled people/people with disabilities) been inequitably impacted or denied access by similar or related projects in the past?
- How will we ensure those least likely to be involved are engaged in our decision-making processes and services?

Who do we mean by Community?

The Health Department engages communities on many different levels. Sometimes programs collaborate directly with community members. Other times, we seek community participation through collaborations with partners, organizations, and other agencies. By ensuring that our engagement with communities is equitable and inclusive, we reduce the risk of making decisions that could unintentionally negatively affect communities, especially those that are under-resourced. Decisions about policies, programs, and the distribution of resources are best when they are made in partnership with the people they affect.

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[2] *Adapted from Centers for Disease Control and Prevention (CDC)*

Here are examples of types of communities and partners the Department has engaged in the past.

Community Members

Groups of individuals who share something in common. Communities can be defined by location, race, ethnicity, age, occupation, lived experience, interest in particular problems or outcomes, or other common bonds. Sometimes, community members may be identified as people who have received or taken part in services directly offered by the Health Department.

Example: A collective of people with disabilities that meets as an organized group. Some of these individuals serve on the board for other local organizations that prioritize the needs of people with disabilities, while others individually respond to these issues.

Community Partners

Organizations, agencies, or community groups that represent community members and in relationship with the Health Department. This relationship can include program planning or development, a grant agreement, being part of a committee, etc. We form partnerships to ensure comprehensive, broad-based improvement of health outcomes within communities.

Example: A Black, Indigenous, and/or People of Color-led organization that the Health Department invites to serve on a committee and is currently not in a grant relationship with the Department.

Working Partners

Working partners are people or groups who have an interest in a project, activity, or course of action in the health of the community and local public health system.[3] This includes people and organizations that benefit from or participate in delivering services that promote the public's health and overall well-being. They may be community partners. They may also include partners working on a project or program who are involved in or knowledgeable about a topic, but who do not truly represent community members, like a hospital system.

Example: A local shelter has expressed concerns about the gap in services to meet the needs of unhoused individuals who are too ill to recover from a physical illness or injury on the streets but are not ill enough to be in a hospital. The housing organization and the local health system meet with the Vermont Department of Health to create a medical respite bed program in their district.

A note about the word "stakeholders"

In this guide, we have chosen not to use the word "stakeholder," due to its origins in colonialism that harm indigenous communities to this day. We use *working partners* and *impacted parties*, depending on context. "In a colonial context, a stakeholder was the person who drove a stake into the land to demarcate the land [they were] occupying/ stealing from Indigenous territories. Continued use of the term can be construed as disrespectful of Indigenous people as well as perpetuating colonization and re-traumatization." - Research Impact Canada

[3] https://www.cdc.gov/healthcommunication/Preferred_Terms.html

Community Participation Continuum

Many different types of activities constitute community engagement. The chart on the next page provides an overview of different methods of community engagement. The activities are listed along the top, and on the left of the top row are state-led activities. As you move to the right, the engagement activities become increasingly led by the community. This means communities take the lead in identifying priorities, overall direction, and decision making.

There's more information available on each topic listed in the continuum. Simply click the link at the top of every row and it will bring you to specific information, resources, and activities about each topic.

Looking at the Continuum on the next page, where do most of your interactions with community members and community partners fall? Remember, the goal is to foster and support community-driven engagement and partnership whenever possible.
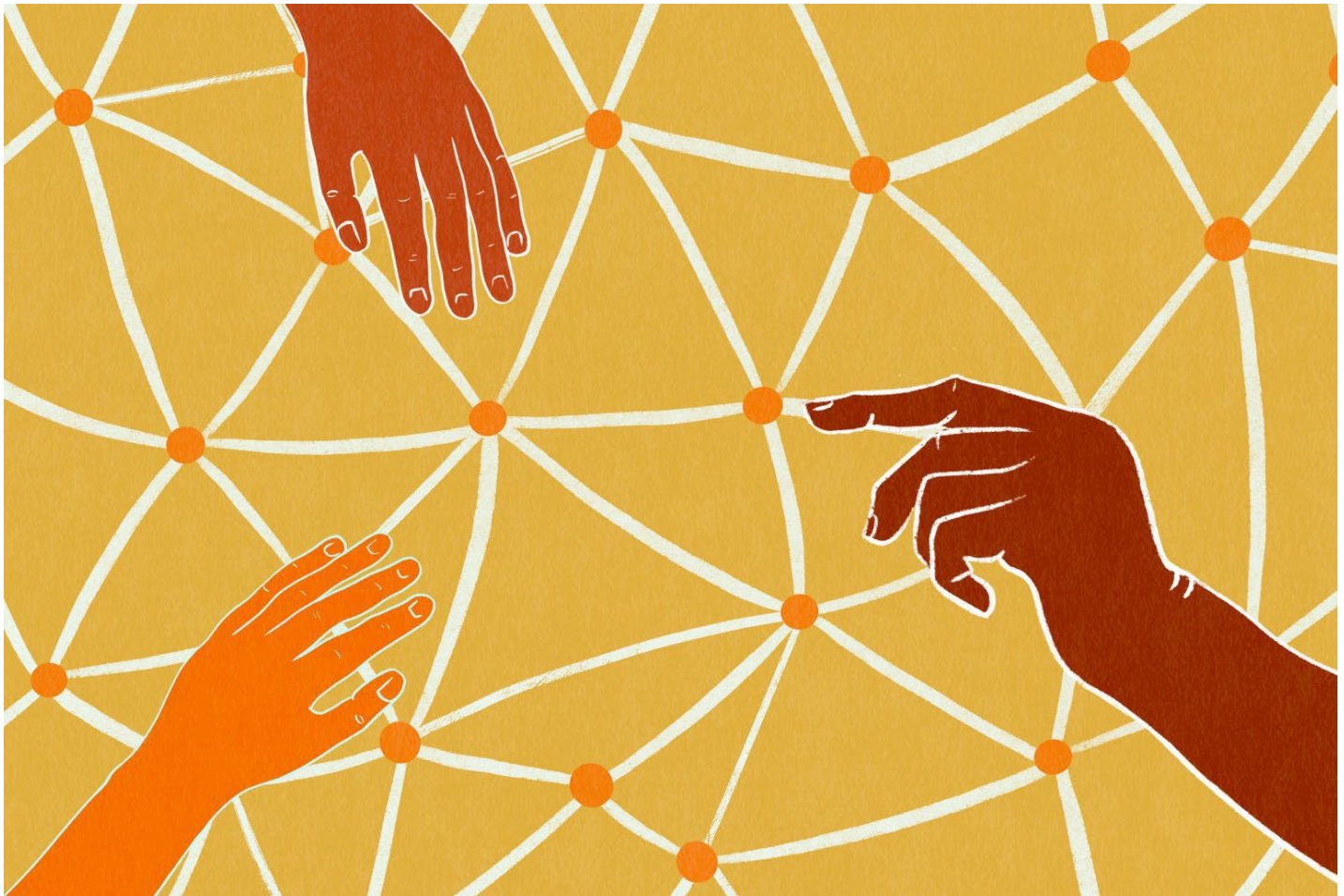
Adapted from the [CDC's Community Engagement Continuum (1997)](#) *and* the Health Equity Action Team (HEAT) Subcommittee, Recommendations for Community Engagement **in December 2019.**

	Inform	**Consult**	**Involve**	**Collaborate**	**Share Power**
	Led by state State holds power	Led by state State holds power	Led by state State holds power	Co-led Power is shared	Led by community Community holds power
Purpose	Share information, listen for understanding, and clarify information	Get and incorporate feedback	Ensure community needs and interests are considered	Partner and share decision-making power	Support and follow the community's lead
Communication Direction	One-way communication	One-way communication	Two-way communication	Two-way communication	Two-way communication
Works to...	Address immediate needs or issues	Inform the development of state programs	Advance solutions to complex problems	Advance solutions to complex problems	Problems and solutions are defined by the community
Engagement Methods	- Town halls - Community meetings - Media, Social Media - Materials - Website - Newsletters - Press releases	- Listening sessions - Focus groups - Interviews - Surveys - Working partner groups - Public comment - Workshops	- Audience and user testing - Advisory groups - Steering committees - Community conversations	- Collective impact - Coalition building - Partnership building - Workgroups	- Attend community meetings - Serve on community-led advisory boards - Provide funding, data, & technical assistance - Develop testimony & policies
Promise	We will keep you informed about our project.	We will listen to you and incorporate your feedback into our project	We will make sure your concerns and needs are reflected in our project.	We will work with you to plan this project.	We will implement the project you come up with.
When to use	There is no alternative because of urgency, regulatory reasons, or legal boundaries.	You want to improve an existing service or program but the options for change are limited.	You need community perspective and buy-in to implement the project successfully.	Community members have a strong desire to participate, and you have the time to develop a partnership.	Community members want to own the project, and you are committed to a long-term relationship.

Promising Practices for Community Engagement

Community engagement can be complex. These practices will help cultivate trusting relationships and authentic partnership.

Do your research about the community.

It's important to be familiar with the community's culture, norms, values, power and political structures, economic conditions, social networks, demographic trends, and history. Additionally, become aware of the community's history of collaborating with other programs at the Health Department, other agencies, and our partners, including barriers faced in engaging with us.

Do your research about yourself.

Before engaging with a community or potential partner, check your biases, privileges, and limitations.

- What assumptions or stereotypes do you hold about this community?
- How could your assumptions negatively impact your interactions or efforts?
- How do your cultural norms and values compare with those of the community?

Get active consent.

You will need at least verbal consent for most methods of engagement. There are additional written consent forms participants will need to complete if you plan to use audio recordings, video recordings, take photos, or include people under the age of 18. It's important to allow people to opt in, even if they're "in public" or other spaces where one might assume assent.

Allow community members to self-identify.

Remember that our cultural identities are dynamic. How people identify is a personal choice and the people we engage are both individuals **and** members of various groups. Some communities and people we strive to reach may have intersectional identities, which means they are members of more than one group that has been historically marginalized or oppressed.

Prioritize unheard perspectives.

Give space and power to the perspectives of those whose voices are least heard. Listen with the intent to take action on the needs expressed by the community. Recognize that individuals have different perspectives, and no perspective should be valued more than another.

Value others' time.

We should never expect community members to volunteer their time or expertise. Show that you value what they bring to your project through compensation, reimbursement, or support for one of their priorities.

Avoid tokenism.

People should never be expected to speak on behalf of, or represent, an entire community.

Recognize strengths and assets.

Even communities that experience the greatest health and economic inequities have strengths, assets, and resources that should be acknowledged and leveraged.

Be proactive.

If you are working on a specific project or trying to address certain health issues, reach out to potential partners and community members as early as possible.

Ensure communication is ongoing.

Collaboration requires continual opportunities for conversation and sharing. Use two-way communication methods that people are familiar with using. Text, Whatsapp messages, or recurring Zoom meetings may be more accessible than email or Teams for some partners.

Be transparent.

Be honest and forthcoming about the purpose of your project and how you will use the input you receive. Only make promises you can keep and make sure to follow through on your commitments. Not following through can erode the trust you have worked hard to build.

Meet people where they are.

Be flexible in your approach. Go to the community — where members gather — and work to build relationships and trust. Look for opportunities to immerse yourself in the community you are trying to reach by attending community events and groups.

Be humble and understand that people with lived experience have the answers.

People know what their communities need.

Strong, strategic, long-term, and trusting relationships with community partners are vital to advancing health equity and transforming public health practices. These relationships must recognize each other's strengths, be rooted in shared values and interests, share decision making, and allow for authentic participation by those facing inequities. - Human Impact Partners
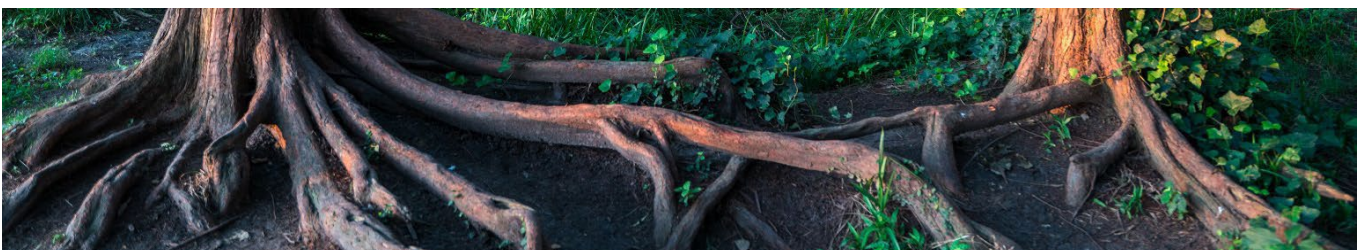
Common Barriers & Potential Solutions

The following pages illustrate common barriers to authentic community engagement and outline potential solutions. There is not one approach that will solve or avoid all barriers for all communities. Ask the community what ideas they have about barriers and work together to identify potential solutions.

Common Barrier: Competing Priorities

Do not expect that community members will be able to drop everything else in their lives to participate in a Health Department project. They have full lives with many responsibilities and commitments that may take priority. You may be able to mitigate some of these competing priorities through thoughtful planning.

Potential Solutions:

→ Family: If you plan to engage parents or caregivers in person, consider needs for childcare or provide options for remote engagement.

→ Food: The sharing of food to bring people together is common across many cultures. If possible, bring healthy and culturally appropriate snacks or meals when holding community meetings or listening sessions. Use your imagination: some grants allow for snacks if food isn't the focus of the event. Others may allow a grantee to provide food as part of the space rental. Ask community members about dietary restrictions and preferences ahead of time. Label food ingredients, including common allergens and foods like pork that people may not eat due to religious observance.

→ Work: Often, community members are not compensated for their time while people who work for community partners and working partners may be able to participate during work time. In these instances, people who work full-time may prefer evenings or weekends.

→ School: If engaging students or those within the academic community, consider the time of year and school schedules. It may be difficult to engage during school hours, the start of the school session, exam times, or school breaks.

→ Offer virtual and asynchronous ways to participate or share feedback. If community members are willing and able to share their contact information, consider establishing an "e-partnership" relationship. This is often a wonderful way to gain important insight that allows community members to provide feedback during times that work for them.

Resource: Vermont Agency of Human Services Healthy Food Standards

Common Barrier: Distrust of Government

Communities may not trust government because of past historical injustices led by governmental public health organizations, like the Tuskegee Syphilis Study or eugenics and forced sterilization practices. Or they may have had personal negative experiences interacting with the Health Department, other state agencies, or health-related organizations.

Potential Solutions:

→ Take the time to teach yourself about historical injustices or past experiences that are impacting the community you are trying to reach.

→ Recognize and own what has occurred in the past. Recognize how it impacts you and the community today.

→ What privileges do you have because of historical injustices? How may those privileges impact your ability to engage certain communities?

→ Commit to the time it will take to rebuild trust. Make sure to follow through on all promises and commitments you make to the community.

Resource: Roots of Health Inequity, Public Health Timeline, National Association of County and City Health Officials (NACCHO)

Common Barrier: Geographic and Physical Location

Consider the barriers for different communities for accessing in-person meetings.

- Is transportation readily available?

- What is the physical space like? Is it accessible for assisted mobility devices?

- Are gender-neutral bathrooms available? Lactation facilities?

* For virtual meetings, see Technology Barriers below.

Potential Solutions:

→ Meet people where they are (physically). Hold your event at a location where the community regularly meets or gathers.

→ In cities and towns where public transportation is available, choose a location that is along the route.

→ In rural communities, consider areas in the town center or near other locations like a grocery store, post office, town hall, etc.

→ Offer travel reimbursement and lodging.

→ If you are organizing multiple events or meetings, consider holding them in different locations.

→ Choose an accessible space. Ensure that the building can be accessed by those who use wheelchairs, that chairs can comfortably accommodate bodies of all sizes, that restrooms are gender neutral and accessible, and that signage is clear and understandable.

Common Barrier: Government Jargon and Process

Government has its own language and way of doing things that may create unintentional barriers for people outside our agency.

Potential Solutions:

→ Use simple, clear language in all communications.

→ Always spell or say out acronyms and be aware of overuse.

→ Check assumptions about what aspects of our work are common knowledge.

Resource: How to Write Using Plain Language-Green Mountain Self Advocates

Common Barrier: Immigration Status

Some community members may hesitate to participate if their immigration status is uncertain or at risk.

Potential Solutions:

→ Ask community partners for guidance on how to make their community members feel safe and included in your activity.

→ Do not collect personal information from attendees.

→ Consider co-facilitating the event with a trusted community leader or partner.

→ Prioritize advocating for gift cards as an option when compensating community members, without requiring a W-9 when possible.

Common Barrier: Inaccessibility

No matter what kind of community engagement activity is being conducted, people will not be able to show up unless you can accommodate their needs. Community members may not always ask for accommodations in advance.

Potential Solutions:

→ Plan for accessibility from the beginning.

→ Invite community members and organizations to share their access needs up front. Include it as part of the RSVP or invitation. This can include language access like translation or interpretation, physical needs like an elevator or chairs that can accommodate people of all sizes, visual descriptions, etc.

→ Let community members know what to expect from the beginning. You can list parking and walking distances, if there are steps or an elevator and where they are located, where accessible bathrooms are located, etc.

Resource: Accessible and Inclusive Communications Policy Meeting Accessibility Guide

Common Barrier: Intercommunity Dynamics

It may be inappropriate to bring all the members of one community together in a shared space because of inter-community relationships, power structures, or other norms.

Potential Solutions:

→ Do your research ahead of time to learn about any potential intercommunity dynamics that may create barriers for some members to engage.

→ Learn from other organizations and the Health Department programs who have worked with the same community in the past.

→ Talk with community leaders and other partners to get their perspective.

→ Consider who in the community is disempowered within status-quo power structure. Follow up with community members that are not in positions of leadership.

Common Barrier: Lack of Cultural Awareness and Responsiveness

Some communities may have cultural values that are different than yours. You may need to design your engagement in a way that ensures all members are able to participate.

For example:

• Would you be more effective in engaging youth with or without their parents present?

• Would it be supportive to meet with people with different gender identities separately (such as religious groups or survivors of violence)?

Potential Solutions:

→ Be mindful of cultural and religious observances and events when choosing a meeting date and time. Do not choose a date if it conflicts. You can add a religious and cultural observances calendar to your Outlook or other calendar.

→ Ask community leaders or key informants how to best adapt your approach to engage community members.

Resource: SOV - Cultural Observances Calendar managed by the Office of Racial Equity

Common Barrier: Language

Provide language access services to participants.

This includes community members who:

- Communicate in a language other than English.

- Have vision or hearing access needs.

Potential Solutions:

→ Identify the language needs of your community. Talk to community leaders and community liaisons, and review language data.

→ Translate all meeting materials and announcements into the top languages spoken within the area or community.

→ Let people know ahead of time that interpretation services will be available for the event or meeting.

→ Arrange for interpretation services at no cost to participants, including sign language and real-time translation services.

→ If virtual, enable live captioning and provide instructions for how to turn it on.

Resource: Culturally and Linguistically Appropriate Services (CLAS), Vermont AOT Equity Framework Web Map

Common Barrier: Our Own Implicit Bias

Implicit bias refers to the negative opinions, assumptions, and associations that people hold without knowing it. Our biases can affect how we interact with others and our relationships with community members.

Potential Solutions:

→ Do your research about yourself before engaging with any community you are not a member of.

→ Commit to continuous, critical self-reflection.

→ Be humble, respectful, and honest. Admit mistakes when you make them.

Resource: Project Implicit, Harvard University

Common Barrier: Stigma

Stigma can prevent some communities from participating. It may include feelings of shame around certain conditions like people living with HIV or survivors of violence.

Addressing stigma can also support a person's safety. Attending a public meeting for people with particular lived experiences can "out" folks and risk their safety .

Potential Solutions:

→ Be mindful of how stigma may impact those you're trying to reach.

→ Ensure that people can participate in programs or projects without others being aware. Do not post large signs outside a venue advertising the event.

→ Design and promote a confidentiality policy. Are there options to be anonymous or use only a first name? What are the expectations for other attendees?

Common Barrier: Technology Barriers

Remote and online engagement can work well for some communities. For other communication, technological barriers may be challenging to overcome.

Potential Solutions:

→ Choose a platform your participants are familiar with. If this is not possible, provide written guidance and support in advance specific to the platform.

→ Consider hosting a tech check before the event for hosts and attendees to practice.

→ Provide a call-in number so people can participate by phone instead of using internet or data.

→ Review information about the technology requirements ahead of time to make sure they are clear, straightforward, and not overly burdensome.

→ Ensure tech support is available before and during the event. Provide attendees with information on who to contact if they are having trouble.

Common Barrier: Time

Some of the logistical aspects of community engagement take time. Plan accordingly and adapt your timeframe as needed to meet the needs of the community.

Potential Solutions:

→ Think about the daily schedules of the people you're trying to engage.

→ Use an existing community meeting. Research when and where community members are already coming together, and whether it is appropriate to ask for time in their meeting space. A great place to start is visiting the organization in person and establishing a relationship!

→ If you will be hiring a vendor for your project, allow three months for the contracting process.

If a project involves research, allow 3 to 4 months for approval from the Institutional Review Board.

Evaluating Your Community Engagement Efforts

You can routinely evaluate the effectiveness of your relationships and partnerships by developing an evaluation plan together. Below are example evaluation questions for you to consider.

Sample Questions			
How was the need for this project identified?	Before		
Does the structure and process allow for all voices to be heard, especially those impacted by historical and present-day injustices?	Before	During	
How do you plan to support your partners or community members? What training, information or resources will they need?	Before	During	
How do you plan to intentionally provide space for those impacted by injustices for their issues to be heard and addressed?	Before	During	
How does the community measure/define success?	Before	During	After
How does the group make decisions?		During	
How are conflicts or disagreements handled?		During	
Who leads the engagement efforts, meetings, or events?		During	
How are community members involved in developing the project?		During	
How did you ensure your community engagement effort was culturally and linguistically responsive?	Before	During	After
Who came up with the project goals and plan?			After
What strategies did you use to ensure all voices were heard?			After
Did your partners feel supported? What could be improved?			After
How did you loop back to the community to thank them and let them know next steps and the impact of their involvement?			After

Checklist: Community Engagement

The following checklist can be used to support your Community Engagement Plan.

Before:

☐ Review the Key Principles of community engagement. Learn about the community and reflect on any biases, assumptions, or privileges you have.

☐ Identify the community members, community partners, or working partners you wish to engage, and reach out as early as possible.

☐ Notify District Offices of Local Health touched by your effort and involve them as appropriate.

☐ Choose a method, place, date, and time of engagement that are culturally and linguistically appropriate.

☐ Review state ethics laws and ethical research guidelines and follow any applicable processes.

☐ Create an evaluation plan with the community or partners based on how they would measure or define success.

During:

☐ Get feedback from community leaders on your method, questions, and approach.

☐ Identify potential barriers, access needs, and make a plan to mitigate them to ensure equal opportunity for participation.

☐ Intentionally listen, give value to all voices and perspectives, and prioritize space for those impacted by injustices.

☐ Only make promises you can keep. Be honest and forthcoming about what you can do with the feedback you receive.

☐ Evaluate the effectiveness of your partnership or community engagement effort during the project and adjust as needed to structure, membership, and processes.

After:

☐ Gather feedback from the community or partners about how the project went and use their perspectives to inform your evaluation.

☐ Share the results and next steps with the community, partners, and other Health programs.

☐ Reflect on what can be improved for your future community engagement efforts.

☐ Stay connected in order to maintain a long-term relationship.

Worksheet: Identifying Community

The first step in state-led community engagement activities is to identify the community members or partners you wish to engage. A health issue or public health project can impact many different communities. Use this worksheet for each unique community.

- What is the specific project or health issue you are trying to address?

- Who may be impacted by this project?

- Who are your current partners?

    o   Do they reflect the communities you're trying to serve?

    o   Are they respected within the community?

    o   How effective is your existing partnership?

    o   What are their priorities, needs, interests, resources, and assets?

- Who else is engaged in addressing this health issue?

    o   Who are your potential new partners?

    o   Do they reflect the communities you're trying to serve?

    o   Are they respected within the community?

- Who interacts regularly with the community you are trying to reach?
- How will you ensure the community you are trying to reach is involved?
- What power or political structures could impact the community's willingness to participate? How will you actively address these power structures? What support do you need?
- What existing networks do you or other Health Department programs have that can be leveraged?

Resource: Policy and Budget Impact Assessment Tool, Office of Racial Equity

Relationship Challenges & Tools for Support

It can be tough to predict at the beginning of a partnership how it's going to go, even if you've carefully planned and used this guide to inform your process. Relationships with community organizations or members can be complex and navigating challenging relationships is far more nuanced than what can be offered in a guide. Here are some ideas that we hope will be supportive if you find yourself in this situation. We also encourage you to work with your supervisor and the Office of Health Equity Integration for support.

Set expectations.

- Often, we enter partnerships assuming we are all on the same page about what our roles and responsibilities are going to look like. That can set us up for failure because mismatched expectations can become wider divisions.

- Begin by co-creating a Community Engagement Partner Agreement, set of Meeting Agreements, or by sharing expectations. The Office of Health Equity Integration has a document on Creating Meeting Agreements on the HIVE. A Community Engagement Partner Agreement could outline roles and responsibilities, mutually agreed upon norms, and how conflict will be handled.

> Partner Agreements should also include when supervisors will be involved. When there are challenges in a partnership, both Health Department and Community staff should feel supported. Sometimes, staff may need support and coaching to do community engagement well.

Be consistent.

- Building trust takes time and consistency. You're not going to be able to "make" anyone trust you or the system when they've been shown the opposite. It's unfair and unrealistic.

- What you can do as an individual person is to show up and show that you are trustworthy. It will not make someone trust the Health Department as a whole. It will begin to build trust between two individuals.

- Show up with cultural humility and for collaboration. You can't just show up to further your own needs and goals.

Revisit Expectations.

- When things begin to feel off in the partnership, revisit expectations that were set in the beginning. If there were no expectations set, offer to discuss and set them now. This step can always be revisited and revised.

- Identify common goals and agree on how to work toward them.

Consider scripts.

- In some situations, it might be helpful to develop a short script to prepare what you want to say. By writing a "script" before a meeting, you are more likely to be able to deliver a calm response. Examples might include:
  - "When I hear you yelling at me, I feel discouraged. What I need is to feel mutual respect and like we are working in collaboration. I don't feel that way when I'm being yelled at. Would you like to take a break for few minutes?" (Nonviolent Communication framework)
  - "You can disagree with me without being mean or rude." (De-Polarizing Conversations)

Ask for Help.

- Work with your supervisor, the Office of Health Equity Integration, the Office of Racial Equity, or another Division at the Health Department that has a good relationship with the community you are trying to engage.

- Ask for feedback, work to understand it, and make changes where you are able.

- At times, it might be possible to shadow another Health Department Staff member as they do community engagement work. Every person brings their own style and experiences; you may be able to learn from how others do this work.

- If possible, is there someone else who could manage the relationship? Sometimes handing off the relationship to someone else might be what's best.

Some relationships will be challenging. It's important to remember that our role in public health is in service to the community.

Resources

- Seeds for Change has a short guide for Consensus Decision Making that outlines tips for participating in consensus decisions that may be helpful.

- The Alaska Humanities Forum hosts a guide on De-Polarizing Conversations, regardless of the topic. Importantly, these tools are for tackling conversations with people you are connected to and intend to stay in relationship with.

Closing

Not sure where to start?

- Connect with other Health Department programs who may have existing partnerships within the community you are trying to reach.

- Reach out to community-based organizations, nonprofits, racial and ethnic commissions, health systems, philanthropy, and businesses that serve diverse communities as part of their daily job or services.

- Choose an appropriate method, navigate technology options, and ensure your engagement effort is accessible.

- Explore new and non-traditional partnerships. Ideal partners may not always be other health-related agencies or organizations.

- Navigate efforts to rebuild trust with communities that have damaged relationships with the State of Vermont, including the Health Department and others.

Thank you for using the Vermont Department of Health, Health Equity Integration Community Engagement Guide, and for contributing to our agency's efforts to build meaningful relationships with the communities we serve and advancing health equity. The following references and appendices provide additional resources. If you need any other assistance, please contact the Office of Health Equity Integration at AHS.VDHOHEITeam@vermont.gov.

Community Engagement Continuum Resources
Methods to support each stage of the continuum

The following pages provide support for each of the stages listed in the Community Engagement Continuum on page 8. These pages can help you deepen your Community Engagement Practices in each stage.

Departure by Vermont Artist Amjed Jumaa

Methods to Inform

Town Halls, Community Meetings

Inform	
	Led by state State holds power
Purpose	Share information, listen for understanding, and clarify information
Communication Direction	One-way communication
Works to...	Address immediate needs or issues
Engagement Methods	• Town halls • Community meetings • Media, Social Media • Materials • Website • Newsletters • Press releases
Promise	We will keep you informed about our project.
When to use	There is no alternative because of urgency, regulatory reasons, or legal boundaries.

Starting Point

- Identify your primary audience and vision for the meeting or event.

- You will get the highest turnout if you host the meeting in a place where the community naturally and regularly meets on their own or combine it with an existing meeting.

- Set a clear agenda with a designated moderator and speakers.

- If appropriate, engage local media to help publicize your event.

Technology Options

- There are many virtual options that can be used to allow remote participation, feedback, and testimony. It is important to prioritize what community members find most accessible over platforms that are used by the state.

- Instead of the state hosting a community space, share power by working with a community partner to host a virtual event using their platform.

External Communications

Starting Point

- Begin by developing a communications plan with your Information Director and/or the Health Department's Communications Office.

- Identify communications channels that will best reach your primary audience.

- Ensure messages are tailored to your audience.

- Common channels include the web, social media, print materials, newsletters, press releases, TV, and radio.

Methods to Consult

	Consult
	Led by state State holds power
Purpose	Get and incorporate feedback
Communication Direction	One-way communication
Works to...	Inform the development of state programs
Engagement Methods	• Listening sessions • Focus groups • Interviews • Surveys • Working partner groups • Public comment • Workshops
Promise	We will listen to you and incorporate your feedback into our project
When to use	You want to improve an existing service or program but the options for change are limited.

Listening Sessions, Focus Groups

Starting Point

- Identify a trained facilitator and notetaker.

- Carefully plan how you will organize and recruit for the listening session(s). Bring individuals together with a common characteristic, and structure the conversation to ensure all participants are invited to share their honest opinions.

- Prepare your questions so you can benefit from group dialogue. Questions should be open and elicit group discussion.

- Recording the listening session may be beneficial for notetaking and facilitation purposes but should be carefully considered because it may inhibit participation from some people. Obtain informed consent from participants if you choose to record.

- Pay participants for their labor.

Technology Options

Host a virtual listening session. This can help improve accessibility for participants who live across Vermont.

Interviews

Starting Point

- Interviews let you explore a particular subject more in depth and allow you to learn something you might not get from a survey. They can also be used to build and strengthen partnerships.

- Carefully plan your interview script and approach. If you choose to conduct key impacted party interviews, identify community leaders who know their community and the specific health topic or issue well.

- Use as a starting point to help you plan other community engagement efforts. The insight and perspective you can gain from community leaders can help you plan more effective and culturally appropriate community meetings, listening sessions, and community mobilization efforts.

Technology Options

- Interviews are best done in a way that is safest and most comfortable for the person being interviewed. These can be held in person, over the phone, or with video conferencing tools.

Surveys

Starting Point

- Surveys can be used to collect information about attitudes, beliefs, opinions, needs, assets, and behaviors of the community you wish to engage.

- They are a quick way of getting information from a larger number of people and may be more convenient for the participant and lower cost.

- Surveys can gain informal community feedback about a specific project.

Technology Options

- Paper-based and mail surveys may be effective in specific circumstances. You can broaden your reach by using online or electronic surveys.

More Information

Conducting Surveys from Community Toolbox

Working Partners Groups

Starting Point

- Identify your working partners.

- Plan to engage working partner groups early in the pre-planning stages. This helps ensure transparency throughout your project.

- Conduct an impacted party analysis or partner mapping to understand concerns and interests.

Technology Options

- Virtual options allow working partners who live remotely to participate and stay engaged in ongoing project planning and meetings. Not everyone has access to virtual options so phone or in person options may be a better fit.

More Information

Identifying & Analyzing Stakeholders, Their Interests, Community Tool Box[4]

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[4] This link uses the "stakeholder" language we are working to unlearn. Please substitute as you review.

Methods to Involve

Involve	Led by state State holds power
Purpose	Ensure community needs and interests are considered
Communication Direction	Two-way communication
Works to...	Advance solutions to complex problems
Engagement Methods	• Audience and user testing • Advisory groups • Steering committees • Community conversations
Promise	We will ensure your concerns and needs are reflected in our project.
When to use	You need community perspective and buy-in to implement the project successfully.

Audience Testing, User Testing

Starting Point

• Audience and user testing can help ensure that messages and products you create are informed by your intended audience. Going back to individuals to try out the message or product – or user testing – can ensure that it makes sense to the people most impacted.

• The goal is to understand the knowledge, beliefs, attitudes, barriers, and cues to act of the people most impacted.

• Clearly define your primary audience and think about what you want them to know or do.

• Health promotion, behavior change, and communication theories can help you plan your testing.

• For user testing, choose a technique that fits your session goals and plan for any equipment needs.

• For both audience and user testing, make sure to pilot your questions and test ahead of time.

Technology Options

Can be done in-person, over the phone, over email, and through online platforms.

More Information

Tips for analyzing your audience, University of Pittsburg

Health Promotion and Disease Prevention Theory Models, Rural Health Information Hub

Health Literacy Online, Test your Site with Users with Limited Literacy Skills

Advisory Groups, Steering Committees

Starting Point

- Advisory groups and steering committees are ideal for bringing together community groups to inform and guide program decisions. Many groups meet on a quarterly basis to provide strategic direction, but some meet more frequently for more hands-on work. There are often existing groups or committees that you can engage with.

- Advisory groups and steering committees have different requirements. It is important to be aware of requirements of each, including open meeting and public records laws.

- Effectiveness depends on the structure that is put in place at the beginning. It includes thoughtfully planning and facilitating meetings and setting clear goals and expectations.

- Advisory groups or committees can be created to bring voices to the table who are often not well represented in decision-making, for example: youth, people with intellectual disabilities, and people who speak languages other than English.

- Plan a formal onboarding for your committee, council, or group members to ensure they have a similar foundation related to your project and health equity overall.

Technology Options

- Video conference options may increase participation in meetings.

More Information
Elevating Student Voices through a Youth Advisory Board from CDC

Community Conversations

Starting Point

- Build a team to determine the goals for the conversation and host the event. Your team should include community members to ensure their own goals, interests, and issues are well represented.

- Choose a facilitator that is experienced and can create a trusting environment with participants. Sometimes it is best to choose someone from within the community – such as a cultural broker or community health worker – and sometimes it is more appropriate to choose someone who is neutral and outside of the community.

- Create an inviting environment for dialogue, for example putting tables in a "U" form for in person conversation and using break-out rooms for virtual discussions.

Technology Options

- Some online platforms may be used to facilitate a virtual community conversation. You will need to plan carefully to ensure everyone has equal access to participate and that conversation can flow naturally.

More Information

Leading a community dialogue on building a healthy community from Community Toolbox

Methods to Collaborate

Collective Impact

Collaborate	
	Co-led Power is shared
Purpose	Partner and share decision-making power
Communication Direction	Two-way communication
Works to...	Advance solutions to complex problems
Engagement Methods	• Collective impact • Coalition building • Partnership building • Workgroups
Promise	We will work with you to plan this project.
When to use	Community members have a strong desire to participate, and you have the time to develop a partnership.

Starting Point

- A 'Collective Impact Model' uses a structured framework to bring organizations together to work toward a common goal.

- The five core conditions of the collective impact framework are:

    o Develop a common agenda, by collectively defining the problem and creating a shared vision to solve it.

    o Use shared measurement to track progress in the same way.

    o Build on mutually reinforcing activities, where all participants' different activities are integrated.

    o Engage in continuous communications to build trust and strengthen relationships.

    o Provide a backbone to move the work forward, by having a team dedicated to aligning and coordinating the work of the group.

Technology Options

- Collective Impact initiatives are best started by bringing people physically together in a shared space.

- Video conference may allow representatives who live remotely to participate and stay engaged in meetings they can't physically attend.

More Information

Tackling complex problems through collective impact [VIDEO], FSG

Evaluating Collective Impact: Five Simple Rules

Coalition Building

Starting Point

- Coalitions can be used to influence public policy, promote behavior change in communities, and build a healthy community.

- Coalitions include a core group of impacted parties, community opinion leaders, and policy makers.

- Some of the drivers for building coalitions include:

    o Responding to negative events in the community (e.g., increase in suicides).

    o Availability of new information becomes available (e.g., new research about a specific disease).

    o Circumstances or rules change (e.g., a new law).

    o New funding is available (e.g., a federal grant that requires a coalition).

    o A threat to the community (e.g., an important service might get cut).

Technology Options

- Coalitions are best started by bringing people together in a shared space.

- Video conferences may allow members who live remotely to participate and stay engaged in meetings they can't physically attend.

More Information

Coalition Building I: Starting a Coalition from Community Tool Box

Coalition Building II: Maintaining a Coalition from Community Tool Box

Developing Effective Coalitions: An Eight Step Guide from the Prevention Institute

Partnership Building

Starting Point

- Partnerships can be formal collaborations between two organizations, or can result in the formation of a committee, coalition, council or other group of partners with representatives from various organizations and therefore be more strategic in nature.

- Partnerships can also be informal agreements or collaborations that are short-term and project specific.

- Determine which partners and what type of partnership is appropriate for your specific project or problem you are trying to address.

Technology Options

- Technology can be used to assist with ongoing collaboration of existing partners.

More Information
Creating and maintaining partnerships, Community Tool Box

Methods to Share Power

	Share Power
	Led by community Community holds power
Purpose	Support and follow the community's lead
Communication Direction	Two-way communication
Works to...	Problems and solutions are defined by the community
Engagement Methods	• Attend community meetings • Serve on community-led advisory boards • Provide funding, data, & technical assistance • Develop testimony & policies
Promise	We will implement the project you come up with.
When to use	Community members want to own the project, and you are committed to a long-term relationship.

Community Immersion

Starting Point

• Support initiatives and projects that are important to the community, even if it is not a Health Department priority.

• Speak to your supervisor about which community events to prioritize in your work.

• Attend community events and gatherings with the intent of listening and learning.

• Consult with the community event leads to see if you are welcome; due to past harms, government is not always trusted in spaces.

Technology Options

• Some communities may prefer to come together online. Use relevant social media platforms to immerse yourself.

Community Mobilization

Starting Point

• Ensure you have strong leaders and provide them with the support they need.

• Establish a formal structure, which may include a steering committee and sub-committees. Ensure the six essential functions of community mobilization efforts are covered:

1. Providing overall strategic direction
2. Facilitating dialogue between partners
3. Managing data collection and analysis
4. Planning communications
5. Coordinating outreach
6. Fundraising

- Develop guiding documents such as organizational charts, rules of operation or bylaws, policy statements, and formal letters of agreement.

- Engage community partners who share priorities and interests. Consider partners who work in other health or social service organizations, business owners, policy makers, media representatives, faith leaders, and others who have significant influence in their community.

Technology Options

- Community mobilization efforts are best started by bringing people physically together in a shared space.

- To do so effectively in an online space is possible and takes a time investment. Working with a skilled online facilitator who has experience in online engagement can help you bridge the gap.

- Remember that effective engagement strategies for in-person events and for online events are very different. Good planning for hybrid audiences will include multiple methods of engagement tailored to each audience and ways to integrate the two.

More Information

Strategies Guided by Best Practice for Community Mobilization, Advocates for Youth

February 2023 Health Equity Integration Spotlight Session: Power Sharing Recording and Resources

Discussions By Us, For Us, About Us — Vermont Health Equity Initiative