



Victorian Healthcare Association

Population Health Planning Framework

WORKING WITH THE COMMUNITY

Engaging the community in population health planning is vital, given that populations are (and should be) active participants in creating and maintaining their own health and wellbeing (Zollner & Lessof, 1998).

Community participation is recognised as an essential component of population health planning, service planning, delivery, evaluation, and decision-making, as evidenced by the many community participation frameworks and theories that exist. Some frameworks have been included in the resources section below.

The 2005 International Conference on Engaging Communities defines community engagement as a two-way process by which:

“... the aspirations, concerns, needs, and values of citizens and communities are incorporated at all levels and in all sectors in policy development, planning, decision-making, service delivery, and assessment ... and governments and other businesses and civil society organisations involve citizens, clients, communities, and other stakeholders in these processes” (Fritze et al 2009).

For the purpose of this toolbox, community participation will refer to the inclusion of the community in the population health planning process.

Relevance to population health planning

Community participation is valued in population health planning because it:

- can lead to better decisions and solutions, which improve health outcomes
- is appropriate to give those who will be impacted by population health planning a voice in decision-making
- challenges sectors of society to accept responsibility for their part in contributing to and improving a population’s health
- provides additional knowledge to assist with identifying, prioritising, and addressing the causes of illness, and for understanding the complex relationship between determinants

Community types -defining the community

Community is a very broad term. There are different types of communities that may participate in the planning process, and these need to be identified and defined by the leadership group.

Ontario Health System Intelligence Project (2006) recognises five kinds of communities:

Types of communities	Examples
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1. Geographical communities	People living in a given region or municipality
2. Communities of interest	Sporting clubs, service clubs (eg Lions, Rotary), historical societies, Neighbourhood Watch
3. Communities of common characteristics	People who share common characteristics such as age, gender or language (eg Chinese community, Lower SES communities)
4. Communities of common experience	Cancer patients, former prisoners
5. Communities of shared belief	Faith communities

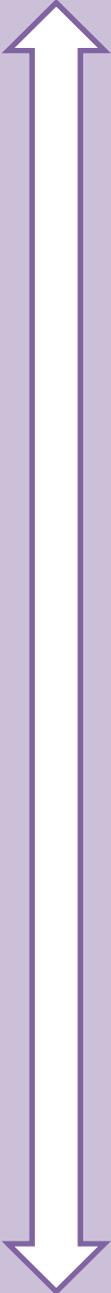
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Levels of community participation

Community participation can occur at different levels, which are identified in community participation frameworks that guide the participation process and ensure its effectiveness. The leadership team must decide the appropriate participation levels for different stages of the planning process. These should be agreed and reflected in a community participation plan.

Table 1: Levels of community participation

Level of participation	Action	Population health planning
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<p>HIGH</p>  <p>LOW</p>	Delegate control	This level of participation is embodied in the community development approach. Communities are empowered to identify their needs, plan actions, manage projects, and evaluate the results of their activities.
	Collaborate	Planners ask the community to participate in the planning process by prioritising identified health issues and planning action. Responsibility, authority, and decision-making are shared more evenly than in other forms of participation. The parties often agree to share the risks and benefits, and the community is able to influence the planning outcomes.
	Advise	The provisional/draft population health plan is presented to community members, who are invited to ask questions, provide feedback, and advise on strategies. Planners expect to alter the plan, based on the community's input.
	Consult	Planners seek community views and solutions before making a decision. Consultation seeks community acceptance of the plan to support its organisational endorsement.
	Inform	The completed population health plan is announced to the community, which is convened for information purposes. Compliance is expected. This level of participation may also be appropriate early in the planning process to gain support for future.
	None	No community participation

Adapted from the WA Health Consumer Carer and Community Engagement Framework (2007) and the IAP2 model as developed by the International Association for Public Participation Australasia (2004)



Putting it into practice

A range of approaches to partnering with the community is possible, however, in simple terms the following four steps will effectively deliver population-level engagement and partnership:

Step 1: Understand who your stakeholders and community are. Communities may be defined by geography or location, current or projected needs, affiliation or identity, age or gender, etc.

Step 2: Decide what level of influence/participation you want –this represents the role and level of say that participants are to have in the planning process. Also, how formal will your partnership be –is it a loose network or a formal collaboration?

Step 3: Develop principles to underpin your partnership and engagement and agree to the ground rules that will guide and inform how you work. Depending on the nature of your partnership and engagement, different ground rules, structures, and decision-making processes will be necessary

Step 4: Identify the methods for engaging consumers and communities at different stages of the population health planning process. Importantly, consider the methods that will enable consumers and communities to participate effectively –such as information and support.

Steps within community participation

The leadership team must agree on a community participation plan outlining the scope, resources, and engagement process at the outset of planning. Tools for developing a community participation plan are provided in the resources section.

Many types of communities are likely to be involved at different stages of the population health planning process. Common challenges include deciding who represents the community, and ensuring that no population group is disadvantaged or excluded by the participation strategy, (eg, consultation only during business hours and/or at a venue without disabled access or public transport).

The leadership group should also consider how the community can be empowered to engage in the planning process by including strategies for generating public interest, building population health champions, for skill development, and supporting the community to communicate their concerns.

Principles of community participation

The Health Planner’s Toolkit (Ontario HSIP Project, 2006, p15) identifies 13 principles, across four domains, to assist with maximising community participation.

Principles of effectiveness	Principles of inclusion
<ul style="list-style-type: none"> ▪ Engage early enough to make a difference ▪ Resource it properly (skills, staff, time, funds) ▪ Pay attention to the results ▪ Monitor and evaluate the effectiveness of the 	<ul style="list-style-type: none"> ▪ Build in ethno-cultural diversity ▪ Eliminate physical, psychological and ▪ socioeconomic barriers to participation

<ul style="list-style-type: none"> ▪ participation process 	
<p>Principles of clarity</p> <ul style="list-style-type: none"> ▪ Ensure transparent purpose and communication ▪ Be transparent about how results will be used ▪ Develop a clear but flexible planning strategy 	<p>Principles of respect</p> <ul style="list-style-type: none"> ▪ Be the community's partner, not its master ▪ Use participation tools acceptable to the participants ▪ Hear what people say, not what you want to hear ▪ Allow realistic timeframes

Community participation strategies

Many tools are available to guide community participation in the planning process. Prior to commencing work with the community, the leadership team should consider the following factors identified by the National Public Health Partnership (2000):

- the nature and complexity of the issue
- the goal and phase of the planning/policy process
- the expected level of participant influence
- the participants (e.g. ordinary citizens, interest group representatives)
- facilitators' previous experience with public involvement techniques
- timelines, financial costs, human resources, and expertise
- the degree of inter-sectoral collaboration required
- the level of support for public involvement processes from stakeholders and government partners.

The following checklist summarises the key points outlined in this chapter.

Checklist

How and why are community people involved in the population health planning initiative?

Does the community have a genuine say in how things are done?

How and why were particular community groups identified as potential contributors

Did the selected community/groups help in framing the health issue?
What was the level of community involvement?

How will the selected community/groups be informed of progress and outcomes?
How is access and participation facilitated?

Resources

'Doing it with us not for us' Victorian Government policy on consumer, carer and community participation in public health care sectors.

[Effective Community Engagement: Workbook and Tools \(2004\)](#) Department of Sustainability and Environment (DSE) website on community engagement, covering benefits, principles, developing an engagement plan, toolkit, case studies, resources and templates. DSE community engagement practices in the area of emergency response are recognised internationally.

[Victorians Participate in Health. The Health Issues Centre](#) maintains this page with funding from the Department of Human Services. It provides basic information about consumer participation in health including policy documents, examples and research on consumer participation.

Community engagement: an evidence summary. Department of Health review summarising current evidence on community engagement in health promotion and disease prevention.

[Health Planner's Toolkit -Module 5: Community engagement and participation](#)

Partnerships and engagement guides and toolkits Australian General Practice Network (AGPN) community engagement toolkit, handbook and training manual

Improving health services through consumer participation: a resource guide for organisations (2000) developed by the Victorian Department of Health, the federal Department of Health and Aged Care, Flinders University and the South Australian Community Health Research Unit for the Consumer Focus Collaboration.

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Further reading

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