



Fostering Partnerships to Provide Community Response to Historically Underserved Individuals

Webinar 1: Fostering community partnerships: How to (re)build trust and create strong relationships

January 9, 2023

Agenda

- Roles in Fostering Partnerships
- Community Partnering: A Unique Approach
 - Community Partnering vs Stakeholder Engagement
 - Advancing Equity
- Community Partnering and Mobile Crisis
- Approaches to Navigating Partnership
- Potential Challenges and Solutions
- Building on Local Resources and Meeting Needs
- Outcomes of Effective Partnering
- State Support for Local Implementation

Meet the Team



Jordan Gulley
Senior Consultant
jgulley@tacinc.org



Megan Lee
Senior Associate
mlee@tacinc.org

Mobile Crisis and Community Partnering: Everyone has a role



Many states or counties lay the foundation for local implementation of mobile crisis.



Communities are not a monolith and solutions for transformative crisis response systems are found at the local level, responding to the unique needs of the *entire* community.



However, both states/counties and localities play a vital role in supporting more responsive crisis services. And they need to be aligned in their strategies.



This webinar focuses on the practices at the local level as well as state strategies that support a more holistic response to communities that have been ineffectively served or underserved.

Community Partnering vs Stakeholder Engagement

Stakeholder Engagement

- Often has representation based on convenience
 - ▶ Tends to favor certain groups or promote tokenism
- Lacks shared decision-making
- Perpetuates power imbalances
- Takes a retrospective approach
- Language matters
 - ▶ Historic connotation and term rooted in colonization

Community Partnering

- Happens at the local community level
- Intentional focus on equity and trust building/repair
- Seeks to partner with individuals in all phases of planning and implementation
 - ▶ Rather than utilize their knowledge or perpetuate tokenism
- Involves people in shared decision-making about the programs or policies that directly affect them
- Builds upon wisdom and strengths present at the local level and those most impacted by the system

Intentional Community Partnering to Advance Equity



Cyril, S., Smith, B. J., Possamai-Inesedy, A., & Renzaho, A. M. (2015). Exploring the role of community engagement in improving the health of disadvantaged populations: a systematic review. *Global health action*, 8, 29842. <https://doi.org/10.3402/gha.v8.29842>

- Communities, particularly communities of color, have been harmed by ineffective crisis systems
 - ▶ This has created mistrust among turning to those institutions of support
- Partnering should be centered in equity and focused on being culturally responsive
- Fostering trust and partnership has been found to improve program/system efficacy and highlights unintended and unforeseen barriers to access
- Effective engagement and partnering within systems and programs has been found to improve health outcomes for historically marginalized populations

Community Partnering and Mobile Crisis

Why is community partnering so important for mobile crisis response teams?

- It makes for a better intervention
- Mobile crisis, by definition, happens in the community
- Mobile crisis has long been viewed as a level of care assessment, tending toward removing people from their communities
- People tend to fare better when they stay in community following a crisis episode
- Mobile crisis teams partnered with community supports offer interventions that are more effective, relevant, and trusted
- Effective partnering can lead to increased referrals, innovative team models, streamlined communication during a crisis, and increased likelihood of keep individuals in their communities

Community Partnering and Mobile Crisis

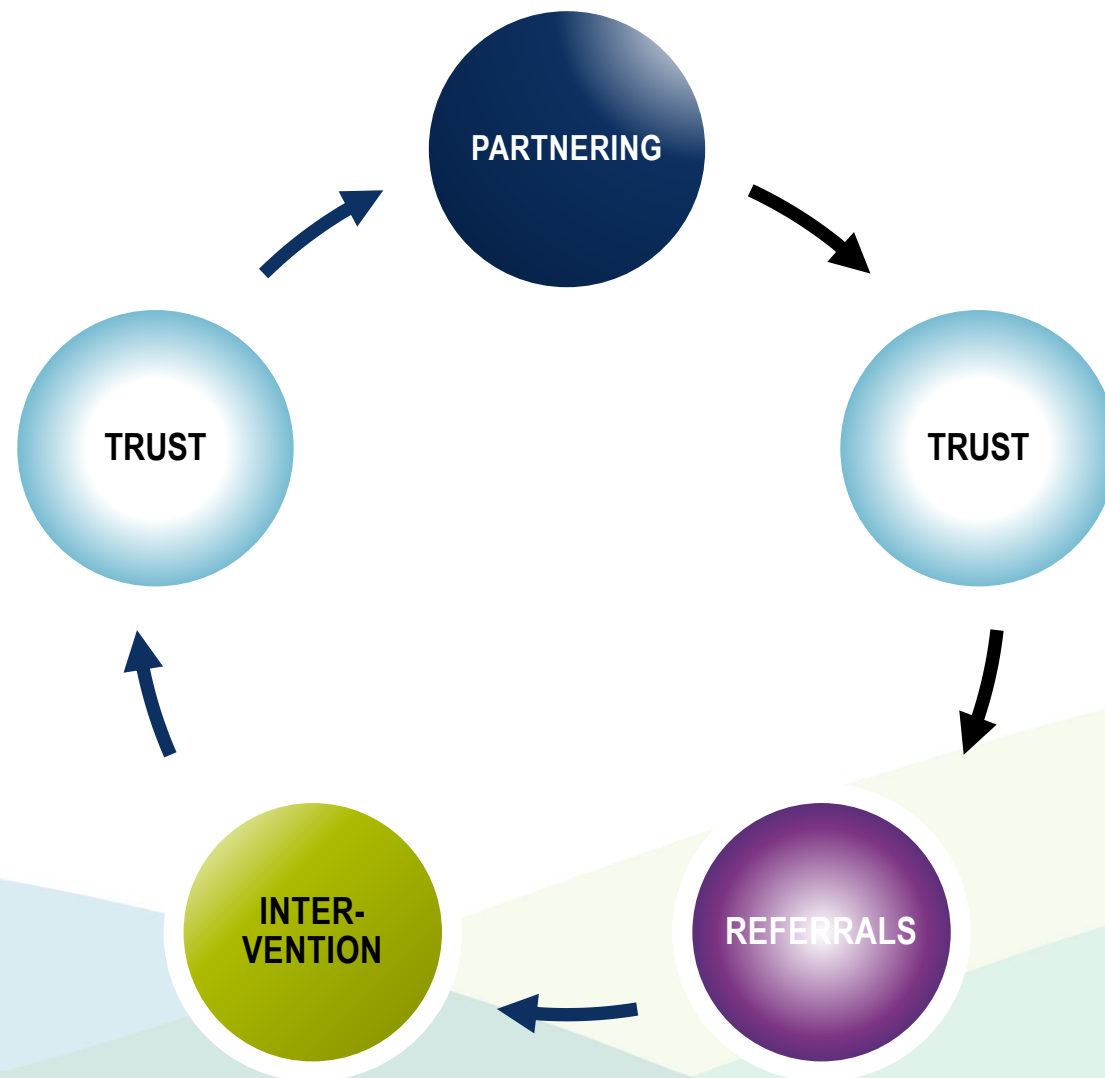
Why is community partnering so important for mobile crisis response teams? It strengthens community trust in the provider and can repair generational harm

- Strong community supports = protective factors against what contributes to crises
- Community partnering for mobile crisis teams is more than just eliciting stakeholder feedback. It is an ongoing, iterative, mutually beneficial partnership that can influence the MCR workflow and the community's willingness to reach out
- Groups of people or individuals have experienced harm by service providers and government institutions including by coercion, forced treatment, and law enforcement interactions which happen at higher rates for communities of color
 - Adopting or strengthening an ethos of community-based care and ethical partnerships can work toward healing

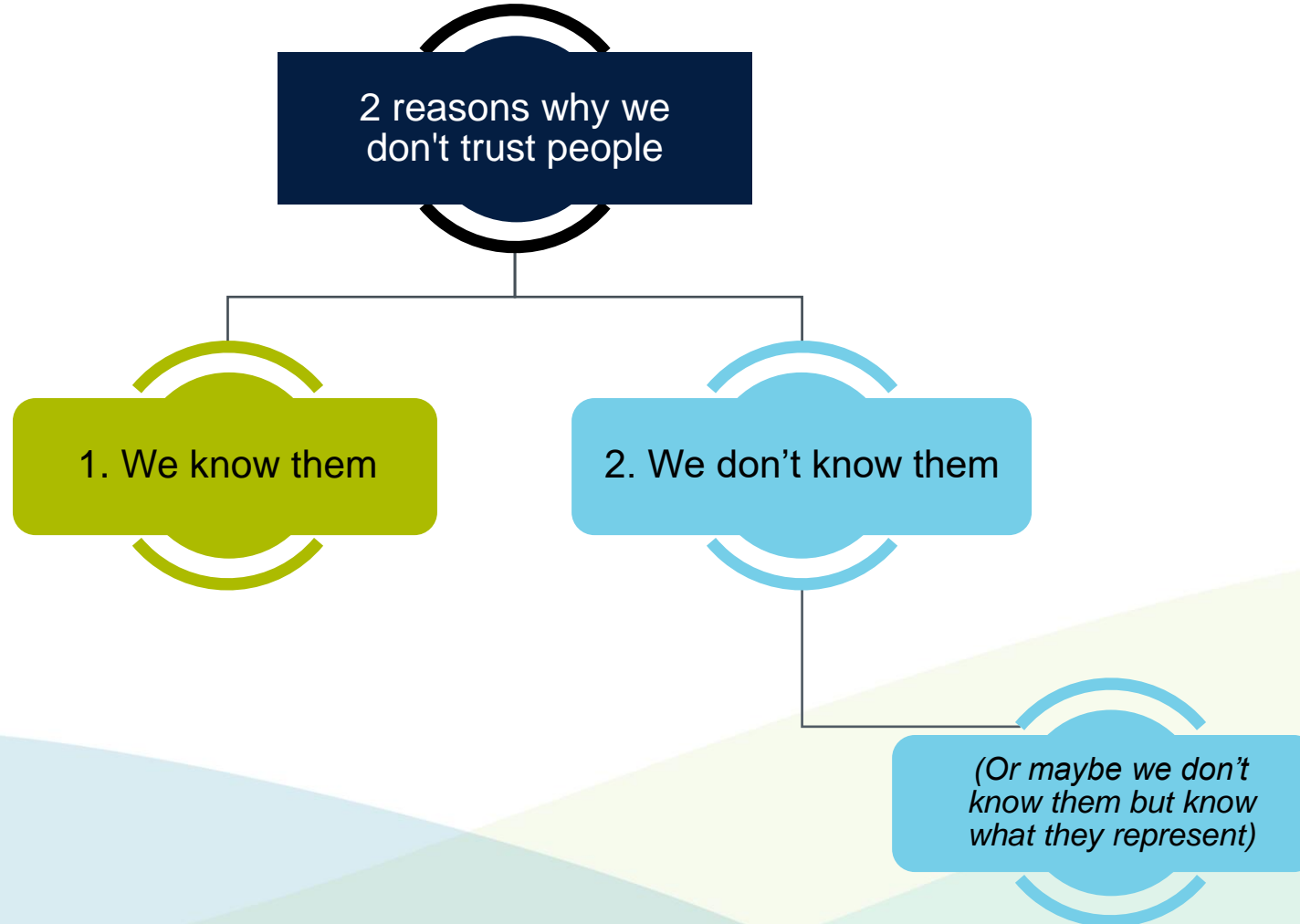
Defining Community Partners

- Individuals with Lived Experience
- Homelessness systems
- Law enforcement
- Emergency Medical Services (EMS)
- Places of worship
- Barbershops
- Recreation centers
- Food pantries
- Primary care providers
- Schools
- Outpatient Providers
- Hospitals
- Community Centers
- Youth groups
- Gyms
- Pediatricians
- Credible messengers

Community Partnering and Mobile Crisis



Navigating Community Partnerships



Navigating Community Partnerships

- Identify all groups who will be impacted by the mobile crisis response flow
 - ▶ Identify community groups impacted most by crisis situations, including those not currently touched by mobile crisis response
- Assess the state of the partnerships
 - ▶ Shared language/Understanding
 - ▶ Functional working relationship
- Specify roles within partnership
- Promote collaboration through mutually beneficial offerings
 - ▶ Shared decision-making
 - ▶ Lived experience- driven planning
- Identify new partners and evaluate who is "missing from the table"

Challenges to Effective Community Partnering

Common Challenges to Effective Partnering	How this Challenge May Look
Time Constraints	Crisis operations impacting ability to effectively engage partners; regulations and mandates setting timeframes
Capacity	Workforce issues/staff turnover limiting consistent relationship development
Status quo/Liability based system	Hesitation to change or innovation or alternatives to support individuals experiencing crisis
Lack of Recognition	Power-imbalances and lack of shared decision making; lack of engagement of PWLE
Tokenism	A single person or persons representing the broader racially or socially marginalized community
Mistrust	Experiences with system creating hesitation to engage
Incongruent values	Competing interest, goals and intended outcomes



Challenges to Effective Community Partnering

Common Challenges to Effective Partnering	Local Strategies	State Strategies
Time Constraints	Dedicated staff members to community engagement and partnerships	Manage expectations for implementation timelines, account for community partnering when setting rates
Capacity	Identify roles that can take on the community partnering responsibilities outlined in contract	Create a BH workforce pipeline and prioritize community partnering in contracting
Status quo & Liability based system	Constantly engage in self-reflection and agency assessment of patterns which perpetuate harm and work toward repair	Constantly engage in self-reflection and agency assessment of patterns which perpetuate harm and work toward repair
Lack of Recognition	Regularly engaging PWLE and the broader community to gather feedback on program and utilize feedback to make programmatic changes	Hire PWLE in leadership roles and engage in partnering at the state level to guide planning and implementation
Tokenism	Ensure diverse representation and peer to peer outreach to identify and engage missing partners	Create local feedback loops and engage in intentional and sustained partnering at a state level
Mistrust	Identify a community champion/credible messenger to bridge gaps into communities rather than hand-pick a select few PWLE	Acknowledge the harm, take intentional steps to redevelop trust, show up authentically in small community groups; make changes driven by community
Incongruent values	Take the time to engage different perspectives with intent of shared understanding to attempt to align	Modify expectations and operations based on community feedback

Ethically Engage Local Resources

“Behavioral health officials must see culture as a cornerstone of resilience and wellbeing.”

- Within communities is where we see the strength, support, and resources most relevant and important to the individual experiencing the crisis.
- Engage the community and people with lived experience throughout program and intervention design.
- Adequately compensate community and People with Lived Experience (PWLE) for their expertise in this process.
- Honor the diversity of approaches to healing and consider how community-centered design can move toward a healing and holistic approach to crisis care.

Fostering Partnerships with Local Resources

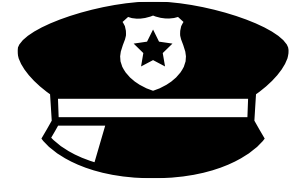
A case study



Law Enforcement and Mobile Crisis

- Many communities continue to grapple with whether and how to involve law enforcement in behavioral health crisis.
- This is exacerbated by workforce shortages and in rural communities where 911/Law Enforcement often serve the primary (at times only) response.
- Effective collaboration is essential to responding to the needs of the community regardless of what number (988, crisis hotline, 911) is contacted.
- Partnership should be focused on reducing unnecessary contact with law enforcement for those experiencing a behavioral health crisis.

Fostering Partnerships with Law Enforcement



- To promote close collaboration and honor the distinct and important roles each plays in crisis response, employ the following strategies:
 - Identify protocols and appropriate role for law enforcement
 - Have regular meetings to maintain good will
 - Host cross-trainings
 - Develop a shared language
 - Share outcomes for continuous quality improvement
 - Formally debrief with *all* community partners after critical situations
- Mobile teams should consider timeliness and role definition in law enforcement interactions.

Build Effective Protocols

- Whether with law enforcement or other community partner, protocols for community-partnered response are essential tools for effective collaboration.
- Protocol development should be driven by PWLE
 - ▶ Consider the following opportunities:
 - Medical clearance
 - Care coordination
 - Referrals in and out
 - Community-based supports
 - Follow-up
- Memorandums of Understanding (MOUs) or formalized information-sharing

Being Responsive to the Needs of the Community

- Whatever partnerships are formed, or protocols developed, centering the voice and expertise of the people with lived experience (PWLE) and potential utilizers of the services should be the foremost effort.
- Harmful or exploitive partnerships cannot be fixed with a great protocol.
- The community has its own solutions.



When all is said and done, the real citadel of strength of any community is in the hearts and minds and desires of those who dwell there.

– Everett Dirkson



Desired Outcomes

- Increases transparency and trust
- Creates programs informed by needs and community commitment to outcomes
- Creates sustainable change
- Community Partnering allows for continuous quality improvement and creates real-time change within the system

State Support for Community Partnering

Community partnering should happen at the local level and State Behavioral Health Authorities and Medicaid Agencies can support local implementation

The following strategies can support mobile crisis teams in engaging in community partnering:

- Utilizing contract levers to ensure effective community partnership and collaboration
- Promote technical assistance and training of effective community-based solutions and community engagement
- Invest in community partnering and promote opportunities for adequate compensation for PWLE
- Community Partnering should be considered in rate setting strategies and included in infrastructure development costs

Closing

As behavioral health professionals, we have a profound responsibility to our communities to recognize the imbalance of power that permeates the history of behavioral health care design and delivery. By tapping into the expertise of people with lived experience, elders, community members, natural helpers, and other partners, we can reshape the ethos of behavioral health care from one of power imbalance and erasure of cultural identity, to one that celebrates the strengths, identities, and wisdom of the people and communities we serve.

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