Engaging the Grassroots in Healthy Communities Initiatives

by Tom Wolff

One of the core principles of healthy communities coalitions and collaborations is the engagement of the community in the process. Indeed, many speak of it as one of the unique features of the healthy communities process that differentiates it from previous health care planning models. The concept of having those most affected by the problem engaged in the planning, implementation, and evaluation of the solution has been part of the critical call for action around healthy communities. Now it’s time not just to “talk the talk”, but to “walk the walk”.

Although we have seen much good intent in healthy communities initiatives, there has been less evidence of success in engaging the grassroots in healthy communities initiatives. So what’s the problem? In all honesty, we must say that coalition meetings, a critical place where people try to engage residents and citizens, are not especially consumer-friendly environments. They meet during the day when people are working, and they meet in formal spaces with formal people who often speak in funny acronyms. (One of our favorite techniques comes from a coalition that fines its members a quarter to be put in a can in the middle of the room every time someone uses an acronym). In addition, there is a continued nationwide decline of citizen participation in all aspects of life. As Robert Putnam has pointed out, more people bowl than vote.

We also wonder how serious many of the healthy community initiatives and community coalitions are about their commitment to engage grassroots residents in their coalition efforts. As we’ve talked and worked with coalitions all across the country, we’ve seen a number of solutions that do seem to work and we’ll outline four of those below. The common characteristics of all these techniques for engaging the community in healthy communities initiatives are that they involve the commitment of time, money and resources. If we are serious that involving the community is our top priority, then we need to put our money where our mouth is and we need to commit our resources to those efforts. That is, even before we begin to put money into community programs and newsletters, we need to put our resources into the following efforts so that we have the community at the table, right from the start.

Potential solutions for engaging the grassroots in healthy communities initiatives:

1. **Mini-grants.** As we highlighted in a previous tip sheet (Nov/Dec, 1994), mini-grants are small amounts of money ($200 - $1,000) offered to the community through a proposal process which encourages small grassroots groups to apply. They are extremely effective ways of creating new grassroots partners for coalitions. Since the amount of money is so small, it tends not to attract the larger agencies, but small school-based, church-based and community-based groups that are looking for a little bit of money to fund a project, a staff member or an event. Mini-grants are not miracles. In order to get grassroots groups to apply, vigorous outreach needs to occur in distributing the applications and assisting grassroots groups in filling out what need to be very user-friendly and simple applications. Once that happens and awards are made, ongoing technical assistance and partnerships need to be created. The end result is often wonderful programming within a community and new grassroots partnerships for the coalition. In one community, a coalition offered a training program on how to organize your neighborhood and when three people from a neighborhood joined the training program, they also automatically got a $500 mini-grant to initiate a program in their neighborhood.

2. **Citizen leadership development.** Often when we try to engage residents and the grassroots in our coalitions, we turn to the usual suspects, those residents who are the most visible and the most comfortable serving on community panels. We have learned from working in minority
communities that this often means that the same two or three visible African-American, Latino or Asian leaders are the ones chosen to be on every task force or committee in the city or town. But in order to be successful, citizen leadership development really means building the capacity for leadership in the community and bringing out new and emerging community leaders. One way to do that is for the coalition to make one of its first commitments be the creation of a citizen leadership development program that encourages ordinary citizens to come forward and learn how to become a community leader. There are numerous models for this, including the Master Teacher Program, (Nov/Dec, 1994) developed by Marge Slinsky, and available through Cooperative Extension Services across the country, the Right Question Project (Jan/Feb, 1993; Nov/Dec, 1995), which builds parents as evaluators, monitors and supporters of their child’s education, and numerous other such programs which are now emerging in every community and state. We have seen that when coalitions sponsor citizen leadership development programs, those who graduate from the programs become the army of citizen volunteers who staff the task forces and activities of the coalition.

3. **Community outreach workers.** Many years ago, we were taught by some very wise community leaders, not to label people we were having a hard time communicating with as the hard-to-reach, but rather the yet-to-be-reached. The implication in language is that hard-to-reach is our problem, not theirs. They’re sitting and available; we just haven’t found them and gone to them. It points out the need for coalitions and community programs in general to commit resources to community outreach workers who can be out in the community making the links to the citizens we’ve yet to reach. How often have we called a meeting for youth, elders, citizens, or neighborhoods for which people have not shown up and then we turn around and blame them for being apathetic? That label of apathy is just another form of blaming the victim. Often the problem is that outreach and communication efforts haven’t been engaging or meaningful to the community. When outreach is earnest and energetic, grassroots involvement in healthy communities initiatives increases vastly. The growing field of community health advocates is an example of the effectiveness of outreach workers in one field, health, but its application to all community issues is obvious.

4. **Organizing.** One of the traditional modes of engaging grassroots communities is to use one special form of outreach worker, an organizer, who helps the community identify its issues, target solutions and pursue those goals. Although organizing is often associated with confrontation, it has evolved over the last 20-30 years so that organizing can indeed be neighborhood problem-solving. Too often collaborative efforts back away from organizing for fear that the concept of organizing and potential confrontation are antithetical to the concept of collaboration. Our experience says that they are indeed excellent partners. Collaboration without an acknowledgment of power differentials and the need for occasional organizing becomes as ineffective as confrontational organizing that doesn’t acknowledge how much can be accomplished by community collaboration. Bringing an organizer into a community to help them identify an issue and to work on it together is an excellent way for healthy communities initiatives and collaboratives to build significant partnerships with those communities.

The above examples illustrate four ways of engaging the grassroots in healthy communities initiatives. We know that many of our readers will also have their own wonderful additions to these techniques for bringing the community into healthy communities initiatives so that our actions may match our words.

One in a series of coalition building tips.  
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