

Community-Identified Strategies:

Prevention During Times
of Compounding Crises





Strategy 1

Expand the understanding of and approach to "prevention" in order to achieve health equity.



“I would say the way that we know that we're having a thriving community is when you as the individual, when you're in community, you don't feel like an outsider. You feel like there's a connection. And there are two kinds of distinctions, one that you have value to add. So you're able to contribute to the community and the community is contributing something to you.”





“I've often advocated for funders to really fully understand the work of community-based organizations. And the ideal way would be to partner with us. If you are saying you're partners, really be partners, be present with us and hear us out. We'll also hear you out, and we have to work in a really true partnership fashion, not where funders still dictate a lot of what you do.

No, true partnership is really about co-creation. So how do we do co-create together, right? Because I have the connection to the community. You have some connection to the funding and connection to enact policy changes. To me, it's about us strategically being together and building community at the same time together. And it isn't just like there's a hierarchy here.”



Strategy 2

Center the voices, leadership, and expertise of those most impacted by the conditions that create barriers to health equity; address systemic conditions that propagate disparities.





“I’ll say this, 2020 lifted up the rug of all the ugliness we’ve swept under the rug. And it just said, ‘You know what, no more rug. Have all your crap and then not only just have it, we’re going to place more crap on top of it.’ And it’s really forced organizations and funders to think about how do we do community work.”

“I think in some communities, the wrong people are coming to the table.”



Strategy 3

Support, amplify, and invest in community-based organizations that meet community need and work toward health equity.



“We knew our community was going to be completely isolated, and we just refused to not show up one more time. You know, like that's just what our disability community experiences that people forget to plan a program for them until well after they've done so for the mainstream. So stop showing up. So we just kept showing up.”

"A lot of the provisions that were given to nurses and doctors, like the daycare support and things like that, were not given to advocates."





Strategy 4

“Pause and pivot” to ensure any adaptations to prevention programming actually meet community need; systems partners need to create and support infrastructures that allow this flexibility.



“One thing we learned is people use technology in different ways, so we would get guys that would come into our programming, but they're in the same rooms as their children or their partner, so they don't feel comfortable talking about what was happening.

So we had to take a hard pause, stop, and ask them. ‘What could we do to help make this more effective for you?’ Instead of us just assuming that what we could do was replicate what we've done in person.

One thing we found out is that they wanted to just have disclosed conversations and they wanted to do it collectively. But they realized that wasn't going to be the most effective. So they just said, ‘Let's just do one-on-one.’ So we would meet them in parks and instead of them just meeting with one case manager, they would meet with the team so they could still have a facilitated dialogue. But they weren't isolated. Then, for those who were a little bit more technologically sound, they could do it on Zoom with the other staff.”



Strategy 5

Adopt community-connectedness as the foundation of prevention.



“So to me, when we talk about healthy, thriving and flourishing communities, it has to be a partnership. It can't just be your organization coming in with the cape on and you're being a superhero to save the community.”

“We did help [our county] with a COVID testing site for the summer months. Yeah, just having us there was really nice because more of the Hmong community maybe felt more inclined to come out, and they talked to us so much because they just needed the information. It helped that we had interpreters there and translators. Then we did get to meet with community members and just reassure them that this is just to be safe. We're glad that you're here. This is the process of how testing would look like and it was just so nice because it was so accessible. Like nowadays I feel like a lot of testing sites are drive through or a clinic setting or something like that where it is harder for them.”



Community Narrative:

<https://www.menaspeacemakers.org/mdhreport>



**WE ARE ALL
CONNECTED.**

"When we recognize that we are all connected, we accept a deep responsibility for the ways our choices impact everyone around us – for good or for harm."

 **MEN AS PEACEMAKERS**

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Community-Identified Strategies: Injury and Violence Prevention During Times of Compounding Crises

A partnership with **MEN AS PEACEMAKERS** | **WE ARE ALL CONNECTED.**

Community-Identified Strategies for Prevention in a
 understanding of and approach to "prevention" in order
 for prevention efforts with basic community health and
 of community level trauma in prevention programming
 signed by the community being served. Communities are
 partners cannot be one size fits all.
 address as the foundation for prevention work.

ions, leadership, and expertise of those most impacted
 rate barriers to health equity; address systemic
 e disparities.

to control the barriers to health equity. Crisis events amplify the
 SPOCs continue to work to address.

men efforts inadvertently amplify community harm, when
 rooted from communities, initiatives are ineffective at best, and
 able to create additional harm.

ally, and invest in community-based organizations that
 and work toward health equity.

- Support community based prevention organizations to respond to emergent increased
 community need

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CONNECTED.**

Prevention Toolkit:

<https://www.menaspeacemakers.org/preventiontoolkit>

WEBINAR # 1

EXPANDING OUR APPROACH TO “PREVENTION”: ADDRESSING INDIVIDUAL
& COMMUNITY-LEVEL TRAUMA

WEBINAR #2

WE ARE ALL CONNECTED: HOW FUNDERS & MAINSTREAM ORGS CAN
SUPPORT CULTURALLY-SPECIFIC COMMUNITY-BASED PREVENTION ORGS

WEBINAR # 3

PAUSE AND PIVOT: CREATING AN ORGANIZATIONAL CRISIS PLAN