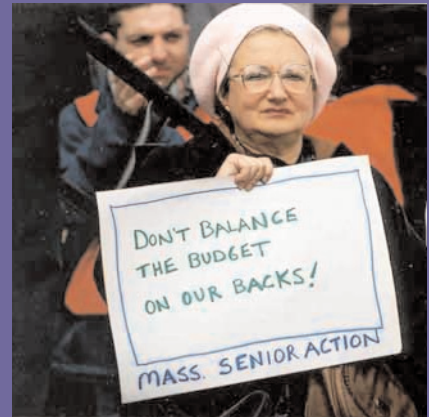


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Community Health Leaders *Manual & Curriculum*



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INTRODUCTION and BACKGROUND

What is the Community Health Leaders

Overview

The Community Health Leaders (CHL) is a grassroots leadership development curriculum that demystifies the health and health care system and promotes leadership skills among community members. The Community Health Leaders Curriculum was originally developed by a number of people working on the “Boston at Risk” project in 1994 in Boston, Massachusetts. It was created as part of the effort to initiate a citywide dialogue about how health care was delivered in the Boston area, and how health status could be improved by making particular changes to the health care system. A key component of the “Boston at Risk 2000” project was to bring together people from diverse communities to identify their commonalities and differences and see how they could work together to tackle these health and health care issues. This curriculum has been used in a number of settings, and is highly transferable. At the same time, it is most effective if it is shaped to meet the specific needs of your community.

Goals of Community Health Leaders (CHL)

The goals of the CHL are to:

- ⇒ Increase participants’ ability to understand their own communities’ strengths and needs, as well as trends that affect health status in their neighborhoods;
- ⇒ Enhance participants’ ability and skill to develop strategies or proposals in order to address needs they identify and increase access to quality, affordable health care and preventive services;
- ⇒ Bring together diverse members of the community;
Support participants in shaping, influencing, and participating in policy and health delivery system decisions that affect their community
- ⇒ Teach participants how to utilize other community health access and community action tools to improve health access and quality

Who is it for?

CHL can help engage community members who have little experience with health issues, it can bring together community leaders with community members who have not yet been leaders, and it can engage frontline workers who are in close contact with community members who are experiencing a number of health-related issues. Even for people involved in health related work CHL provides a broader picture of the health system and helps them develop new ways they can use their knowledge to improve the health care environment in their community. It is not intended, however, for agency managers but for a more grassroots constituency.

CHL was designed as a way to bring together members of racial and ethnic communities and promote their collaboration. It will be strengthened if outreach efforts target diverse participation. Its initial sessions, in particular, are structured so that participants can learn from the diverse perspectives in the room and identify perspectives and information not present in the room as they discuss health and health care needs in their community. Racial and ethnic diversity, cultural competence, or disparities have long been overlooked in the health care system. It is only by engaging diverse communities and leaders that issues such as racial and ethnic diversity, cultural competence, and disparities can be adequately addressed.

What Does it Consist of?

CHL consists of a series of six to eight workshops. Sessions are two to three hours in length and are usually offered every two to three weeks, so the entire series lasts three to four months. These workshops provide participants a structured setting in which to engage with the information that is presented and share their own thinking about the information.

An important part of the CHL curriculum is its community-based research component. In this component, participants engage in a real life research project in their own community. We believe that people learn best by doing, and this component allows people to continue to develop their skills, as well as obtain a better understanding the issues they have been discussing. In addition, it helps them to forge a group identity which may continue beyond the duration of the course.

What You Will Find in this Guide

The guide includes a facilitator's manual and a training curriculum.

The facilitator's manual provides a step-by-step guide for conducting the workshop series and will assist your organization and partnering organizations in adapting the CHL to your local circumstances. The manual includes:

- ❶ Principles of Adult Learning
- ❷ Step-by-Step Planning Guide
 - Define Your Project Goals
 - Determine Organizational Sponsorship
 - Resources [including some comments on interpretation]
 - Project Staffing
 - Recruiting and Supporting
 - Meeting Structure
 - Training Methodology
 - Homework
 - Evaluation
 - The Curriculum
- ❸ Appendices
- ❹ Feedback Form

The training curriculum includes detailed outlines of each module

The participant handout package includes all handouts needed for the curriculum.

Key Themes

Two themes run through the CHL series. The first of them is **listening**. CHL provides an opportunity for people to listen and learn from each other. It is recommended that a diverse cross section of community members participate in the workshops in order to learn from each other about the different situations that affect their lives. Ideally the facilitator (s) would have a number of skills including the ability to listen, to synthesize information, and to create cohesion among the group in order to create a comfortable and open forum. Workshop sessions are structured to facilitate the listening process by minimizing presentation and maximizing input through discussion.

The second theme is **empowering community members and engaging communities** in shaping the health

Community Health Leaders Curriculum

care system. Low-income consumers are particularly disenfranchised from the health care system. The system works least well for certain groups, e.g. the poor, people of color, the chronically ill, and linguistic minorities. Issues of health system failure are compounded when combined with issues of race and class. Institutionalizing the voice of consumers in health care decision making is key to ensuring that community members have ongoing access to affordable, quality health care. This is done by teaching consumers new skills such as: listening, research, interviewing, analysis, strategy formulation, public speaking, and meeting skills.

Finally, CHL is a work in progress. It has been developed so that it can be modified for the particular circumstances of your community. In order to make it as effective as possible, we need your feedback about which aspects were most effective, which were least effective, and what changes you made while using the curriculum.