

Managing Organizational Support for Community Engagement

# Chapter 4 Managing Organizational Support for Community Engagement

Michael Hatcher, DrPH, David Warner, MD, Mark Hornbrook, MD

#### INTRODUCTION

A great deal has been researched and written on collaborative processes that support community engagement, but the literature does not offer a systematic review of how successful organizations provide the structural support needed to plan, initiate, evaluate, and sustain collaborative processes that produce collective community actions. Butterfoss (2007) states that a convening organization "must have sufficient organizational capacity, commitment, leadership, and vision to build an effective coalition" (p. 254). However, there is little research concerning these characteristics.

This chapter presents a review of frameworks to help organizations determine the capacity they need to support community engagement. It includes a set of testable propositions about required capacity. The frameworks have been developed by matching the structural capacities required for any endeavor as defined by Handler et al. (2001) with the prerequisites for effective community engagement identified through: (1) the nine principles of community engagement (Chapter 2), (2) community coalition action theory (CCAT; Butterfoss et

al., 2009), and (3) the constituency development framework (Hatcher et al., 2001; Hatcher et al., 2008; Nicola et al., 2000).

#### THE FRAMEWORKS

#### **Principles of Community Engagement**

This document, like the first edition of *Principles of Community Engagement*, provides nine guiding principles for organizations to apply when working with community partners. These principles give organizational leaders a framework for shaping their own culture, planning engagement, conducting outreach, and interacting with communities. However, principles by themselves do not offer an engagement model or process for their application. The principles are certainly compatible with existing community mobilization processes, such as those outlined by the National Association of County and City Health Officials in *Mobilizing for Action through Partnership and Planning* (2011), but compatibility per se is not enough. To date, there has been no clear guidance on how to organizationally or operationally support the use of these nine principles or the array of community mobilization models.

#### **Community Coalition Action Theory**

As noted in Chapter 1, Butterfoss et al. (2009) articulated CCAT on the basis of research on the collaborative engagements of coalitions. In laying out CCAT, they provided 21 practice-based propositions that address processes ranging from the formation of coalitions through institutionalization. Like the principles of community engagement, however, CCAT does not identify the structural capacity and management support required to facilitate and guide the processes it recommends.

Among the frameworks used in the synthesis offered in this chapter, CCAT occupies a unique and important role because it ties community engagement to theory. In fact, it is a particularly appropriate theoretical framework because the CCAT developers are specifically interested in what Butterfoss (2007) describes as "formal, multipurpose, and long-term alliances" (p. 42), which are distinct from the activities of short-term coalitions that coalesce to address a single issue of concern and disband after it is resolved. Although CCAT is designed primarily to understand community coalitions, community

engagement is not limited to coalition processes. Even so, CCAT and community engagement have a common focus on long-term relationships, and CCAT offers propositions that are clearly relevant for undertaking and sustaining collaborative processes for community engagement. Additionally, CCAT addresses the full range of processes from initiation of new collaborative activities to institutionalization of mature relationships. Finally, CCAT propositions support the nine principles of community engagement.

#### **Constituency Development**

The third framework described here is drawn from the organizational practice of constituency development; that is, the process of developing relationships with community members who benefit from or have influence over community public health actions. Constituency development involves four practice elements (Hatcher et al., 2008):

- Know the community, its constituents, and its capabilities.
- Establish positions and strategies that guide interactions with constituents.
- Build and sustain formal and informal networks to maintain relationships, communicate messages, and leverage resources.
- Mobilize communities and constituencies for decision making and social action.

This framework provides a parsimonious set of tasks that must be undertaken for community engagement. The question we seek to answer is how these tasks can be carried out in accordance with the principles of community engagement and CCAT. To specify the capacity required to support this effort, we use the categories of structural capacity delineated by Handler and colleagues (Handler et al., 2001), which include five kinds of resources: human, informational, organizational, physical, and fiscal. In *Public Health: What It Is and How It Works*, Turnock elaborates on these capacities as they apply to health systems (2009):

• Human resources include competencies such as leadership, management, community health, intervention design, and disciplinary sciences.

- Information resources span data and scientific knowledge, including demographic and socioeconomic data, data on health risks and health status, behavioral data, data on infrastructure and services, and knowledge-based information like that found in the intervention and disciplinary sciences that is used to guide health and community actions.
- Organizational resources include organizational units and missions; administrative, management, and service-delivery structures; coordinating structures; communication channels and networks; regulatory or policy guidance; and organizational and professional practices and processes.
- Physical resources are the work spaces and places, hardware, supplies, materials, and tools used to conduct business.
- Fiscal resources include the money used to perform within an enterprise area like health as well as the real and perceived economic values accumulated from the outputs of an enterprise. Fiscal resources are seldom discussed in literature regarding the health and community engagement enterprise within the public sector. The investment of money and time to engage communities in public sector processes, however, has many potential returns, including leveraging of the resources of partners, development of community services that may accrue income for reinvestment, synergistic actions that achieve the objectives of an enterprise, increases in social capital, and population health improvements that have economic value. As with all investments, those who commit to long-term and sustained community engagement most often accrue the greatest returns.

## EXAMINING THE STRUCTURAL CAPACITY NEEDED FOR COMMUNITY ENGAGEMENT

Synthesizing the frameworks described above allows us to identify the structural capacity needs of organizations or agencies, coalitions, or other collaborative entities that are undertaking community engagement. Synthesis starts with the four practice elements of constituency development developed by Hatcher et al. (2008). Appendix 4.1 contains a table for each of the four practice elements (know the community, establish strategies, build networks, and mobilize communities) that sets forth its components in detail. The text here touches only on their major points.

### Practice Element 1: Know the Community

The first practice element is focused on knowing the community's history and experience, its constituents, and their capabilities. In a sense, this practice element addresses the intelligence-gathering function behind planning, decision making, and leveraging resources to collaboratively achieve anticipated or agreed-upon outcomes with community partners. As depicted in Table 4.1, this element speaks to the need for a wide range of data types, secure reporting and collection systems, human skills and equipment to analyze and interpret data, organizational processes to communicate this information and foster its use in decision making, and a culture that values community-engaged information gathering and use. The goal is to enable all partners to understand diverse viewpoints on community issues and to appreciate the range of solutions that may address those issues.

The individuals and groups from communities or organizations undertaking engagement activities have differing abilities to assimilate data through their

respective filters. If understanding is not developed collectively, it is often difficult to move to a collective decision or action. All but the smallest homogenous communities have multiple layers of complexity that require organized, collective ways to obtain and understand community information. In brief, understanding is rooted in experience, social and cultural perspectives, perceptions of influence, and the ability to act collaboratively within the engaging organization and the engaged community. Thus, the task

If understanding is not developed collectively, it is often difficult to move to a collective decision or action.

of knowing a community must be approached as an organizational function and supported with sufficient capacity to collectively undertake this work.

#### Practice Element 2: Establish Positions and Strategies

To successfully address Practice Element 2, structural capacity must be in place to identify the engaging organization's priorities regarding community health issues as well as any limitations in the organization's mission, funding, or politics that will restrain its ability to address those issues. The development of positions and strategies allows an organization to effectively plan its role in the community engagement process. In particular, it is critical to be clear about the organization's intentions and its ability to adjust and align its position to differing viewpoints and priorities likely to exist within the community. An introspective review will examine whether the organization is willing to

adjust its priorities in response to the concerns of the community (i.e., takes an open position) or whether it insists on following its own internal priorities (a closed position). The answer to this question should drive the engagement strategy, and the organization must clearly communicate the degree to which it is open to change so that the community can have clear expectations about what can be collaboratively addressed.

Structural capacity is also needed to support the examination of external forces. The understanding of these forces, like the understanding of internal forces, is critical for establishing positions and strategies that facilitate social mobilization and participatory decision making. Another term for the examination of external forces would be "external planning." In particular, it is necessary to determine whether the community is capable of participating and whether it is ready to take action. If the community lacks capacity, it will be necessary to facilitate the development of its capacity. If the community has capacity but is not ready to act, strategies will need to be developed to help the community better understand the issues and create opportunities for it to act.

When establishing positions through internal and external planning, engagement leaders must consider multiple variables that influence health, including social, cultural, epidemiologic, behavioral, environmental, political, and other factors. An assessment of these factors will provide insight not only into possible targets for health actions but also into competing interests of the community and its potential responses to the organization's positions and strategies. Organizational positions should be developed through robust analyses and present the organization's views on the health issue, the range of possible solutions to that issue, and the rationale for engaging in collaborative action. The organization's strategy for gaining community support should underlie the method of presenting its position; the presentation should be designed to stimulate community dialogue and result in a determination of the community's expectations and the resulting collective position.

It is important to engage the community in this process as early as possible, although timing depends on the community's readiness. Regardless of the situation, the organization's capacity to analyze, establish, present, and manage positions and strategies will either facilitate or hinder the engagement process.

Building and maintaining the structural capacity to perform this work requires rigorous attention from engagement leaders. Specific insights into each capacity component for this practice element are presented in Table 4.2, which demonstrates that the structural capacity needs for this practice element are closely aligned with those of Practice Element 1.

#### Practice Element 3: Building and Sustaining Networks

Developing networks of collaborators is the third element in the organizational practice of community engagement. As described by Nicola and Hatcher, "developing networks is focused on establishing and maintaining relationships, communication channels, and exchange systems that promote linkages, alliances, and opportunities to leverage resources among constituent groups" (Nicola et al., 2000). In organizational practice, the development and maintenance of networks is a critical function and contributes to many organizational practice areas, specifically practices related to most of the 10 essential public health services identified by CDC 17 years ago (CDC, 1994). Effective community engagement networks should have active communication channels, fluid exchange of resources, and energetic coordination of collaborative activities among network partners. These targets can be achieved when organizations understand, support, and use available network structures. Keys to success include having the structural capacity to:

- Identify and analyze network structures (communication, power, and resource flow);
- Affiliate with those in existing networks;
- Develop and deliver ongoing messages across formal and informal communication channels to maintain information flow and coordinated activity;
- Target communications and resources to leverage agenda-setting processes within a community (Kozel et al., 2003; Kozel et al., 2006a, 2006b); and
- Establish, use, and monitor resource exchange systems that support network interactions and coordinated, collaborative community work.

Organizational leaders and managers must provide ongoing attention to building and maintaining the structural capacity to perform this work. The key task areas just described are dealt with more specifically in Table 4.3. The essential structural capacity needed for this practice element includes the

skills and systems to communicate and relate to people on a personal basis, knowledge and understanding of community power structures, and access to communication and resource exchange networks.

#### Practice Element 4: Mobilizing Constituencies

The fourth and final practice element in community engagement is mobilizing constituencies, other organizations, or community members. Mobilization includes moving communities through the process of dialogue, debate, and decision making to obtain their commitment to a collaborative goal; determining who will do what and how it will be done; implementing activities; and monitoring, evaluating, adjusting, and reevaluating these activities in a cyclical fashion. Engagement leaders must be fully immersed in the building

...the engagement process must be honest, and expectations must be clear. and maintaining of the structural capacity to perform this work. A key to this practice element is earning the trust required for obtaining community commitment. To this end, the engagement process must be honest, and expectations must be clear. Leaders in both the community and the engaging organization must be committed to meaningful negotiations to resolve any salient issues. Engagement

efforts will flounder in the absence of transparency and reciprocity in the engagement process. Insights on the wide range of human skills, data, management structures, and material resources needed to support this practice element are found in Table 4.4.

#### CONCLUSION

Effective community engagement requires a significant commitment to developing and mobilizing the organizational resources necessary to support engagement activities. This chapter has attempted a practical synthesis of how these frameworks identify the capacity needs of an engaging organization, but more work is needed to further develop and validate these capacities and their linkages between the propositions of CCAT, community engagement principles, and the organizational practice elements presented here. Among other considerations, such work should account for the considerable diversity that exists among organizations. Regardless, it is hoped that these practice-based observations and insights will be tested and refined and will ultimately lead to a greater understanding of how organizations must prepare for optimal community engagement.

#### **REFERENCES**

Butterfoss FD. *Coalitions and partnerships in community health*. San Francisco: Jossey-Bass; 2007.

Butterfoss FD, Kegler MC. The community coalition action theory. In: DiClemente RJ, Crosby RA, Kegler MC (editors). *Emerging theories in health promotion practice and research* (2nd ed., pp. 237-276). San Francisco: Jossey-Bass; 2009.

Centers for Disease Control and Prevention. *Essential public health services*. Atlanta (GA): Centers for Disease Control and Prevention; 1994.

Handler A, Issel M, Turnock B. A conceptual framework to measure performance of the public health system. *American Journal of Public Health* 2001;91(8):1235-1239.

Hatcher MT, Nicola RM. Building constituencies for public health. In: Novick LF, Morrow CB, Mays GP (editors). *Public health administration: principles for population-based management* (1st ed., pp. 510-520). Sudbury (MA): Jones and Bartlett; 2001.

Hatcher MT, Nicola RM. Building constituencies for public health. In: Novick LF, Morrow CB, Mays GP (editors). *Public health administration: principles for population-based management* (2nd ed., pp. 443-458). Sudbury (MA): Jones and Bartlett; 2008.

Kozel CT, Hubbell AP, Dearing JW, Kane WM, Thompson S, Pérez FG, et al. Exploring agenda-setting for healthy border 2010: research directions and methods. *Californian Journal of Health Promotion* 2006a;4(1):141-161.

Kozel C, Kane W, Hatcher M, Hubbell A, Dearing J, Forster-Cox S, et al. Introducing health promotion agenda-setting for health education practitioners. *Californian Journal of Health Promotion* 2006b;4(1):32-40.

Kozel C, Kane W, Rogers E, Brandon J, Hatcher M, Hammes M, et al. Exploring health promotion agenda-setting in New Mexico: reshaping health promotion leadership. *Promotion and Education* 2003;(4):171-177.

National Association of County and City Health Officials. Mobilizing for action through planning and partnerships (MAPP). National Association of County and City Health Officials; 2011. Retrieved from http://www.naccho.org/topics/infrastructure/MAPP/index.cfm.

Nicola RM, Hatcher MT. A framework for building effective public health constituencies. *Journal of Public Health Management and Practice* 2000;6(2):1-10.

Turnock BJ. *Public health: what it is and how it works* (4th ed.). Sudbury (MA): Jones and Bartlett; 2009.

#### APPENDIX 4.1 STRUCTURAL CAPACITY TABLES

The four tables listing the structural capacity needed for community engagement are shown here; one table has been constructed for each of the four practice elements (know the community, establish strategies, build networks, and mobilize communities). Each table includes summarized versions of the CCAT propositions and principles of community engagement that are relevant to the practice element represented by that table. CCAT propositions are displayed side-by-side with the principles to which they correspond. Both are numbered in accordance with their order in their original context. (For example, Principle 3 of our principles of community engagement is consistently identified in these tables as number 3 despite its location in the tables.)

The far-right column describes the structural capacity needed; these requirements are derived by considering the five elements of capacity set forth by Handler et al. (2001) in light of the CCAT propositions and engagement principles identified as relevant to each practice element.

Table 4.1. Know the Community, Its Constituents, and Its Capabilities<sup>1</sup>

Community Coalition Action Theory	Principles of Community Engagement	Structural Capacity Needed
<ol> <li>Propositions:         <ol> <li>All stages of coalition development are heavily influenced by community context.</li> <li>Coalitions form in response to an opportunity, threat, or mandate.</li> <li>Coalitions are more likely to form when the convening group provides technical/material/networking assistance and credibility.</li> <li>Coalition formation is more likely when there is participation from community gatekeepers.</li> </ol> </li> <li>Coalition formation usually begins by recruiting a core group of people committed to resolving the issue.</li> <li>More effective coalitions result when the core group expands to include participants who represent diverse interest groups.</li> <li>Satisfied and committed members will participate more fully in the work of the coalition.</li> <li>Synergistic pooling of resources promotes effective assessment, planning, and implementation.</li> <li>Comprehensive assessment and planning aid successful implementation of effective strategies.</li> </ol>	Principles:  2. Know the community, including its economics, demographics, norms, history, experience with engagement efforts, and perception of those initiating the engagement activities.  6. Recognize and respect the various cultures of a community and other factors that indicate its diversity in all aspects of designing and implementing community engagement approaches.  7. Sustainability results from identifying and mobilizing community assets and from developing capacities and resources.  9. Community collaboration requires long-term commitment.	<ul> <li>People Skilled in:         <ul> <li>Outreach, relationship building, data collection and analysis, and information development and presentation.</li> </ul> </li> <li>Technical assistance and assessment of training needs for organizational formation, planning and implementation of initiatives, communication and networking, and other engagement processes.</li> <li>Situational analysis and identifying opportunities for reciprocity within the community.</li> <li>Information/Data on:         <ul> <li>Community demographics.</li> <li>Socioeconomic status.</li> <li>Cultural beliefs, attitudes, and behaviors regarding health and other contextual aspects of community life.</li> <li>Community civic, faith, business, philanthropic, governmental, and other special interest entities — their missions/purpose, assets, and opinion leaders.</li> <li>Physical attributes of the community.</li> </ul> </li> <li>Organizational Structures to:         <ul> <li>Organizational Mission or values statement that supports a culture of long-term engagement with community partners.</li> </ul> </li> <li>Recognition and reward systems for personnel who effectively perform duties of community information development.</li> <li>Information systems to manage collection, storage, analysis, and reporting of data on the capabilities of community partners; technical assistance and training needs for partners to undertake the formation of engagements, planning of initiatives, and implementation; development and maintenance of communication channels and networks; and opportunities to take part in other engagement processes.</li> <li>Policies and procedures regarding collection, storage, release, or publication of information, along with privacy and security safeguards.</li> <li>Fiscal and Physical Support for:         <ul> <li>Personnel, contract, or budget for providing informati</li></ul></li></ul>

Reprinted with permission of John Wiley & Sons, Inc.
References: Butterfoss, 2007; Butterfoss et al., 2009.

CCAT propositions and the principles of community engagement are numbered in accordance with their order in their original context, not according to their position in this table.

#### **Principles of Community Community Coalition Action Theory** Structural Capacity Needed Engagement Propositions: Principles: People Skilled in: 4. Coalitions form in response to an oppor-Be clear about the population/ Information and policy analysis, strategic planning and strategy development, and initiative planning and implementation. tunity, threat, or mandate. communities to be engaged and the goals of the effort. Coalition formation usually begins by Collaborative methods to work with diverse populations and build recruiting a core group of people com-4. Remember that community community capacity to analyze and apply information in decision mitted to resolving the issue. self-determination is the responsibility and right of Open, frequent communication creates a Affiliation and network linkage development, organizational formation, all people who comprise a positive climate for collaborative synergy. collaborative leadership, facilitation, and participatory governance. community. 10. Shared and formalized decision-making · Resource identification and leveraged resource management. Recognize and respect the helps make collaborative synergy more various cultures of a community · Communications development and delivery. likely through member engagement and and other factors that indicate pooling of resources. its diversity in all aspects of Information/Data on: designing and implement- Populations potentially affected by positions under consideration and 12. Strong leadership improves coalition ing community engagement influencing factors of socioeconomic, cultural, and other situational/ functioning and makes collaborative approaches. synergy more likely. Be prepared to release control Population response anticipated based on beliefs, attitudes, past 13. Paid staff with interpersonal and to the community, and be behaviors, and readiness to act and participate. organizational skills can facilitate the flexible enough to meet collaborative process. the changing needs of the Opportunities to engage opinion leaders in position and strategy community. 14. Formalized rules, roles, structures, and procedures make collaborative synergy Community collabora- Symbols, physical location, institutions, and events likely to improve more likely. tion requires long-term engagement. commitment. 16. Synergistic pooling of resources pro-Organizational Structures to: motes effective assessment, planning, Establish information systems to obtain formative information on and implementation. issues for which community engagement is needed. 17. Comprehensive assessment and plan-• Analyze the range of solutions or actions, unintended consequences, ning aid successful implementation of and the opportunities to successfully address the issue(s) where comeffective strategies. munity engagement is intended. 18. Coalitions that direct interventions at · Project resource needs and potential ways to attract, leverage, and multiple levels are more likely to create manage resources. change in community policies, practices, and environments. Determine organizational position and strategies to initiate community dialogue on perceived issues. · Present positions and negotiate consensus on community actions or what outcomes to achieve. Recognize and reward personnel that effectively perform community engagement and strategy development duties. Fiscal and Physical Support for: · Personnel budget for strategic and program planning. · Personnel budget for facilitating development of community capacity Budget for strategic and program planning. Office space for staff engaged in strategic and program planning. Communication and computer hardware and other office equipment to support position and strategy development activities.

Reprinted with permission of John Wiley & Sons, Inc. References: Butterfoss, 2007; Butterfoss et al., 2009.

<sup>2</sup>CCAT propositions and the principles of community engagement are numbered in accordance with their order in their original context, not according to their position in this table.

Table 4.3. Build and Sustain Networks to Maintain Relationships, Communications, and Leveraging of Resources<sup>3</sup>

Cor	nmunity Coalition Action Theory	Principles of Community Engagement	Structural Capacity Needed
<b>Pro</b> 5.	positions: Coalitions are more likely to form when the convening group provides technical/ material/networking assistance and credibility.	Principles: 3. To create community mobilization process, build trust and relationships and get commitments from formal and informal leadership.	People Skilled in:  Network analysis and affiliation processes, engagement processes that respect diverse populations and viewpoints, collaborative leadership, network formation and ethical management of asymmetrical power relationships, resource identification and leveraged resource management, and communications development and delivery.
6.	Coalition formation is more likely when there is participation from community gatekeepers.	7. Sustainability results from identifying and mobilizing	Information/Data on:  Network demographics and socioeconomic status.
7.	Coalition formation usually begins by recruiting a core group of people committed to resolving the issue.	community assets and from developing capacities and resources.	Network cultural beliefs, attitudes, and behaviors regarding health and other aspects of community life.
8.	More effective coalitions result when the core group expands to include participants who represent diverse interest groups.	Community collaboration requires long-term commitment.	Network structures and opinion leaders within these structures.      Network "boundary-spanners" who provide linkage across population and system segments of the community.
9.	Open, frequent communication creates a positive climate for collaborative synergy.		Organizational Structures to:     Recognize and reward personnel who effectively perform community engagement network duties.
12.	Strong leadership improves coalition functioning and makes collaborative synergy more likely.		Identify and understand the patterns of communication, influence, and resource flow.
13.	Paid staff with interpersonal and organizational skills can facilitate the collaborative process.		Establish information systems to manage and maintain trusted two- way network communication.
15.	Satisfied and committed members will participate more fully in the work of the coalition.		Encourage personnel to affiliate with formal and informal organizations and groups across the community and leverage those affiliation points to support the organization's network structures (communication, power/influence, and resource flow).
16.	Synergistic pooling of resources promotes effective assessment, planning, and implementation.		Establish information systems to support network formation and affiliation processes, network planning and implementation, and network resource identification and leveraged management.
17.	Comprehensive assessment and planning aid successful implementation of		Oversee communications and policy-related activities needed to leverage resources within the network structure.
	effective strategies.		Establish, use, and monitor resource exchange systems that support network interactions and coordinated community collaborative work.
			Fiscal and Physical Support for:  Personnel budget for network development and maintenance.
			Personnel budget to support and reward personnel performance in network development and maintenance.
			Office space for staff engaged in network development and maintenance.
			Communication and computer hardware and other office equipment to support mobilization activities.

Reprinted with permission of John Wiley & Sons, Inc.
References: Butterfoss, 2007; Butterfoss et al., 2009.

3 CCAT propositions and the principles of community engagement are numbered in accordance with their order in their original context, not according to their position in this table.

## **Community Coalition** Action Theory Propositions:

- Coalition formation is more likely when there is participation from community gatekeepers.
- Coalition formation usually begins by recruiting a core group of people committed to resolving the issue.
- 10. Shared and formalized decision-making helps make collaborative synergy more likely through member engagement and pooling of resources.
- 11. Conflict management helps create a positive organizational climate, ensures that benefits outweigh costs, and achieves pooling of resources and member engagement.
- 12. Strong leadership improves coalition functioning and makes collaborative synergy more likely.
- 13. Paid staff with interpersonal and organizational skills can facilitate the collaborative process.
- 14. Formalized rules, roles, structures, and procedures make collaborative synergy more likely.
- 15. Satisfied and committed members will participate more fully in the work of the coalition.
- 16. Synergistic pooling of resources promotes effective assessment, planning, and implementation.
- 17. Comprehensive assessment and planning aid successful implementation of effective strategies.
- 18. Coalitions that direct interventions at multiple levels are more likely to create change in community policies, practices, and environments.

#### Principles of Community Engagement

#### Principles:

- 4. Remember and accept that community self-determination is the responsibility and right of all people who comprise a community. No external entity should assume it could bestow to a community the power to act in its own self-interest.
- Partnering with the community is necessary to create change and improve health.
- Recognize and respect the various cultures of a community and other factors that indicate its diversity in all aspects of designing and implementing community engagement approaches.
- Sustainability results from identifying and mobilizing community assets and from developing capacities and resources.
- Be prepared to release control to the community, and be flexible enough to meet the changing needs of the community.
- Community collaboration requires long-term commitment.

#### Structural Capacity Needed

#### People Skilled in:

- Mobilization and engagement processes, execution of mobilization strategies, initiative planning and implementation, collaborative organizational formation and participatory governance, listening, appreciating diverse populations and viewpoints, collaborative leadership to ethically manage asymmetric power relationships, resource identification, and leveraged resource management, and communications development and delivery.
- · Technical assistance and training to build partner capacity to participate in community actions.

#### Information/Data on:

- Emerging or new competitive viewpoints and cultural beliefs, attitudes, and behaviors regarding health and other aspects of community life.
- Shifts in community structures and opinions of leaders within these structures.
- Impacts of engagement and mobilization efforts

#### Organizational Structures to:

- Collectively govern the collaborative process and communicate effectively with community partners.
- · Establish information systems to manage and maintain trusted twoway network communication.
- Establish information systems to support affiliations and mobilization process of engagement initiatives, contingency planning to adapt implementation of collaborative interventions, and feedback on use and management of network resources.
- · Deliver technical assistance and training.
- Establish information systems to provide feedback loops to evaluate impacts of engagement and intervention mobilization efforts.
- Track personnel affiliated with formal and informal organizations and groups across the community.
- Leverage affiliation points to support the organization's network and mobilization activities (communication, power/influence, resource flow, and collaborative interventions).
- · Oversee communications and policy-related activities network and mobilization activities.
- Manage resource exchange needed to accomplish coordinated community collaborative work.
- Recognize and reward personnel that effectively perform community engagement and social mobilization duties.

#### Fiscal and Physical Support for:

- Personnel budget for managing and evaluating mobilization activities that address active communication, power relationships, resource flow and use, and other collaborative processes.
- Personnel budget to support and reward personnel performance in managing and evaluating mobilization activities.
- Office space for staff engaged in managing and evaluating mobilization activities.
- Communication and computer hardware and other office equipment to support mobilization activities.

Reprinted with permission of John Wiley & Sons, Inc.

References: Butterfoss, 2007; Butterfoss et al., 2009.

 $^4$ CCCAT propositions and the principles of community engagement are numbered in accordance with their order in their original context, not according to their position in this table.