# Engaging Communities to Address Health Inequities Roundtable on Obesity Solutions

Workshop

Kierra S. Barnett, PhD MPH
Research Scientist
Center for Child Health Equity and Outcomes Research



# **Disclosures**

I have no conflict of interest to disclose.

# **Outline**

- 1) Why engage the community?
- 2) Who do we engage?
- 3) How do we engage with the community?
  - Example from recent work



# Why engage the community?

Context matters

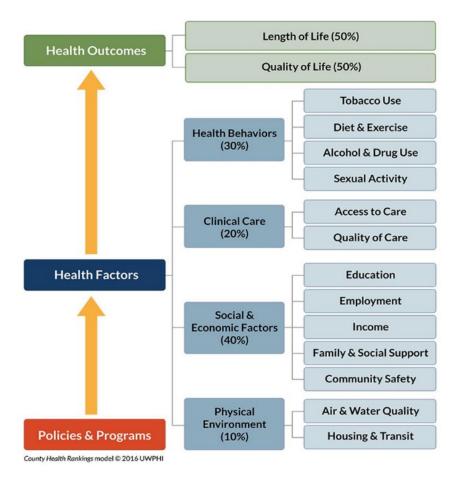
Improving our work

Increasing community buy-in



# **Context Matter!**

- Goal: Improve our understanding of the community
  - No "one-size-fits-all" solutions
- Valuing the expertise of those with lived experience





# Improving Our Work

- Refine our questions, measures, or potential solutions.
- Identify the assets within communities

Maternal and Child Health Journal (2021) 25:402–413 https://doi.org/10.1007/s10995-020-03074-3



Black Women's Perspectives on Structural Racism across the Reproductive Lifespan: A Conceptual Framework for Measurement Development

Brittany D. Chambers<sup>1,2</sup> · Helen A. Arega<sup>3</sup> · Silvia E. Arabia<sup>3</sup> · Brianne Taylor<sup>2</sup> · Robyn G. Barron<sup>4</sup> · Brandi Gates<sup>2,5</sup> · Loretta Scruggs-Leach<sup>5</sup> · Karen A. Scott<sup>3</sup> · Monica R. McLemore<sup>3</sup>

Accepted: 7 November 2020 / Published online: 4 January 2021

© Springer Science+Business Media, LLC, part of Springer Nature 2021



# **Increasing Community Buy-in**

- Goal: Building trust within the community
  - This requires authenticity

Engaging community increases their receptiveness of our work.

# Who do we engage?



Organizations/institutions



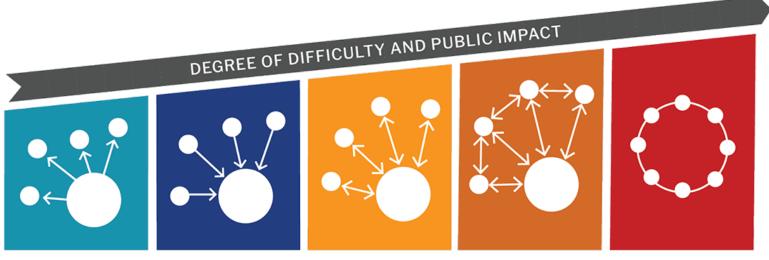
Stakeholders or champions in the community



Community members



# How do we engage the community?



### **INFORM**

provide balanced, objective info that the public should know and act on

### CONSULT

obtain and consider feedback or input on issues, ideas, and decisions

### **INVOLVE**

work with the public to understand the issues and problems and include in identifying options for moving forward

### **COLLABORATE**

partner with the public, seeking advice and innovations that become embedded as much as possible in decisions made

### **EMPOWER**

final decisions are made by the public and are one of the players implementing them

https://catalyst.harvard.edu/wp-content/uploads/2021/09/HCAT\_CEP\_CommunityEngagement-Accessibility.pdf



# **Example of Community Engagement**

 Goal: To understand the lived experiences of women of color to inform policy and strategic plan in Columbus

Advancing Maternal Health Equity – Original Research Article

WOMEN'S
HEALTH

"I just want us to be heard": A qualitative study of perinatal experiences among women of color Women's Health
Volume 18: 1–12
© The Author(s) 2022
Article reuse guidelines:
sagepub.com/journals-permissions
DOI: 10.1177/1745S057221123439
journals.sagepub.com/home/whe

Kierra S Barnett<sup>1</sup>, Ashley R Banks<sup>1</sup>, Tiffany Morton<sup>1</sup>, Christine Sander<sup>1</sup>, Maureen Stapleton<sup>2</sup> and Deena J Chisolm<sup>1</sup>

### Abstract

Objectives: Long-standing racial disparities, particularly between White and Black women, in maternal and birth outcomes necessitate an examination of the factors influencing these disparities. This study aimed to understand the experiences of women of color as they relate to pregnancy and/or birth complications to inform policy and strategy to decrease racial and ethnic health disparities.

Methods: Six focus groups were conducted with women (n=31) who were identified as a woman of color, were 18 years or older, self-identified as having experienced pregnancy or birth complications after 2016, and who spoke English. A focus group guide co-created with the research team, community partners, and peer researchers from the local community was utilized to elicit discussions related to barriers, successes, and existing opportunities to provide equitable care and services to families throughout the perinatal period. An inductive and iterative approach to qualitative analyses of the focus group transcripts was used to identify key themes.

Results: The seven themes identified include: lack of knowledge, mental health, communication with providers, support systems, representation, social determinants of health, and discrimination and stigma. Women shared a variety of experiences related to their health care from before pregnancy into their post-partum period, revealing many areas for improvement to extant systems.

Conclusion: The inclusion of voices of the populations most deeply affected by health disparities is crucial to understanding how care and services provided can be improved. This analysis suggests the need for change at multiple levels of the health care and social services systems. These experiences provide valuable insight into some of the many struggles and barriers that women of color face during pregnancy and beyond.



# Example of Community Engagement

# **Players:**

- Nationwide Children's Hospital
- CelebrateOne MCH focused city agency
- Design Impact community-centered design organization
- Peer researchers women with lived experience

Advancing Maternal Health Equity - Original Research Article



"I just want us to be heard": A qualitative study of perinatal experiences among women of color Women's Health
Volume 18: 1–12
Ø The Author(s) 2022
Article reuse guidelines:
asgepub.com/journals-permissions
DOI: 10.1177/17455057221123439
journals.asgepub.com/home/whe

Kierra S Barnett<sup>1</sup>, Ashley R Banks<sup>1</sup>, Tiffany Morton<sup>1</sup>, Christine Sander<sup>1</sup>, Maureen Stapleton<sup>2</sup> and Deena J Chisolm<sup>1</sup>

### Abstract

Objectives: Long-standing racial disparities, particularly between White and Black women, in maternal and birth outcomes necessitate an examination of the factors influencing these disparities. This study aimed to understand the experiences of women of color as they relate to pregnancy and/or birth complications to inform policy and strategy to decrease racial and ethnic health disparities.

Methods: Six focus groups were conducted with women (n=31) who were identified as a woman of color, were 18 years or older, self-identified as having experienced pregnancy or birth complications after 2016, and who spoke English. A focus group guide co-created with the research team, community partners, and peer researchers from the local community was utilized to elicit discussions related to barriers, successes, and existing opportunities to provide equitable care and services to families throughout the perinatal period. An inductive and iterative approach to qualitative analyses of the focus group transcripts was used to identify key themes.

Results: The seven themes identified include: lack of knowledge, mental health, communication with providers, support systems, representation, social determinants of health, and discrimination and stigma. Women shared a variety of experiences related to their health care from before pregnancy into their post-partum period, revealing many areas for improvement to extant systems.

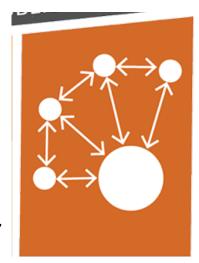
Conclusion: The inclusion of voices of the populations most deeply affected by health disparities is crucial to understanding how care and services provided can be improved. This analysis suggests the need for change at multiple levels of the health care and social services systems. These experiences provide valuable insight into some of the many struggles and barriers that women of color face during pregnancy and beyond.



# Example of Community Engagement

# What we did:

- Co-create a focus group guide to elicit experiences from community members
  - Peer researchers facilitated the focus groups
- Initial summaries were verified with peer research
- NCH research team completed the detailed analysis of the data.
- Results informed strategic plan for the city

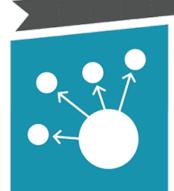


# COLLABORATE

partner with the public, seeking advice and innovations that become embedded as much as possible in decisions made



# DEGREE OF DIFFICULTY AND PUBLIC IMPACT



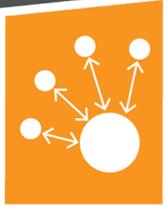
### INFORM provide bala

provide balanced, objective info that the public should know and act on



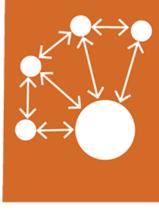
### **CONSULT**

obtain and consider feedback or input on issues, ideas, and decisions



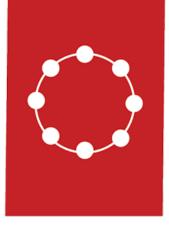
### INVOLVE

work with the public to understand the issues and problems and include in identifying options for moving forward



### **COLLABORATE**

partner with the public, seeking advice and innovations that become embedded as much as possible in decisions made



## **EMPOWER**

final decisions are made by the public and are one of the players implementing them

https://catalyst.harvard.edu/wp-content/uploads/2021/09/HCAT\_CEP\_CommunityEngagement-Accessibility.pdf



# **Thank You!**



# Kierra.Barnett@nationwidechildrens.org

