

Reaching People with Disabilities through Healthy Communities

Phase Three - Prioritization and Planning

Using Community Assessment for Prioritization

[Karma Harris] Now we're going to dive into our discussion on Phase Three, Prioritization and Planning, and three really important activities that take place in this phase and each is sequential. So, to accomplish the next one, you have to do the first one, and to accomplish the third one, you've got to do the second one. The first activity involves reviewing the community assessment results and prioritizing the focus areas on those results.

And in our example with this project, the CHII, the Community Health Inclusion Index, was the community assessment that we chose for this project and the CHII provided communities with an overview of local assets and gaps, and their CHII data really helped the Community Coaches and the coalition be able to better identify inclusive areas of healthy living that needed to be addressed, so that everyone — and regardless of the presence of a disability or not — could have the same access to healthy living strategies.

And so, by reviewing the data — it really helped ensure that the Community Coaches, who were leading those with their coalitions on the local level — and really use the data to drive the priorities that they choose to focus on. And you can ensure then that it aligns with the current needs. And so, this is one way of making sure that priorities are really kind of used for real time direction and changing the community landscape of healthy living.

And so, Meg, thinking sort of about all of this and thinking just about this data review, the CHII result, at this time, talk to us a little bit about what that data review process was like for your two communities.

[Dr. Meg Traci] So we had in Montana some familiarity with the CHII and using that tool and a landscape of tools that sits within our Centers for Independent Living, again through that accessibility ambassadors project, and have used a variety of different tools for identifying priorities in the community that could be improved from the perspective of people who live with disabilities.

And so from our group it was really important to have the people who would be conducting the CHII have expertise in the Americans with Disabilities Act (ADA), so that when we were engaging partners at the community level — there are questions on the CHII that are fairly general about accessibility and we knew they would start conversations with facility administrators — that we really wanted people who could clarify what is required under the ADA with those partners.

So, we were engaging with kind of an agenda of conversation, using the CHII, about what the facility or the program had to offer. And we knew that conversation just in conducting those assessments would raise questions about, well, what is required under the ADA. For example, in signage on the elevator, or in terms of our route of entrance to our building, or in terms of bathroom accessibility. And we wanted the people during the assessments to have very strong expertise to answer those questions, or to plan a time to come back and do more detail ADA-type assessments, but the CHII, in and of itself, was to create a lot of information for a broad Healthy Communities Coalition or planning group to consider.

And we in Butte, we had our ADA Ambassador there (accessibility ambassador) — went out and reviewed the YMCA, the building that houses the Developmental Disabilities Council, a family planning clinic, high school that was private, a pharmacy, one of our larger employers — Northwestern Energy, public high school, community gardens, farmer's market, the local college — Montana Tech. And so through those assessments we were able to kind of say generally how we've got a lot of great things to connect to and a lot of those facilities, those programs, are basically accessible.

Yes, there are probably some things under the ADA that could be improved, and, but through accommodations probably an individual can be included. We always want to see those facilities as accessible as they can be. But the larger issue that emerged in Butte was that transit rated availability rate is 60 percent, or less than. In less than 92 percent of the sites and some of the crossings, the intersections, people getting to those facilities were problematic, as well.

So we really started to think about one of the quotes from a team member who was complaining, that she said, “the facilities are really doing pretty well at being inclusive and want to include people with disabilities, but I'd be amazed if anyone can get to them.” So, we really started to focus in Butte on connectivity. It also engaged and activated a lot of partners to think about organizing at a community-level around projects like transportation and connectivity and that, that, was really good.

In Helena, we had some other types of groups that were part of our CHII. We looked at the Center for Mental Health, Exploration Works (which is like a children's museum), and then there's a campus for the University of Montana called Helena College, again the YMCA in Helena, there's that Community Food Bank (Helena Food Share), a clinic imaging center, a public health department — which is really important to see how people are connecting there and there is still work that goes on around that - natural grocers, our community health center, an elementary school, parks and recreation.

All of these groups were part of conducting CHII and bringing those data to the Healthy Communities Coalition. And, again, the overall impression was that we have a lot of goodwill for any of these programs or facilities to be accessible and inclusive. And many assets in that regard supported that, but it was connecting; how can people get there using active transportation? Biking, walking, public transportation that was accessible to them?

[Karma Harris] Yeah I think one of the things when we do a community health assessment of any kind and then we involve our partners in that process, and also in the review of what the assessment data tells us, is that it gives us another opportunity to further educate the partners involved in the project. And a lot of times what we find is that that actually leads to more partner buy-in and being part of the rest of the project activities. And I think that I saw that across the board with this project. I definitely can see that with our two Montana communities, as well.