



# Sharing Experiences and Collaborating to Expand Research Recruitment

An Interactive Workshop



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# What is your level of experience and comfort with the following topics:



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Very little

Community engagement

27

Very much

32



# Agenda

## 9am Introduction and Updates

- Ben Echaliier, *Assistant Vice Chancellor for Clinical Research Operations, Office of The Vice Chancellor for Research.*

## 9:05am Office of Diversity, Equity, Inclusion, & Community Engagement: Getting Started with DEI and Health Equity

- Jameel Mallory, *Director of Community Data & Strategic Initiatives, Office of Diversity, Inclusion and Community Engagement.*

## 9:25: CCTSI Community Engagement: Forming a Common Language

- Montelle Taméz, *Deputy Director, Community Engagement and Health Equity, University of Colorado Clinical and Translational Sciences Institute (CCTSI).*
- Don Nease, *Director of Community Engagement & Health Equity, Colorado Clinical & Translational Sciences Institute.*

## 9:40am: Q&A

- Kiley Vander Wyst, *Program Director, Clinical Trial Operations.*



# Office of Diversity, Equity, Inclusion & Community Engagement



**Jameel Mallory**  
**Director of Community Data**  
**&**  
**Strategic Initiatives**



Office of Diversity, Equity, Inclusion  
and Community Engagement

UNIVERSITY OF COLORADO ANSCHUTZ MEDICAL CAMPUS

# PROACTIVE vs. PERFORMATIVE

DEI and Health Equity starts from within

## **Take inventory and assess your DEI readiness**

- What are we currently doing to incorporate DEI into our daily work?
- Are we participating in DEI trainings and education opportunities?
- Are we working to diversify our research staff?
- Are we collaborating with other units or research teams to learn about innovative approaches?

## **Develop a DEI Strategy**

- Create a DEI Committee that includes members of leadership (PI's, Directors, etc.)
- Create an internal Mission and Vision statement
- Take assessments and identify challenges: S.W.O.T analysis

## **Take Action**

- Commit to participating in DEI trainings and education sessions
- Commit to making improvements in 1-2 core areas per year (Don't try to boil the ocean)
- Set timelines and monitor/track your progress
- Develop relationships with thought partners outside of your team/unit

# ODEICE Programs and Services

## **DEI Education and Training**

Health Equity in Action Lab (HEAL)

## **Diversify the Research Workforce**

Search Advocate Program

## **Career Exploration & Science Exposure**

## **LGBTQ+ Hub**

Training and Education

## **Educational Outreach & Pathway Initiatives**

CU Pre-health Scholars (CUPS)

Undergraduate Pre-health Professionals (UPP)

## **Community Engagement**

Resident Leadership Council (RLC)

El Alba Cooperative

Supplier Diversity

Aurora Wellness Community

Our office works to provide centralized support and DEI resources to the Anschutz campus

# Health Equity in Action Lab (HEAL)

HEAL offers an array of trainings on DEI and health equity topics, workshops, retreat facilitation, and consultations by request.

**Request a Training, Consultation or Speaker**



**HEAL TRAININGS**

Home > News, Events and Learning Opportunities > HEAL Trainings and Work

Our office houses the **Health Equity in Action Lab (HEAL)**. HEAL fosters active practice. In 2022 they launched a [Foundations in Equity Certificate Program](#) that builds community capacity through a train-the-trainer program—faculty and staff are [currently open!](#) In addition, HEAL offers an array of trainings on DEI and health equity topics. HEAL also collaborates with an interprofessional work group on the Inclusive Syllabus Project among all of our community members.

**Request a Training, Consultation or Speaker.** We ask that you make your request and it will be evaluated and appropriately responded to based on staff availability.

**Request now** [↗](#)

**Current Trainings and Workshops**

**Foundations in Equity Certificate Program**

# Diversify the Research Workforce

As outlined within the goals of our University's Affirmative Action Plan, this Search Advocate Resource Toolkit embodies our commitment to recruiting, hiring, and retaining diverse faculty and staff.

## Search Advocate Toolkit



**SEARCH ADVOCACY RESOURCE TOOLKIT**



# LGBTQ+ HUB

Our mission is to create and maintain an inclusive campus environment for LGBTQ+ and allied students, faculty, staff, patients and visitors on campus and within the Aurora community

Connect with the HUB



and Community Engagement

News, Events and Learning Opportunities ▾

Resources ▾

About Us ▾



LGBTQ+ HUB

# Community Engagement

The Resident Leadership Council (RLC) is a group of community leaders dedicated to improving the quality of life of residents in Aurora and the surrounding neighborhoods by promoting equitable access to education, health, and economic opportunities.

## Resident Leadership Council



# Connect & Engage with ODEICE

**Main Office Email**

[odeice@cuanschutz.edu](mailto:odeice@cuanschutz.edu)

**Jameel Mallory**

[Jameel.mallory@cuanschutz.edu](mailto:Jameel.mallory@cuanschutz.edu)

**Schedule a DEI Strategy Consultation**





University of Colorado **Anschutz Medical Campus**

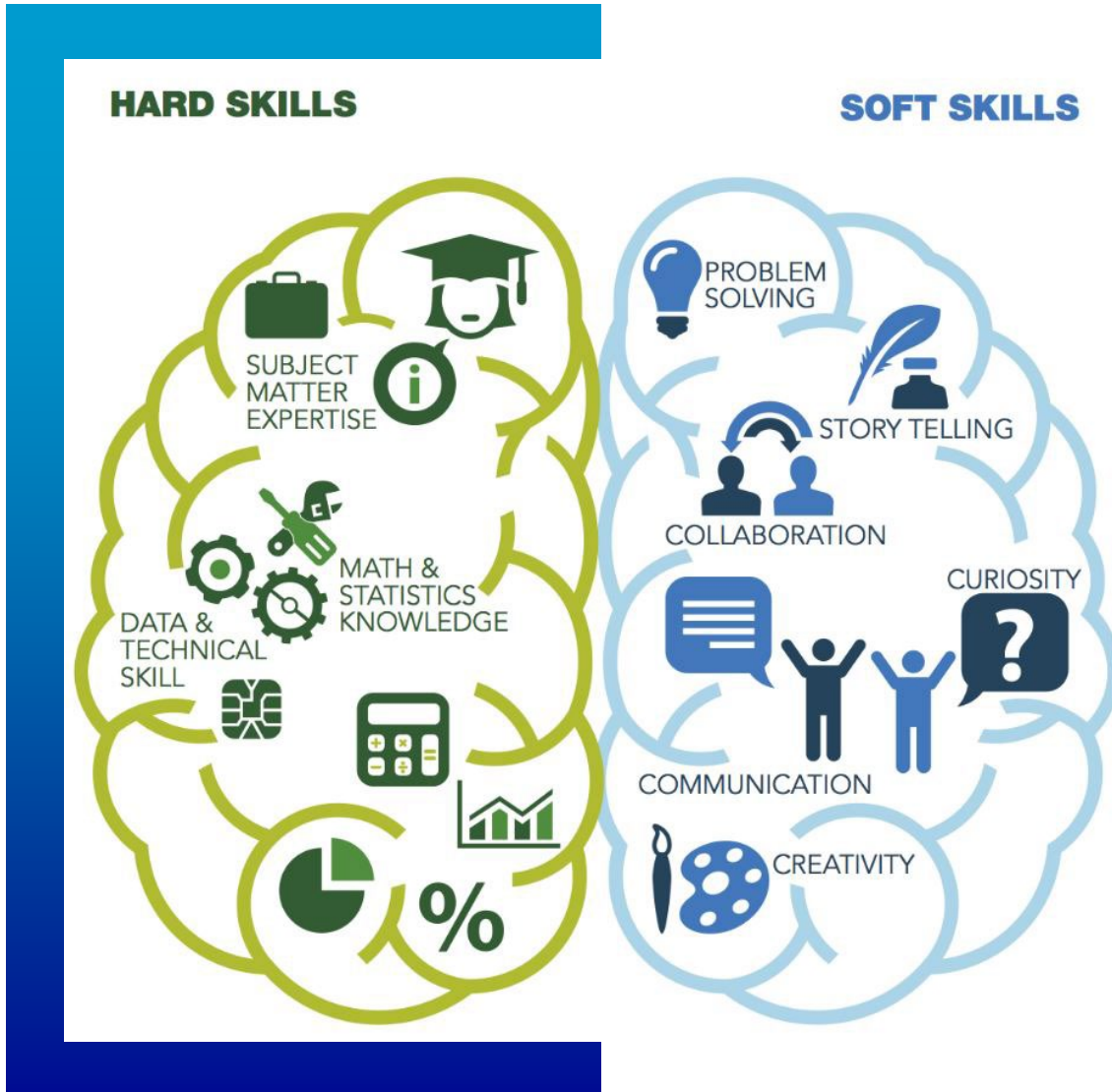
**THANK YOU**



## Community Engagement

*...the process of working collaboratively with and through groups of people affiliated by geographic proximity, special interest, or similar situations to address issues affecting the wellbeing of those people.*

# Community engagement is a blend of *science* and *art*.

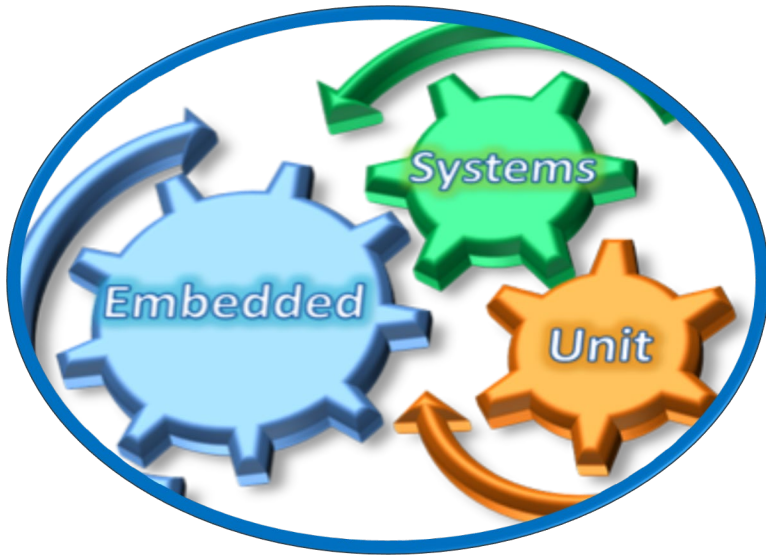


The *science* comes from **sociology, political science, cultural anthropology, organizational development, psychology, social work**, and other disciplines, and organizing concepts are drawn from the literature on **community participation, community mobilization, constituency building, community psychology**, and cultural influences.

“The *art* comes from the **understanding, skill and sensitivity used to apply and adapt the science** in ways that fit the community of interest and the purposes of specific engagement efforts.”

Principles of Community Engagement, 2<sup>nd</sup> Edition (xvi-xvii)

# How do we define *Community*?



## Systems Perspective...

Community comprises different parts that represent specialized functions, activities, or interests, each operating within specific boundaries to meet community needs.



## Social Perspective

Community can also be defined by the social and political networks that link individuals, community organizations, and leaders.



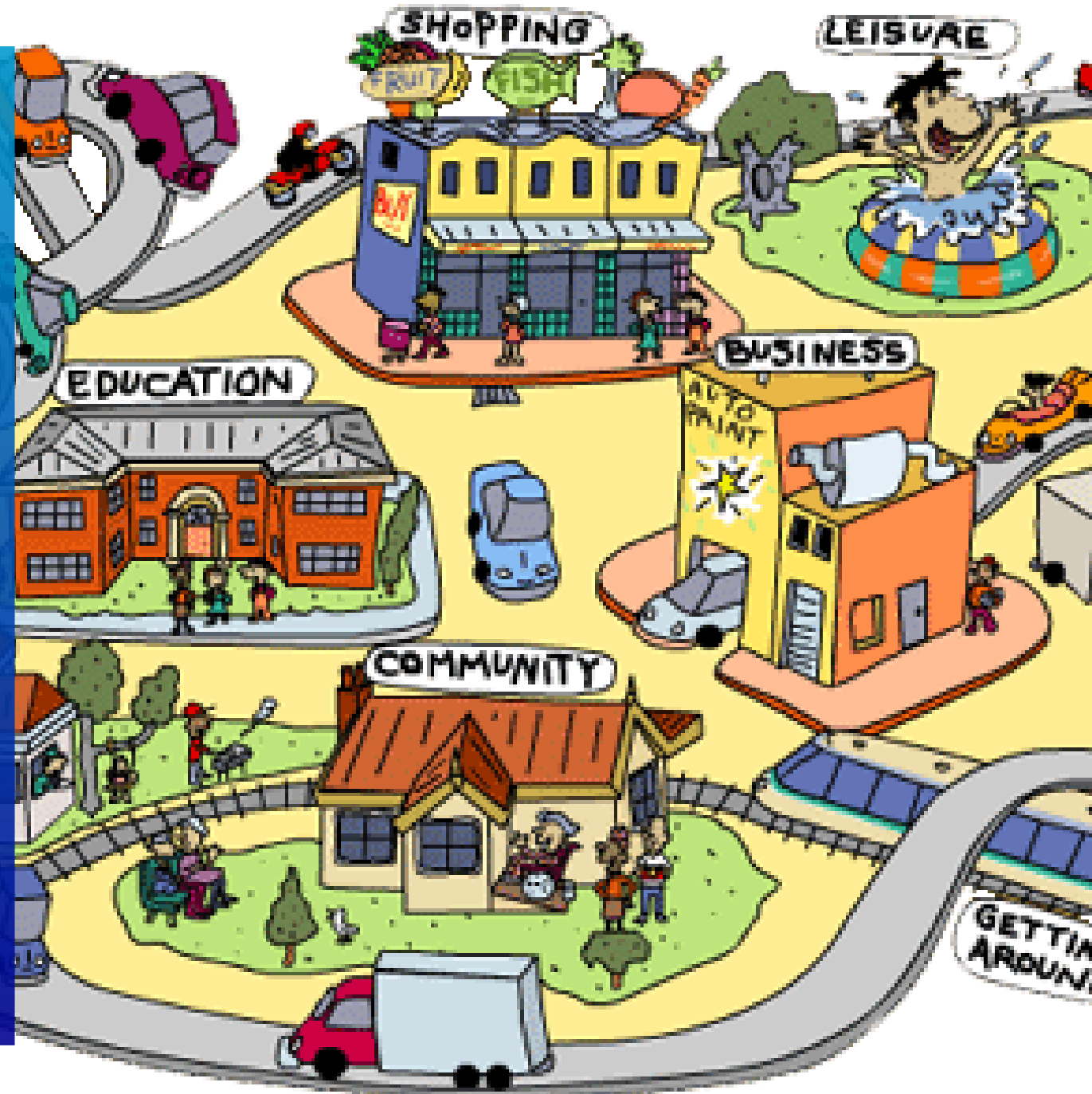
## Individual Perspective

There are multiple communities that might be relevant for any individual — including families, workplace and religious associations.

# Defining “Community” in participatory health and research efforts

Sometimes, defining “community” is more about the process of asking questions than about a strict definition of who “is” community or “represents” community:

- Are those most affected by the problem at the table?
- Are those who have a stake in the issue being addressed at the table?
- Do they play decision making roles?





# Community Outreach

- \* Relationships are transactional and short-term often for the purposes of completing a project.
- \* Community members are engaged to accomplish a goal and/or seek approval or buy-in.
- \* Outreach activities include: canvassing with flyers, surveys, focus groups, workshops – often after a project has been planned.
- \* Staff or institutions generate ideas and solutions.
- \* Organizational structures are focused on obtaining specific pre-prescribed outcomes, there are few or no community members on the board or staff, racism and power are dealt with superficially, there are deeply rooted organization policies and structures that reflect the dominant culture.

# Community Engagement

- \* Rooted in long-term relationships.
- \* Creates a space for community members to connect, raise concerns, build power, act in their own interest, and recognize and build upon existing assets.
- \* Engagement activities include listening sessions, one-to-one meetings, celebrations, leadership development, community building projects planned and implemented with the community from the beginning.
- \* Community generates ideas and solutions.
- \* Organizational structures are focused on emergent and long-term outcomes, community members are active participants as staff and board members, racism and power are understood and dismantled on a daily basis and the organizational culture is designed to create space for difference and to respond to community needs and ideas.

# Community Engagement Continuum

Increasing Level of Community Involvement, Impact, Trust, and Communication Flow 

<i>Outreach</i>	<i>Consult</i>	<i>Involve</i>	<i>Collaborate</i>	<i>Shared Leadership</i>
<p><i>Some Community Involvement</i></p> <p><i>Communication flows from one to the other, to inform</i></p> <p>Provides community with information.</p> <p>Entities coexist.</p> <p>Outcomes: Optimally, establishes communication channels and channels for outreach.</p>	<p><i>More Community Involvement</i></p> <p><i>Communication flows to the community and then back, answer seeking</i></p> <p>Gets information or feedback from the community.</p> <p>Entities share information.</p> <p>Outcomes: Develops connections.</p>	<p><i>Better Community Involvement</i></p> <p><i>Communication flows both ways, participatory form of communication</i></p> <p>Involves more participation with community on issues.</p> <p>Entities cooperate with each other.</p> <p>Outcomes: Visibility of partnership established with increased cooperation.</p>	<p><i>Community Involvement</i></p> <p><i>Communication flow is bidirectional</i></p> <p>Forms partnerships with community on each aspect of project from development to solution.</p> <p>Entities form bidirectional communication channels.</p> <p>Outcomes: Partnership building, trust building.</p>	<p><i>Strong Bidirectional Relationship</i></p> <p>Final decision making is at community level.</p> <p>Entities have formed strong partnership structures.</p> <p>Outcomes: Broader health outcomes affecting broader community. Strong bidirectional trust built.</p>

Reference: Modified by the authors from the International Association for Public Participation.

<https://www.atsdr.cdc.gov/communityengagement>

# Principles of Community Engagement



# Community Engagement Principles

1. Be clear about the purposes or goals of the engagement effort and the populations and/or communities you want to engage.
2. Become knowledgeable about the community's culture, economic conditions, social networks, political and power structures, norms and values, demographic trends, history, and experience with efforts by outside groups to engage it in various programs. Learn about the community's perceptions of those initiating the engagement activities.
3. Go to the community, establish relationships, build trust, work with the formal and informal leadership, and seek commitment from community organizations and leaders to create processes for mobilizing the community.
4. Remember and accept that collective self-determination is the responsibility and right of all people in a community. No external entity should assume it can bestow on a community the power to act in its own self-interest.
5. Partnering with the community is necessary to create change and improve health.
6. All aspects of community engagement must recognize and respect the diversity of the community. Awareness of the various cultures of a community and other factors affecting diversity must be paramount in planning, designing, and implementing approaches to engaging a community.
7. Community engagement can only be sustained by identifying and mobilizing community assets and strengths and by developing the community's capacity and resources to make decisions and take action.
8. Organizations that wish to engage a community as well as individuals seeking to effect change must be prepared to release control of actions or interventions to the community and be flexible enough to meet its changing needs.
9. Community collaboration requires long-term commitment by the engaging organization and its partners.

[https://www.atsdr.cdc.gov/communityengagement/pdf/PCE\\_Report\\_508\\_FINAL.pdf](https://www.atsdr.cdc.gov/communityengagement/pdf/PCE_Report_508_FINAL.pdf)  
[https://www.atsdr.cdc.gov/communityengagement/pdf/PCE\\_Report\\_508\\_FINAL.pdf](https://www.atsdr.cdc.gov/communityengagement/pdf/PCE_Report_508_FINAL.pdf)

# Developing Partnerships





# Developing partnerships with a diverse membership: importance and challenges

- \* Maintain a diverse group of partners, including those who are directly affected by the topic(s) of the intervention or study.
- \* Consider organizational membership, rather than individuals.
- \* Start with a small number of diverse partner organizations.
- \* Consider who represents “the community”? No one organization can represent the community; no one person can represent a specific subpopulation.
- \* Recognize that partners can wear multiple hats and serve in multiple roles and frequently have multiple community, as well as family, commitments.

# Culture and Community Engagement

Why cultural competency is NOT enough

01.

Focus on **shared meanings and constructs** yields a richer cultural understanding that is **rooted in real lives, not stereotypes.**

02.

This **meaning-centered approach** can help us better understand **root causes** of health issues and avoid **reproducing repressive patterns within our partnerships.**



# Building the partnership

## Creating the Glue

*So what, exactly, is “glue”?*

“The adhesive substance of a partnership that promotes and sustains trust, communication, connectedness, and meaningful work efforts and products. Glue ranges from building sweat equity to establishing credibility, to being able to translate and navigate between the community and academic realms. Glue resonates in the process, infrastructure, policies and procedures that honor open communication, fairness, trust, and meaningful planning processes that ensure each partner is respected and heard. “

~ Developing and Sustaining Community-Based Participatory Research Partnerships: A Skill-Building Curriculum. 2006.



# How do you create the “glue”?

- “Glue” for partnerships can include policies, procedures and processes aimed at strengthening the partnership. These should be developed collaboratively.
- In some instances the Principal Investigators or partnership staff may take the lead in drafting the policies, and then present them as a draft version to the partners. These drafts should be open for revision.
- In other partnerships, the community and academic partners may develop policies together during meetings and retreats.
- Partnerships should allow for the degree of collaboration that makes the most sense given the interests and availability of the different partners.
- Guidelines and policies should be revised periodically, especially when new situations arise or new partners join the group.



# Q&A

***Kiley Vander Wyst, Program Director, Clinical Trials Operations, Clinical Research Operations and Services***



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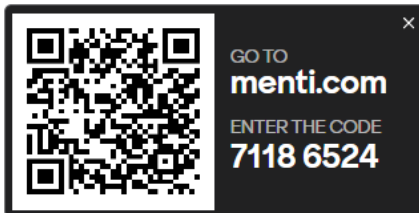
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Based on the discussion today, what is one area that you would like more information or training on?

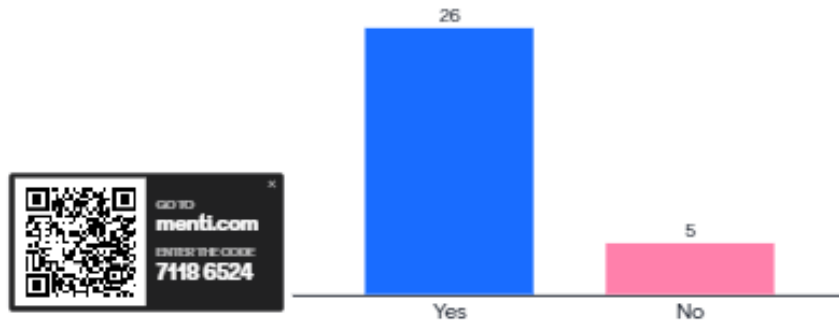
Waiting for responses ...



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Mentimeter

If there was a DEI or community specific training workshop, would you/your team be interested in participating?



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