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What does impactful community engagement in data/research mean to you?

As you settle in, please go here and respond to the question in a few words...



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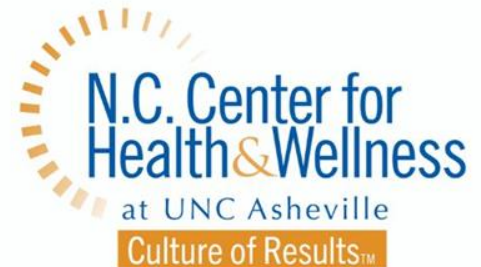


Impactful Community Engagement

Community-based Participatory Research and Action (CBPRA) Approaches

NC Public Health Data Summit ~ May 15, 2023 ~ 2:15 - 3:15

Presented by:
Emma Olson, MPH, MSW
Associate Director



Impactful Community Engagement

Desired Results:

Invite shared learning opportunities and discussion of our approaches

Because:

Cultivate this through relationships, respect for dignity and wisdom, trust building, deep listening and responsiveness

Agenda:

- Opening remarks and invitation
- Overview of work
- Lessons learned
- Impact
- Discussion

What impactful community engagement in data/research means to us...

meet folks where they are
more educated approach

open doors

validation

getting the word out
hopefully bring funding
connection

discovery

truth

clarification

bringing awareness

help those struggling

using what we learn
alcanzar mas personas

listening to community

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In a few words...

How do you impactfully engage communities through your data/research?



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...we will return to this.

Mission

Develop equitable opportunities that lead to healthy North Carolina communities

What We Do

Build capacity of community providers, strengthen policy, and ignite community initiatives into action.

How We Work

Provide training and technical assistance to various initiatives across the state to help assess opportunities, drive strategies, measure impact, improve over time, and effectively communicate results.



<https://ncchw.unca.edu/what-we-do/culture-of-results-initiative/>
<https://ncchw.unca.edu/what-we-do/collaborative-research/>

McDowell Partnership for Substance Awareness (MPSA) ~ 2019-Present

What We Do

MPSA is a collaborative and inclusive organization to apply training, expertise and lived experience to address substance use disorder.

How We Work

Provide training, coaching, planning and support to Community Researchers (CRs) to collect substance use related data through focus groups and surveys to inform programs and resources.

*In partnership with the NC Institute for Public Health and with generous support from *Kate B. Reynolds Charitable Trust (2019-now) and **Dogwood Health Trust for CR project (2022-2023)*



McDowell County, North Carolina



WNC Community Health Worker Initiative (WNC CHWs) ~ 2021-Present



How We Work:

Provide training, coaching, and help conduct a regional evaluation of CHW experiences and impact through interviews, focus groups, Smartsheet data, observations, and surveys to improve technical support and service systems of partnership and expand workforce.

Reports:

“Existimos para ellos/We exist for them” (2021)

“Community Health Workers provide comprehensive care and comprehensively care” (2022)



Community Research Team

*In partnership with MAHEC, ABIPA and with generous support from Dogwood Health Foundation***

How we work to impactfully engage communities through our data/research...

cede power

speaking with marginalized

las entrevistas

being nonjudgemental

being part of this group

working thru connections

educating myself anywhere

educate

democratizing research

sincerity

ensuring comfort

come in censo

being intentional

trustworthiness

grupos de enfoque

sharing knowledge

understand

truly partnering

getting the word out

help those struggling

hopefully bring funding

using what we learn

Key Aspects of our Approach

Experiences, Lessons Learned, Promising Practices

Cultivate common understanding.

Acknowledge historical harm.

Meet folks where they are.

Know “who is in the room.”

Build capacity, then get out of the way.

Expect a different kind of rigor.

Let go of neutrality.

Make data accessible and give it back.

Cultivate common understanding...
with customized trainings for community partners.

What is Research?

Research is the **systematic collection** and/or **analysis of information**, often with the purpose of answering a **question**.

Research often assumes that we can be “objective”- that there is a “truth” that we can “discover.”



Image Courtesy of Center for Reducing Health Disparities

Acknowledge historical harm of people like us and work to reduce it.

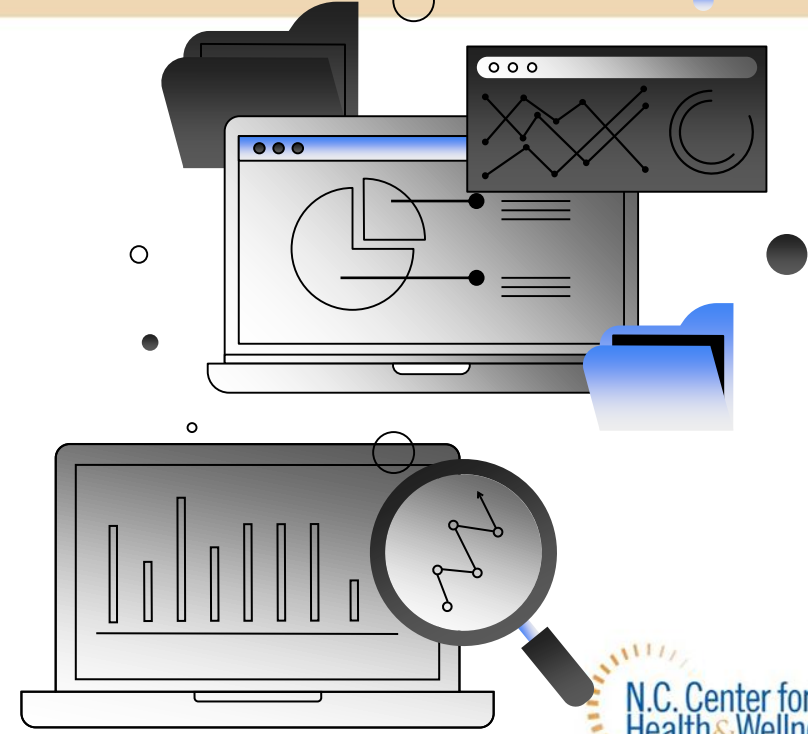
What is the History of Research?

The fields of scientific and social research are rooted in imperialism.

Imperialism refers to the **extension of power** or **influence** of one country **over** another and is characterized by mostly European countries establishing power and **extracting resources** in countries in the Global South.



Meet folks where they are, including your team, and know who is in the room.



Images from Slidesgo template

Build capacity then get out of the way.



Expect a different kind of rigor than you've been taught.

④ If more than once, how often have you seen the CHW?

POSSIBLE RECOMMENDATIONS

- Connecting to transportation services (liability issues of driving children w/out car seats)
- While acknowledging differences in the emotional support for the kinds of video they give (to visit or funding for paper) liability (caregivers, many) were clear on this
- (more strategically placed CHWs - more CHW PERIODS)
- Supports for self-care getting Balmbrines
- Ideally CHWs WOULD GO OUT IN 2S for SAFETY REASONS
- @LEAST STATES LOCATIONS
- Ideally work in multi-lingual, multi-racial OR GENDER BASIS
- CHWs should know the area, have personal connections (for safety too. Docs!)
- CES must be conversationalists, able to get people to open up from the opening, first treatment indication in voice.
- Connect CHWs to Social Bridging Project.
- Is there opportunity to more meaningfully utilize DEGRESS 360 (vs. Chantry tractor) can't not be services to refer to (ex: EVA, McDowell)

Themes / OBSERVATIONS

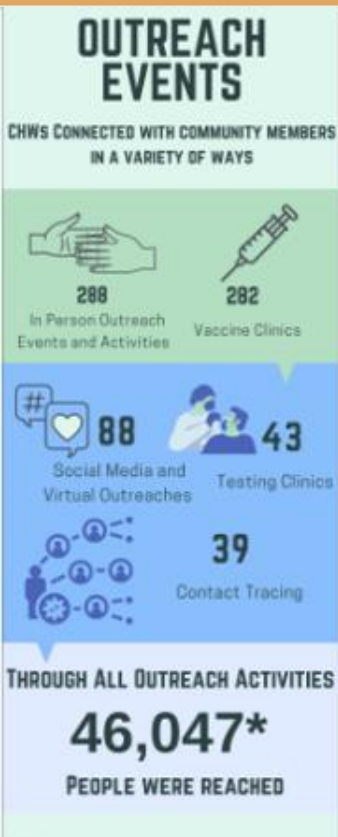
- The importance of relationships - CHWs connect to folks in need, have lived experiences of issues + services; applying community refers CHWs to each other
- Community Health workers were able to immediately or quickly connect w/ folks, stay connected, communicate frequently + being accessible even during unusual hours
- Concern about boundaries for CHWs, setting expectations that aren't sustainable
 - ↳ connects w/ focus group findings about how hard the work was + what it all took
 - ↳ community members observed how busy CHWs are in their the phone was going off w/ regularly.
- Some folks in need have a real dependence
- CHWs are overall good people, their presence makes folks feel better - emotional support across the board
 - ↳ more connection!
- Some CHWs may take a more holistic approach to health care all related to the experience of health during COVID pandemic while others may be very specifically related on COVID
- In need the CASE for sustainability, case by case
- CHWs became like a family member when folks don't have anyone.

TECHNICAL SKILLS / SKILLS OF SOME CHWS

- CES experienced ^{despite multiple attempts} ^{with the help of} CHWs experiencing their own challenges (ex: come broke down) family issues that affected how they could engage w/ the work.
- English Speakers shared more about SDOH services (housing, transportation), while Spanish Speakers focused more on clinical services (COVID - prevention + treatment)
- Some Latino CE believes this might be because of priority they are receiving these types of support and not talking about it
- Also observed that the CHWs that didn't speak English as well may have had real barriers reaching power can, community members
- Important when collecting data from Spanish Speakers as possible - (each interview in Spanish, team as possible, in various accents, w/ more challenge to understand those recordings)
- CES did an incredible job building trust w/ community members -> aware them to open up about complex challenges.
- How to characterize respondents -> many not from this area, facing different challenges (recovery, being white, etc.)

Lose your neutrality. Introduce partner bias intentionally.

If you believe in something show it and say it.



WNC Community Health Workers

Make data accessible.

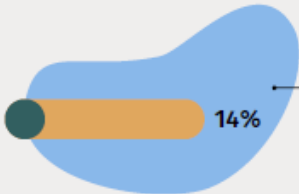
Give it back and send it forward.



COMMUNITY HEALTH WORKERS

2022 EVALUATION

A **community health worker** is a frontline public health worker who is a trusted member of and/or has an unusually close understanding of the community served. This trusting relationship enables the worker to serve as a liaison/link/intermediary between health/social services and the community to facilitate access to services and improve the quality and cultural competence of service delivery. A community health worker also builds individual and community capacity by increasing health knowledge and self-sufficiency through a range of activities, such as outreach, community education, informal counseling, social support, and advocacy.



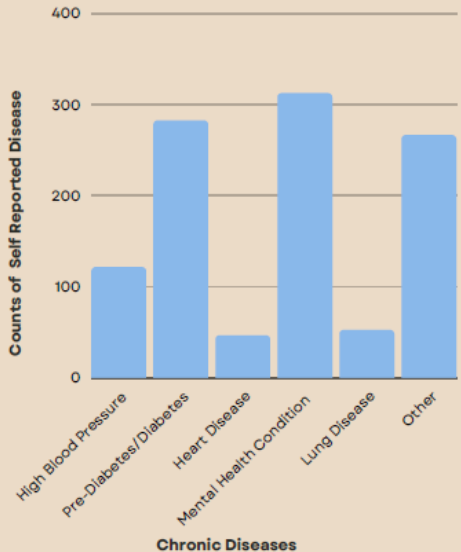
Chronic Disease

Of community members who were served by CHW's, **14%** reported living with a chronic condition. These include high blood pressure, pre-diabetes/diabetes, heart disease, mental health condition, lung disease, and others.

Population Demographics

There were **9,871** people served by the program. Income characteristics are as follows:

- **99%** at or below 200% poverty line
- **<1%** above 200% poverty line
- **<1%** did not disclose income



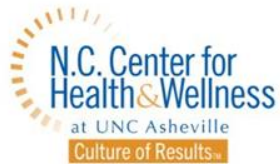
2022 Event Details

24,807

Community members attended events hosted by BeLOved Asheville's Community Health Workers.

178

Events were hosted by BeLOved Asheville's Community Health Workers.



“MPSA researchers are collecting very personal perceptions and experiences, not just facts. We are making connections through dialogue following established protocols, which give us credibility.”

*- Director of McDowell Partnership for
Substance Awareness*

Is anyone better off? Evaluating our impact

Give voice to those “hidden” or “abandoned.”

Validate experiences.

Promote and celebrate this work.

Improve job abilities and service and support systems.

Sustain people’s livelihoods and grow workforce.

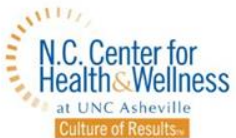
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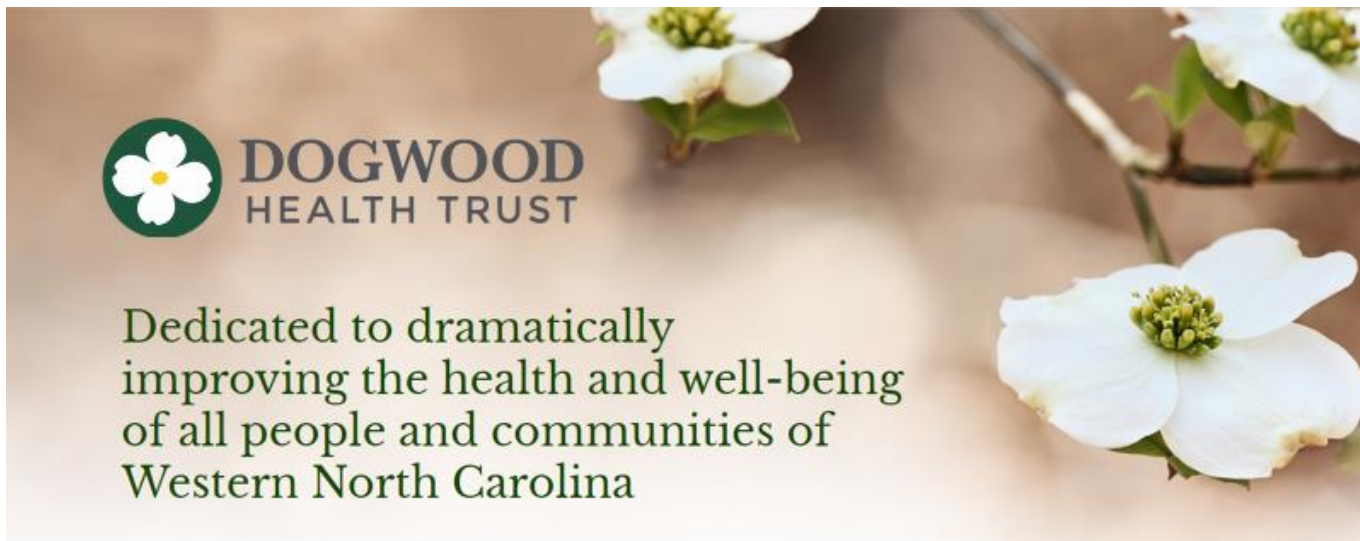
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Sustain people's livelihoods and grow the workforce.



Shifting from Covid-Focused to Chronic Disease Focused Community Health Work: A WNC Pilot

JéWana Grier-McEachin, Executive Director, Asheville-Buncombe Institute for Parity Achievement
Channah VanRegenmorter, Impact Officer, Dogwood Health Trust
Nelle Gregory, Program Director, MAHEC; Emma Olson, PhD; UNCA

And you never know...

Sample Recommendations for Improvement

(From Survey and Focus Group with CHWs 2021)

Safety: Providing mental health resources for CHWs

Training: Providing antiracism training for organizations that host CHWs and providing continuing education opportunities through trainings

Resources: Better coordinating across agencies in the region to provide resources and CHW services

Impact: Giving CHWs a public platform to speak about their experiences and the impact they have had during the pandemic to advocate for change

“We’re bringing awareness to the county officials and the community of the seriousness of substance use disorder (SUD) and hopefully bringing more funding to McDowell County with our research in efforts to help those that are struggling with SUD. Also, to help others understand this disease and educate people so the stigma is taken away and it’s talked about without the shame and condemnation that comes with it, so people can receive the help they need and have a sustainable recovery.”

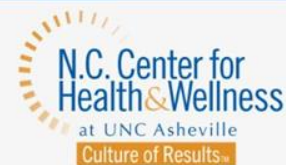
*- Coordinator of Partnership for
Substance Awareness Research Team*



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<https://ncchw.unca.edu/what-we-do/culture-of-results-initiative/>

A warm thank you from the Culture of Results Team.



Go to www.menti.com and use the code 2906 3375

Pull up and open discussion...

How do you impactfully engage communities through your data/research efforts?



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