

# Community Engagement: From Health Care to Community Living

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# Presentation Objectives

- Describe a method to reduce barriers to accessing different environments called community engagement or CE
- Describe the CE implementation process and research study
- CE role play
- Describe new CE Project



# Acknowledgments

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- Do not represent the official position of NIDRR



# Community Engagement

The process of working collaboratively with groups of people who are by geographic proximity, special interests, or similar situations, on common issues affecting their well-being.



# Theoretical Foundation to CE

- Hahn's theory on the institutional creation of disability (social attitudes, environment, public policy)(Hahn, 1985)
- Social Model of Disability



# Theoretical Foundation

Individual

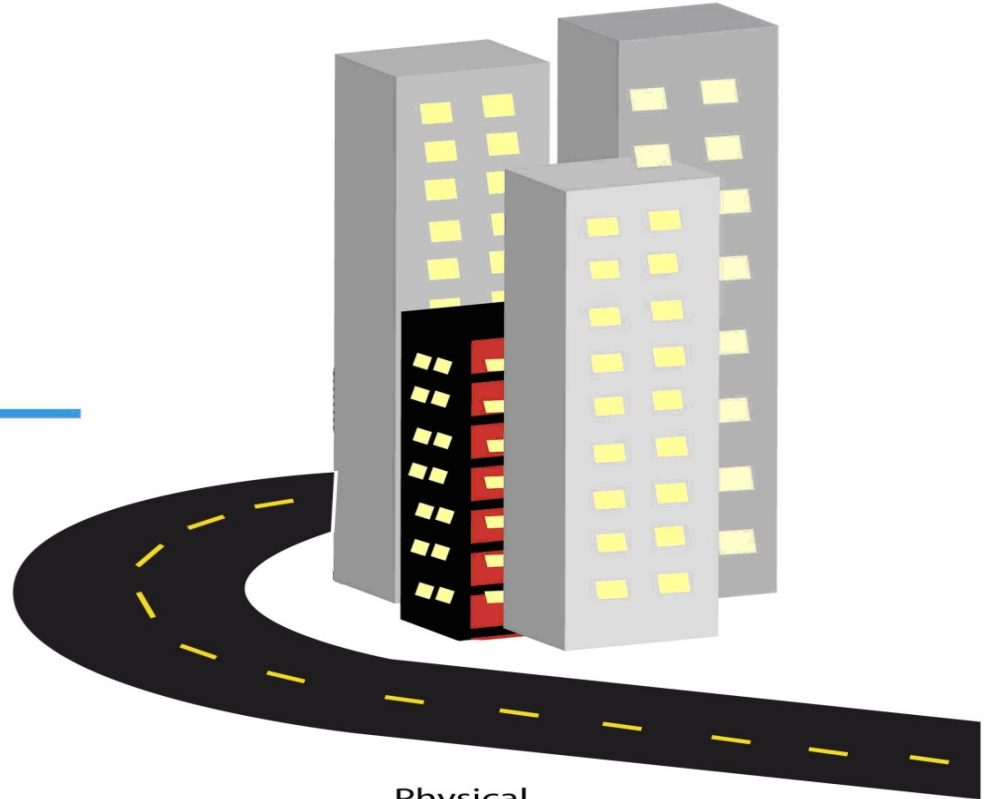
Disability

Environment



Person with  
Impairment or  
Condition

**Exclusion**  
**Oppression**  
**Neglect**  
**Stereotypical  
Imaging**  
**Stereotypes**



Physical  
Social  
Economic  
Political

Source: Drum, Krahn, & Bersani, 2009



Research and Training Center on Measurement and Interdependence in Community Living

# Purpose of Community Engagement

- Help PWDs and families identify local barriers and facilitators to accessing different environments; and
- Encourage local responses to the identified barriers



# Types of Barriers Addressed by CE

Access to:

Education, Employment, Health Care,  
Housing, Public Places, Recreation, and  
Transportation





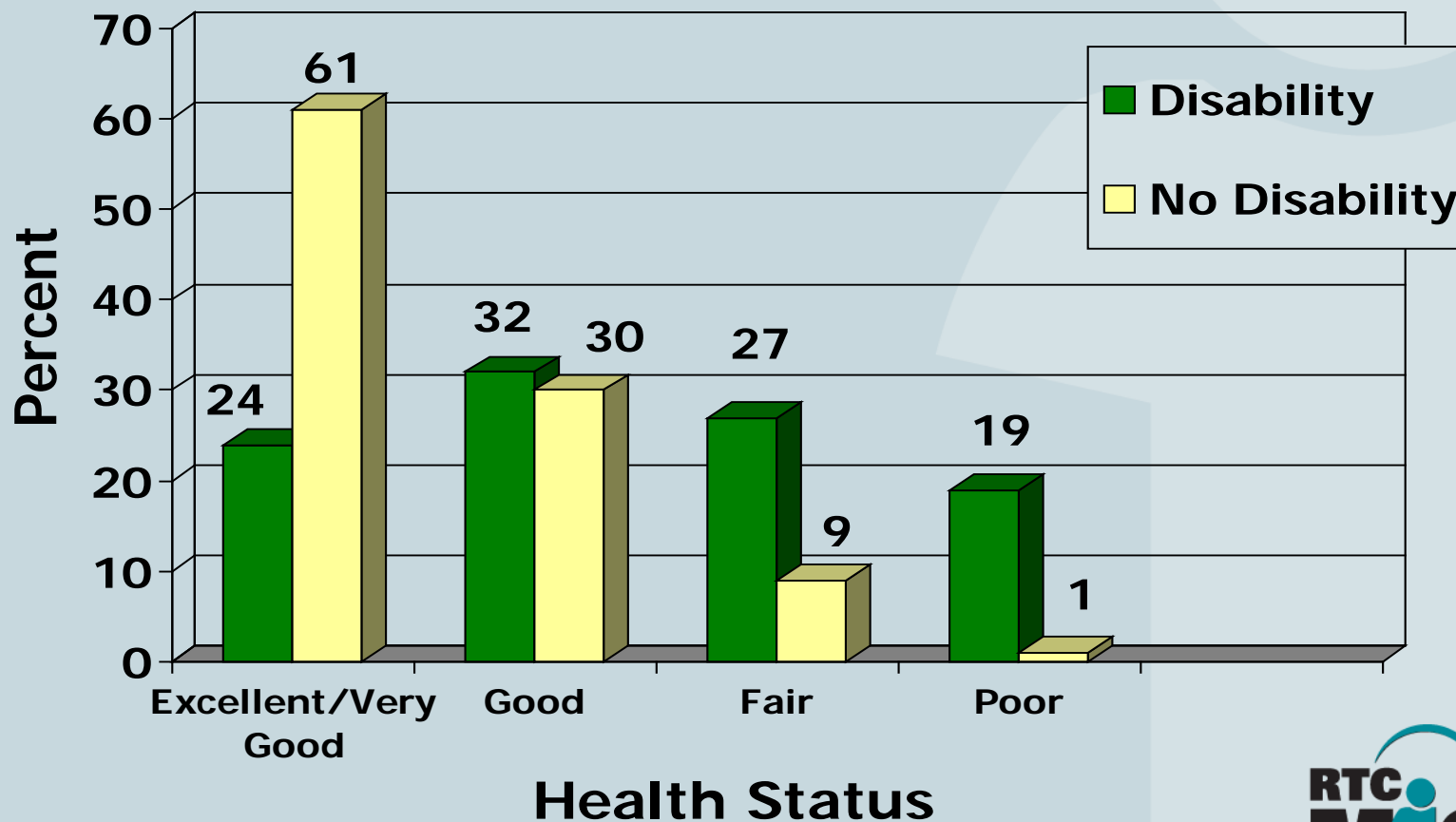
# Recent Implementation of Community Engagement

In the last five years, CE has focused on  
access to health care...

**Why?**



# Health Status of People With and Without Disabilities\*



# Providers Gather MORE Information On:



- Pain
- Depression
- Stress
- Work/hobbies

# Providers Gather LESS Information On:

- Smoking
- Blood pressure
- Cholesterol
- Mammograms
- Colorectal exams
- Sexual activity



# Other Risks

PWDs are more likely to:

- Smoke
- Be overweight or obese
- Have unmet health care needs

PWDs are less likely to:

- Get preventive services
- Engage in physical activity



# CE Methodology

- Step 1. Town Hall Meeting
- Step 2. Community Infrastructure Meeting
- Step 3. Resource Mobilization
- Step 4. Follow Up



# Step 1: CE Town Hall Meeting

Local Community Partner assists with:

- Recruitment
- Registration
- Co-Facilitation

People with Disabilities & families:

- Identify HC assets



# Step 1: CE Town Hall Meeting

People with disabilities and families:

- Identify HC barriers in:
  - Facility Access & Services
  - Communication & Attitudes
- Prioritize the barriers
- Discuss possible solutions
- ID representatives for next phase





# Step 2: Infrastructure Meeting

HC providers, local govt. & agencies, & Town Hall reps:

- Overview of disability
- Review assets identified during town hall meeting
- Validate / Modify barriers presented in power point



# Step 3: Resource Mobilization

Commitments are obtained from community representatives to address barriers:

- Facilitated discussion of potential solutions, including solutions identified during Town Hall meeting
- Community Infrastructure Workbook



# Step 4: Follow-Up

Changes in the community are documented:

- Local liaison designed to record decisions and steps taken to resolve access barriers
- OHSU serves as ongoing resource



# CE Evaluation Project

## Basic Study Purpose:

- To determine whether the use of community engagement techniques increases access to health care among people with disabilities
- Funded by the RTC MICL and NIDRR



# CE Research Design

- A multisite embedded case comparison of matched communities in Oregon, Missouri, and Kansas
- Embedded case studies are studies where different levels or sources of data are collected
- Pre- Post Data at the individual, environmental, and organizational level



# Research Measures

Community Participation and Perceived Receptivity Survey (CPPRS)-

Measures participation, accessibility, and perception of treatment

Disability Rights Attitude Scale (DRAS)-  
Assesses attitudes toward rights under the ADA



# Research Measures

## Outpatient Health Care Usability Profile (OHCUP)-

Measure the usability of specific healthcare facilities, based on the ADAAGs

- Action Logs - records of decisions and steps taken to resolve access barriers
- Case Reports







# Facility Access and Services

## Prioritized Barriers

- Built environment: 47%
- Accessible parking: 25%
- Signage: 10%
- Communication aids: 10%
- Access to provider: 7%
- Paperwork: 7%



# Transportation Prioritized Barriers

- Bus stops and routes: 52%
- Planning requirements: 16%
- Lack of awareness of options: 7%
- Cost: 11%



# Provider Attitudes & Communication Prioritized Barriers

- Quality of physician/provider care and communication: 45%
- Lack of disability awareness: 30%
- Poor customer service: 20%
- Lack of communication aids: 5%



# Corvallis- Prioritized Barriers

## **Transportation:**

- Dial-a-bus short staffed
- City bus service limited

## **Facility Access & Services:**

- Accessibility of hospital parking
- Hospital curb ramps
- Parking lot signage



# Corvallis - Prioritized Barriers

## **Provider Attitudes & Communication:**

- Lack of education among HC providers re disability issues
- Doctors who do not communicate with care providers or directly w/ PWDs
- Lack of quality MH services



# Progress to Date- Corvallis

- Hospital improved parking, more spaces, drop-off point, signage
- The para-transit bus system added 7 volunteers to address call volume
- 3 new bus routes added to increase access to hospital services



# Progress to Date- Corvallis

- The Arc of Benton County and OSU held a forum to discuss physical activity and recreation
- The Arc of Benton County has coordinated letter writing efforts to the editor of the local paper



# Progress to Date- Prioritized Barriers

- Corvallis: 7/9
- Pendleton: 6/9
- Newburg: 5/10
- Medford: 5/10





# CE Role Play- Now, it's your turn!

## Town Hall Meeting

- Your role: Town Hall meeting attendee
- HC Assets
- Barriers:
  - Transportation
  - Facility Access & Services
  - Communication & Attitudes



# The Future of CE

- CE Knowledge Translation Research Project
- Funded by the new RRTC on Community Living
- How much TA is needed to implement CE?
- 3 matched sites in Montana, Mississippi, and New Hampshire



# Questions?

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