Community Engagement to Address Transportation Equity

Blue Hills Community Health Alliance

DASH CIC-START grantee 2019

Wednesday, December 9, 2020

INTRODUCTIONS

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AGENDA

- Background of the Blue Hills RCC
- Who was engaged?
- How where they engaged?
- Why we did take this approach?
- Challenges encountered
- Lessons learned
- What's next?

GOALS

- Share methods of collaborative decision making and data collection
- Speak to the ongoing opportunities and challenges of authentic community engagement
- Share methods of meaningful use/ integration of data into planning

BACKGROUND

WHO WE ARE

The Blue Hills Regional Coordinating Council (BHRCC) is a group of voluntary stakeholders working together to build healthier communities by addressing transportation inequities and accessibility barriers in the Blue Hills region of Massachusetts.

BLUE HILLS RCC

Massachusetts

TRANSPORTATION EQUITY
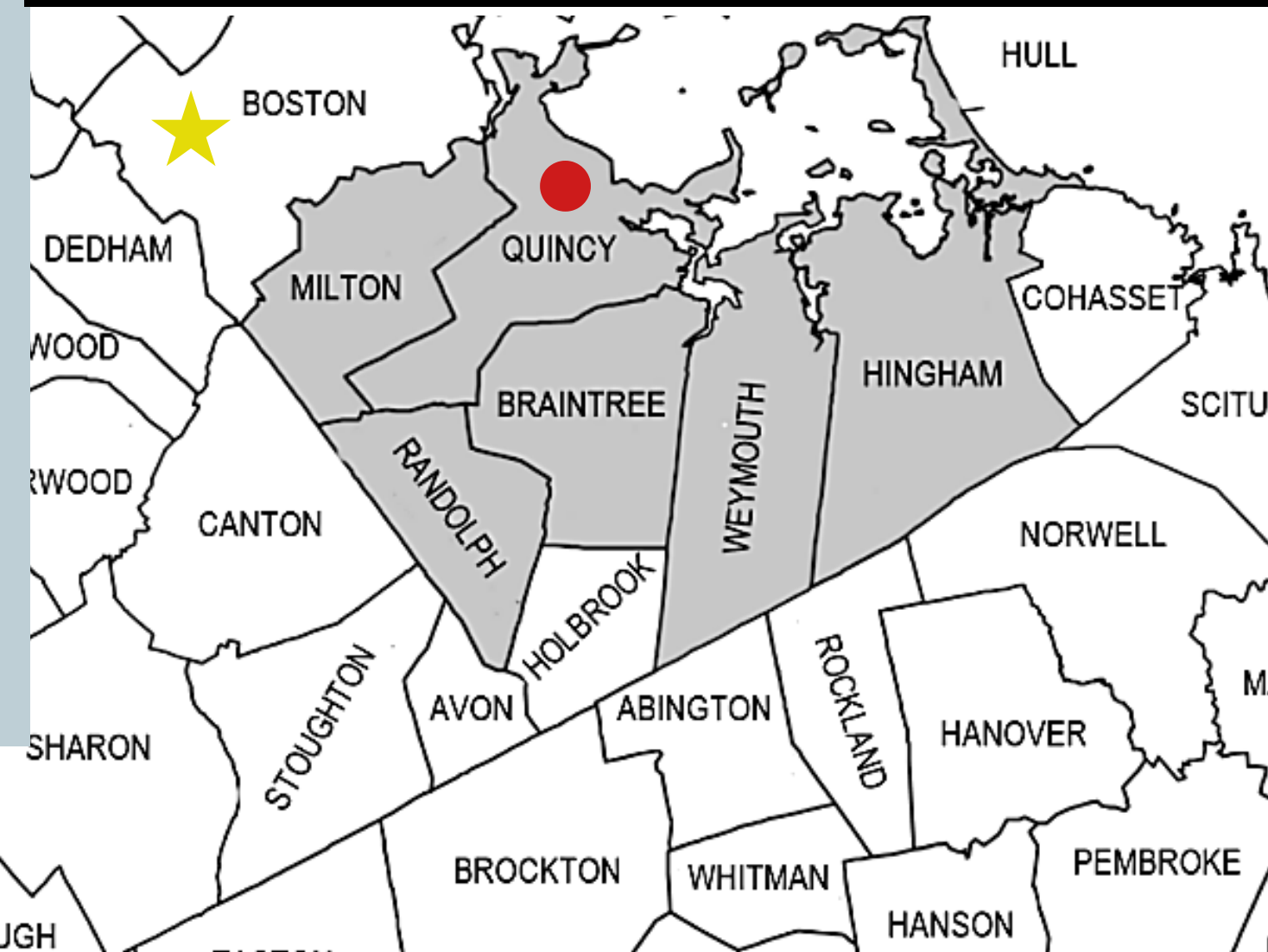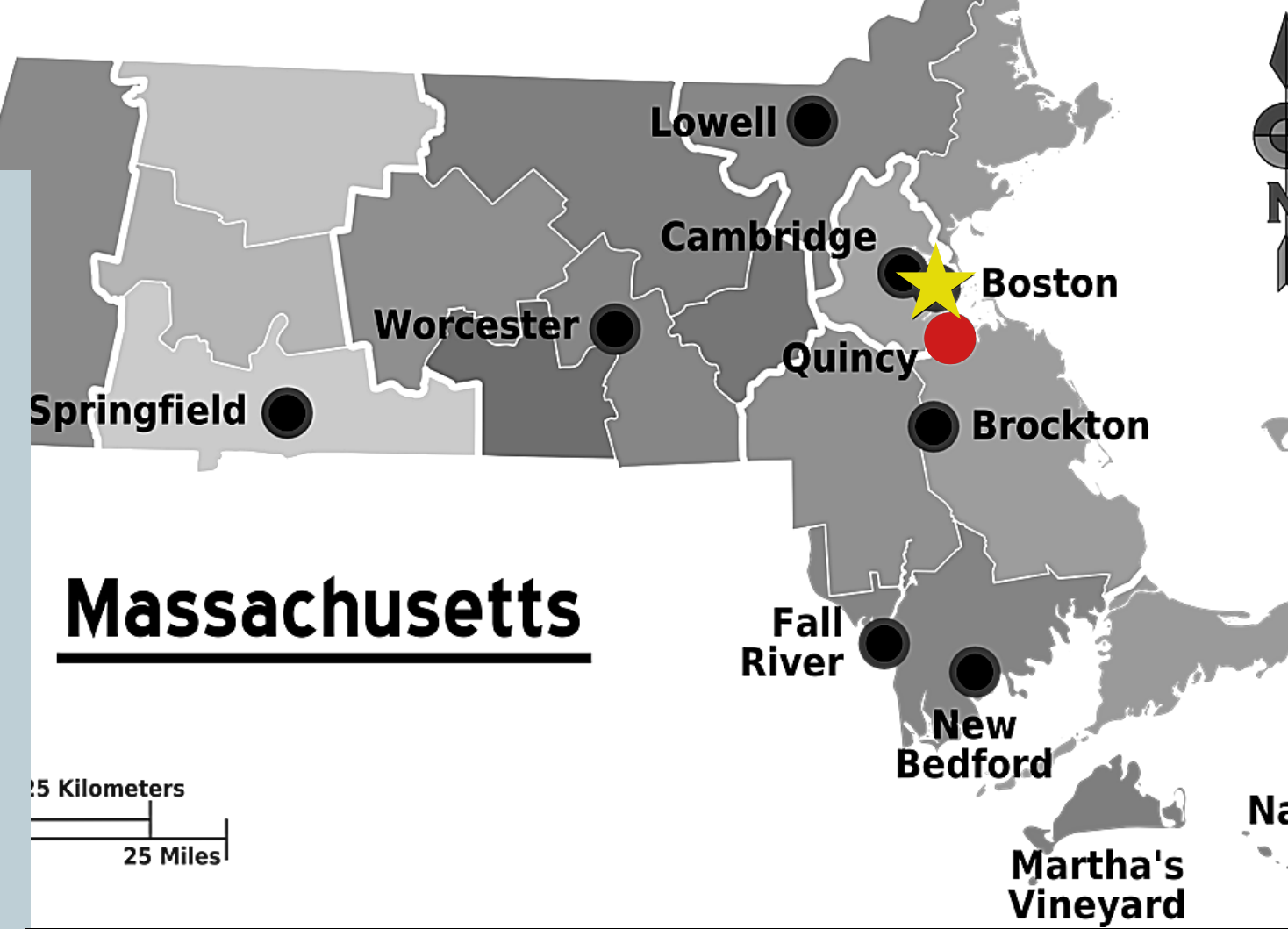
OUR WORK

The BHRCC aims to:

- Understand the root causes of access disparities;

- Design a regional action plan to improve access to health by promoting resources and services;

- Pilot solutions in partnership with multi-sector organizations and community members.

PROJECT GOALS

Access to affordable and reliable transportation

Multi-sector collaboration to address the SDoH

Resident voice included in decision making

Spaces for walkers, bikers, and transit users of all ages

Increased funding for safe streets and reliable transit

Improved resident health and well-being

4-PHASE PROCESS

1
NEEDS ASSESSMENT

Understand needs and assets related to transportation and accessibility

2
ACTION PLAN

Identify a set of priority outcomes that align with local and state partners

3
PILOT PROGRAM

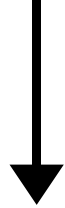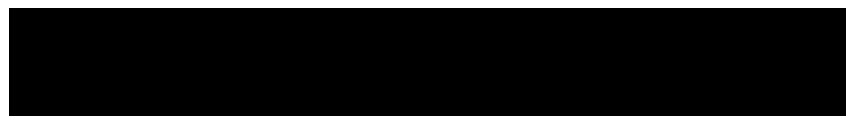Design, approve, and roll out pilot programs in select communities

4
EVALUATE & EXPAND

Scale existing pilots and best practices in remaining towns
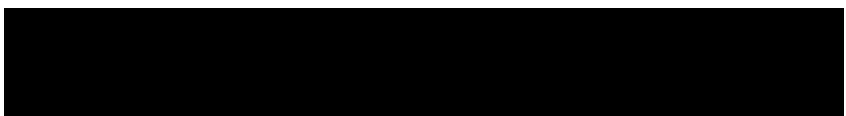
WHO DID WE ENGAGE?

REGIONAL EXPERTS	MUNICIPAL OFFICIALS	COMMUNITY AGENCY STAFF
Transportation Planning	Health Dept.	Multi-Service
Public Health	Planning Dept.	Elder Services
Healthcare	Housing Authority	Health & Wellness
Gerontology	Elder Services	Asian Services
	Libraries	Housing
CONSTITUENTS	RESIDENTS	CLIENTS

HOW DID WE ENGAGE?

OUTREACH ACTIVITIES

Goal: to understand the day-to-day transportation and accessibility barriers for community members

Community Conversations	Resident Focus Groups	Local Events
Strengths and challenges re: healthy aging	Where they need to go and barriers to getting there	Transportation services used + experiences
Municipal, HHS agencies, and residents	Residents: older adults, LEP, housing insecure	General public (primarily Quincy residents)
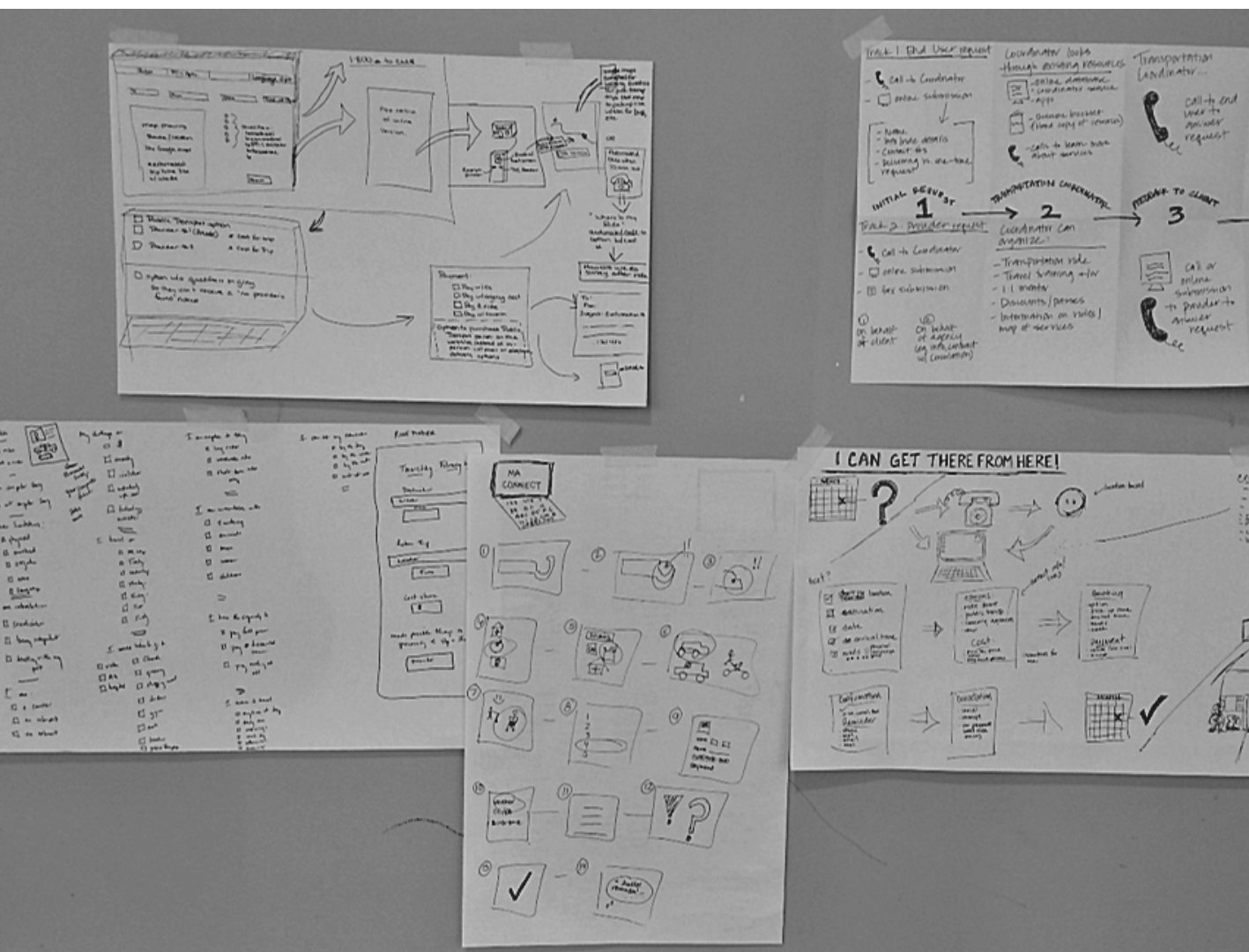
DESIGN SPRINT

Goal #1: To understand transportation-related assets and barriers existing within a geographical area so that the RCC and partners can identify potential methods for visualization

Goal #2: To build a prototype so that the RCC and partners can summarize and visualize current conditions as well as monitor changes over time as transportation barriers are addressed

User: Organizational staff and volunteers who assist residents with transportation limitations with access to services

Build

Idea

Launch

Learn

Understand
Define

Sketch
Decide

Prototype
Validate
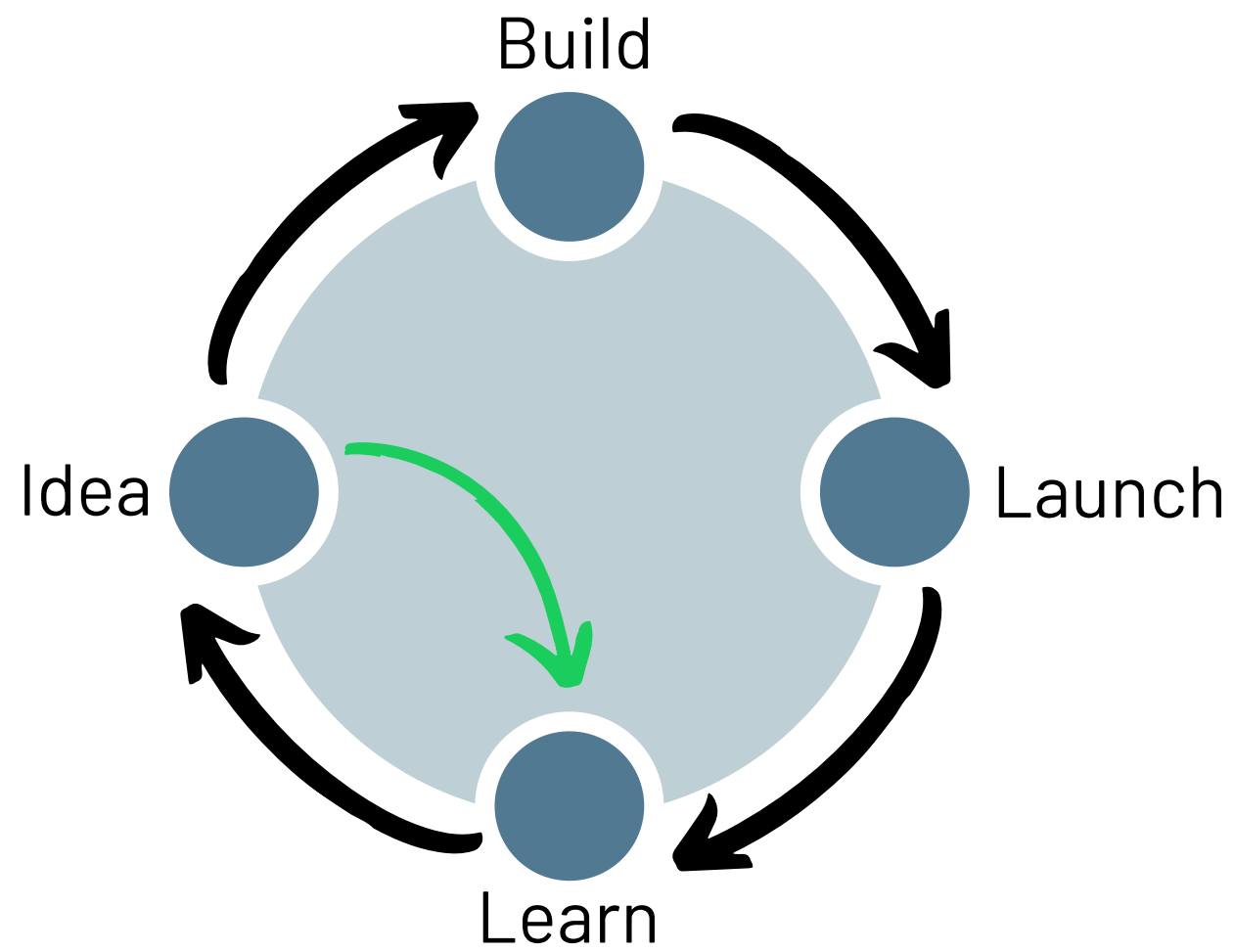
DESIGN SPRINT

A design sprint is a framework for answering critical questions through design, prototyping, and testing ideas with users.

MONDAY   TUESDAY   WEDNESDAY   THURSDAY   FRIDAY

•Map

•Sketch

•Decide

•Proto-type

•Test
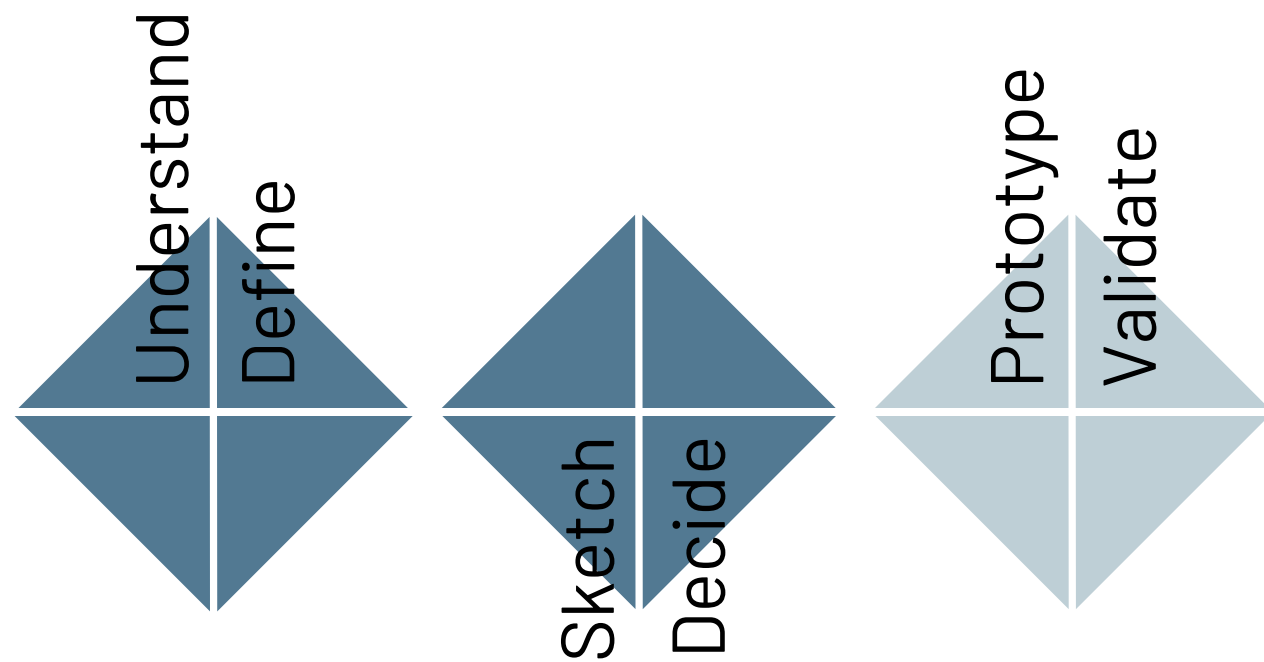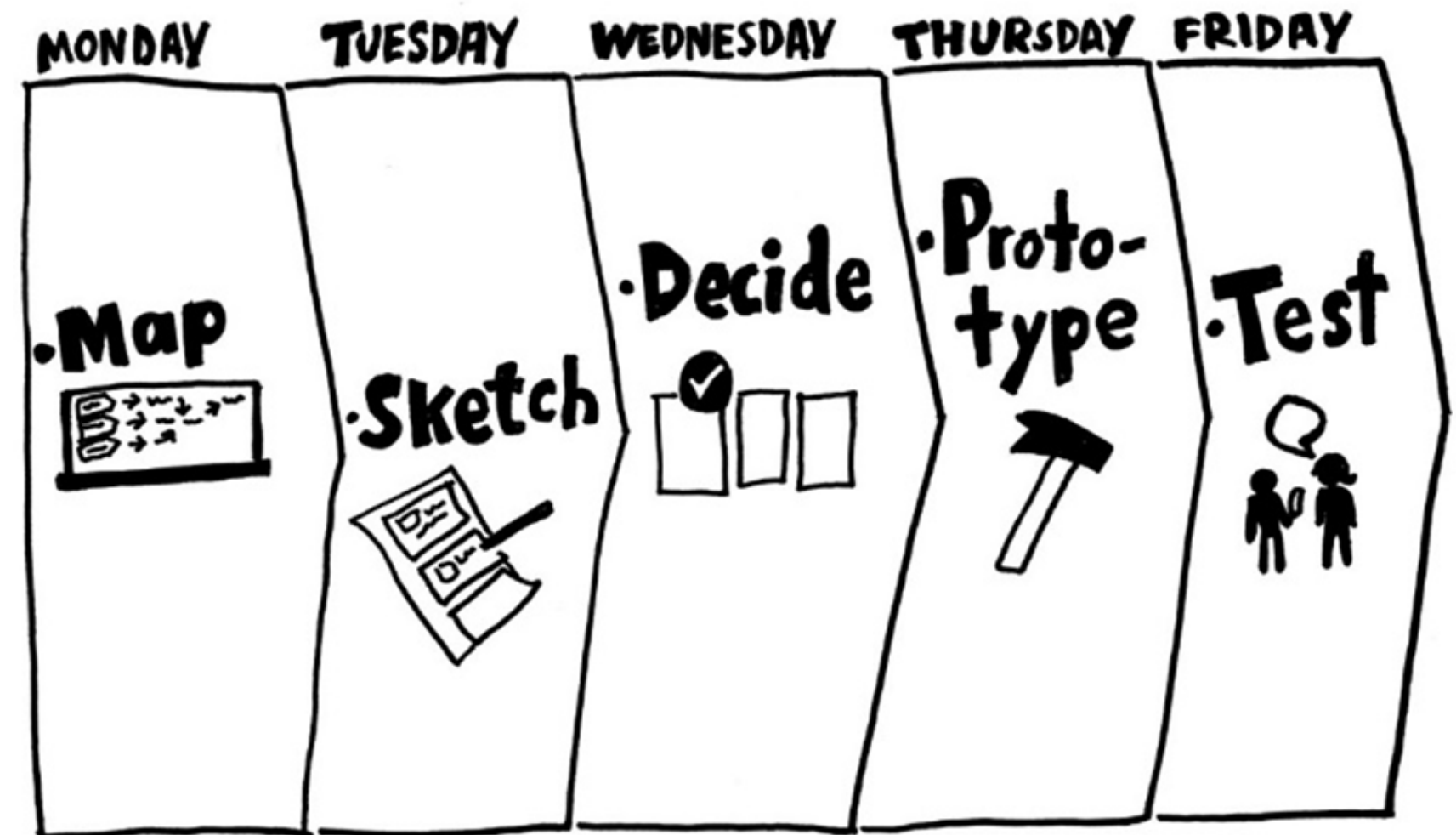
COMMUNITY SURVEY

Goal #1: engage the wider community to understand where people are trying to go, how they get there, and what their experiences are

Goal #2: enhance outreach to community members who speak a language other than English

Did not disseminate due to COVID-19 and recognizing people's capacity and needs

WHY DID WE TAKE THIS APPROACH?

UTILIZING BEST PRACTICES

A 'BACKBONE' COORDINATING ORGANISATION/S

A COMMON AGENDA FOR CHANGE

COLLECTIVE IMPACT

OPEN AND CONTINUOUS COMMUNICATIONS

SHARED MEASUREMENT FOR DATA & RESULTS

MUTUALLY REINFORCING ACTIVITIES

SOCIAL DETERMINANTS AND SOCIAL NEEDS: MOVING BEYOND MIDSTREAM

STRATEGIES — COMMUNITY IMPACT — TACTICS

Improve Community Conditions

upstream

Laws, policies, and regulations that create community conditions supporting health for all people.

INDIVIDUAL IMPACT

Addressing Individuals' Social Needs

midstream

Include patient screening questions about social factors like housing and food access; use data to inform care and provide referrals.

Social workers, community health workers, and/or community-based organizations providing direct support/assistance to meet patients social needs

Providing Clinical Care

downstream

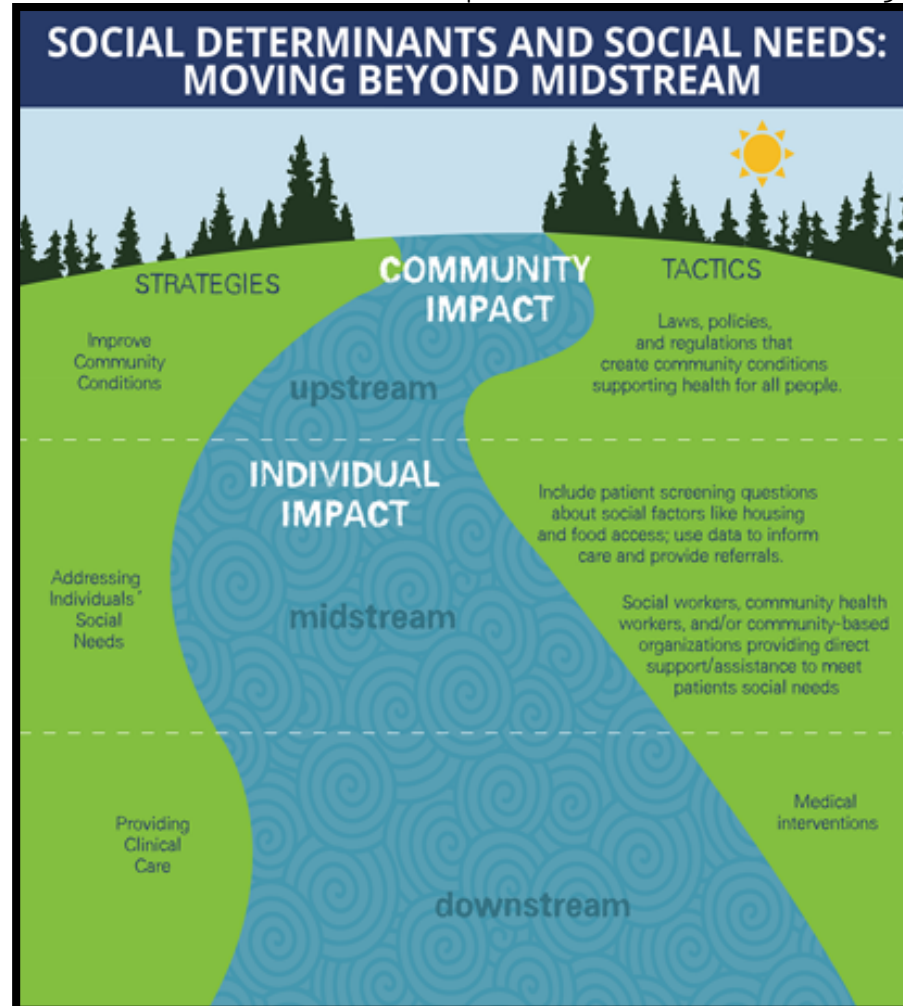Medical interventions

880 cities

COLLECTIVE IMPACT

Bringing together committed, multi-sector stakeholders

LOOKING UPSTREAM

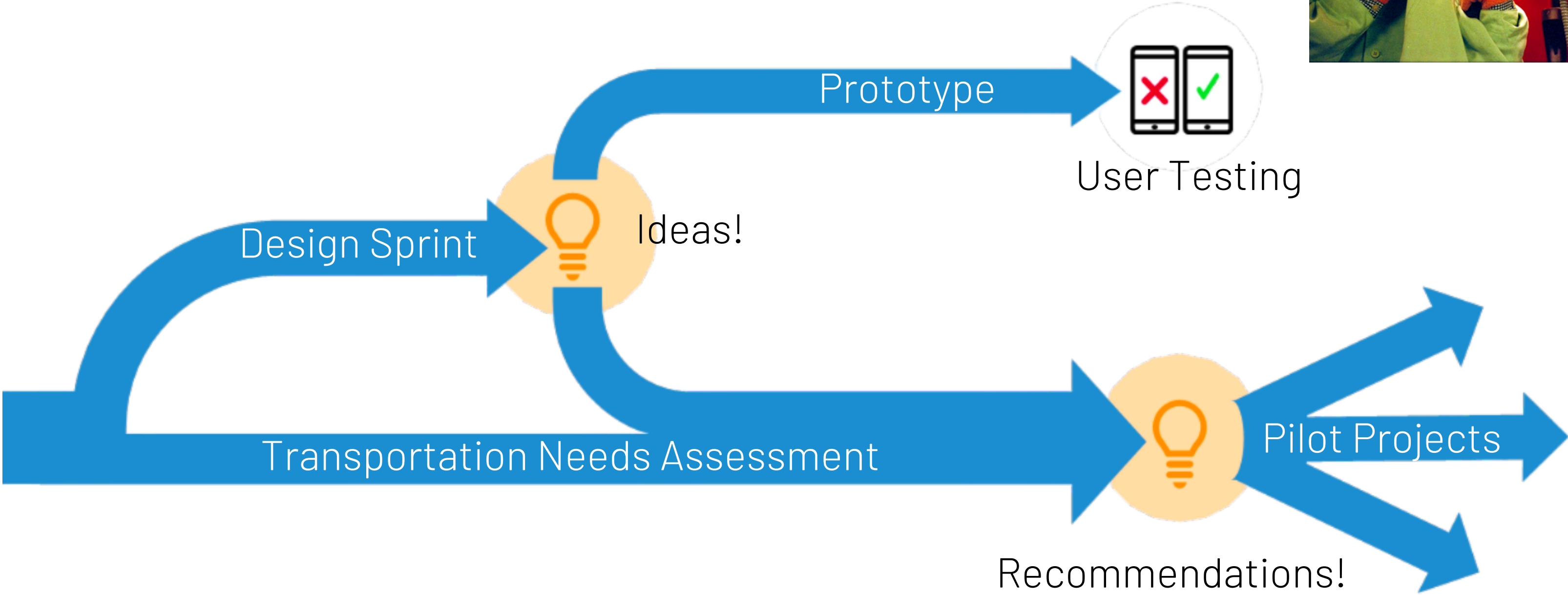Changing community conditions to improve health outcomes

THINKING "8 TO 80"

Solutions meet the needs of all people in a community

THE IMPORTANCE OF BUILDING & TESTING

Prototype

User Testing

Design Sprint

Ideas!

Transportation Needs Assessment

Pilot Projects

Recommendations!

UTILIZING DATA FOR ACTION PLAN

"Using the MBTA bus you have to plan for at least an hour to get anywhere. You have to go on a few busses to get places. It can be a whole day affair."

UNRELIABLE TRANSPORTATION

High presence of residents who are more likely to be non-drivers or rely on non-auto modes of transportation

17% of Quincy households do not own a vehicle
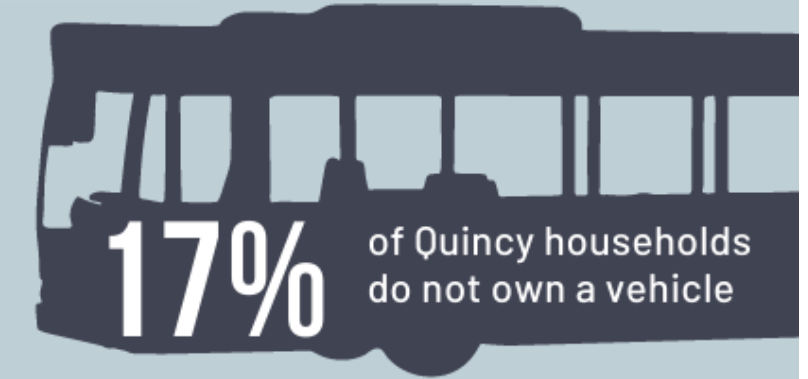
INACCESSIBLE INFORMATION

11% of Quincy residents speak English "less than very well"

"The most difficult thing about language coming here is finding work, trips or travel because no one can help and they can't go alone."
- QARI focus group participant

"It's difficult to use the parking lot in Quincy Center. No one is there to show us how to use the machine since everything is only in English."

"Walking down the street can be hard because the sidewalks are really bad and there are so many trucks and traffic and it's scary."

PEDESTRIAN SAFETY CONCERNS

Pedestrian safety was a concern in 100% of focus groups, with 50% of groups describing being a pedestrian as scary

0/7 BHRCC towns/cities with sidewalk snow removal policies

CHALLENGES & LESSONS LEARNED

CHALLENGES ENCOUNTERED

REACHING RESIDENT-LEVEL

- How to engage residents when we primarily work with agencies
- Power dynamics between municipalities and residents

COVID-RELATED

- Number of focus groups cut in half due to COVID
- Community survey did not feel appropriate given capacity
- Budgets and transportation conditions different now than pre-pandemic

LESSONS LEARNED

MEET PEOPLE WHERE THEY'RE AT

Quantity and quality of data would have suffered otherwise

INTENTIONAL RELATIONSHIP-BUILDING IS VITAL

1:1 conversations early on enhanced engagement opportunities

THINK CREATIVELY TO INCREASE ACCESS

The design sprint was "the first time I got it" for some

TRANSPARENCY IS KEY TO COLLABORATION

Making materials available has contributed to community feel

WHAT'S NEXT?

4-PHASE PROCESS

1	2	3	4
NEEDS ASSESSMENT	**PLAN**	**PILOT PROGRAM**	**EVALUATE & EXPAND**
Understand needs and assets related to transportation and accessibility	Identify a set of priority outcomes that align with local and state partners	Design, approve, and roll out pilot programs in select communities	Scale existing pilots and best practices in remaining towns

WE ARE HERE

ENGAGEMENT MOVING FORWARD

WEBINAR + SURVEY

- Recorded webinar accessible by the public
- Feedback submitted via online survey

POSTER CAMPAIGN

- To reach those with limited access to technology
- Feedback via written comments, text, and phone

WORKING GROUPS

- Charged with designing and monitoring implementation of pilot programs
- Opportunity for residents to play leadership role

THANK YOU!

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To learn more, visit www.bluehillsrcc.org

BHRCC Action Plan | Needs Assessment Documents