

University
of
Minnesota
memo

Corres - Carlaw

date April 27, 19 82

to David Murray and Ray Carlaw ✓

from Henry Blackburn

I'd be grateful for your calling me today on any gross deficiencies in this, and responding at your lesiure with your rewrite of it.

Thanks.

Enclosure

/jml

APRIL 26, 1982

DM o R Carlson

MHHP COMMUNITY ADVISORY BOARD

THE CONCEPTS BEHIND THE PROVISION OF LOCAL COMMUNITY ADVISORY BOARDS FOR THE MINNESOTA HEART HEALTH PROGRAM (MHHP) INCLUDE THE ESTABLISHMENT OF LEGITIMACY, CREDIBILITY AND IDENTITY IN THE COMMUNITY, TO SECURE ADVICE ON THE APPROPRIATENESS OF PROGRAMS FOR THAT COMMUNITY, TO INTERPRET COMMUNITY REACTIONS, TO SERVE AS EXAMPLES AND ROLE MODELS, TO PARTICIPATE ON TASK FORCES, AND AID IN THE RECRUITMENT OF OTHER COMMUNITY LEADERS TO PROGRAM ACTIVITIES, AND TO PROVIDE A FRAMEWORK FOR CONTINUED COMMUNITY FUNCTION IN HEALTH PROMOTION BEYOND THE RESEARCH AND DEMONSTRATION PERIOD.

THE GOALS OF THE CAB IN THE FIRST EDUCATED COMMUNITY, MANKATO, HAVE ALREADY BEEN MET EFFECTIVELY: WIDE REPRESENTATION OF THE COMMUNITY LEADERSHIP IS INVOLVED, THEIR PARTICIPATION IS REGULAR AND DEVOTED, AND THEIR LEADERSHIP IS MANIFEST IN TASK FORCE ACTIVITIES. THEY HAVE EFFECTIVELY OPENED THE COMMUNITY TO THE MHHP, AND SHARED ITS OWNERSHIP.

THE ORGANIZATION INVOLVES A 20 PERSON COMMUNITY GROUP DRAWN FROM THE PASTORAL ASSOCIATION, SCHOOL DIRECTORS, THE LOCAL MEDICAL CLINIC AND SOCIETY, FROM BANK OFFICIALS, AND THE PRESIDENTS OF LEADING INDUSTRIES, DIRECTORS OF EXISTING HEALTH AGENCIES, AND GOVERNMENT LEADERS.

THE CAB IS STAFFED BY MANKATO HEART HEALTH PROGRAM COORDINATORS AND STAFF TO CREATE MINUTES AND SET UP MEETINGS. THE DELIVERY SYSTEM FOR THE CAB IS ITS EXECUTIVE COMMITTEE AND SIX TASK FORCES, ONE FOR EACH HEALTH MESSAGE CAMPAIGN PLUS A MEDIA ADVISORY COMMITTEE AND A COMMITTEE DIRECTLY ADVISING THE HEALTH EDUCATION CENTER. THESE ARE ALSO STAFFED BY OUR MANKATO ORGANIZATION.

THE CAB RELATES TO MHHP STRATEGY AND PROGRAM BY REVIEWING THE CENTRAL PROGRAM, PROVIDING CAMPAIGN IDEAS, AND SERVING AS A CENTERPIECE FOR OVERALL COMMUNITY INVOLVEMENT.

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MAJOR ACCOMPLISHMENTS OF THE CAB INCLUDE ITS REGULAR PARTICIPATION (ALMOST 100% ATTENDANCE OF ITS EXECUTIVE COMMITTEE) AND THE RECRUITMENT AND ACTIVE INVOLVEMENT OF 100 COMMUNITY LEADERS IN ITS TASK FORCE ACTIVITIES.

THE MAJOR PROBLEMS OF THE CAB HAVE BEEN RELATED TO OUR STAFF SHAKE-UP (LOCAL DIRECTOR AND LIAISON PERSONS), PROGRAMS HAVING INSUFFICIENT ADVANCE EXPLANATION, NOTICE AND PREPARATION, AND OUR CENTRAL FAILURE TO MEET SOME DEADLINES.

OTHER PROBLEMS HAVE TO DO WITH OUR MANAGEMENT, WITH THE NEED FOR RESOLUTION OF NATURAL TENSIONS BETWEEN THE UNIVERSITY RESEARCH COMPONENTS AND THE CAB'S PRIMARY CONCERN WITH THE COMMUNITY SERVICE ELEMENT, AND IN WORKING OUT AREAS OF RESPONSIBILITY AND CONTROL UNIQUE TO A RESEARCH PROJECT WITH THESE COMBINED RESEARCH AND SERVICE ELEMENTS.

SHORT RANGE PLANS OF THE BOARD ARE TO COMPLETE THE FIRST YEAR'S TASK FORCE ASSIGNMENTS AND PREPARE THE SECOND YEAR CAMPAIGNS AND TO DEVELOP STRATEGIES FOR TURNOVER OF MEMBERSHIP (30% PER YEAR AND TASK FORCE CHAIRPERSONS REMAINING ON THE BOARD). THE DEVELOPMENT OF A COMMUNITY ADVISORY BOARD MODEL APPROPRIATE FOR FARGO/MOORHEAD IS UNDERWAY.

THE RESEARCH COMPONENT OF THE CAB ACTIVITY IS MINIMAL, BUT THERE IS ONGOING EVALUATION OF TASK FORCE FUNCTION WITH DESCRIPTION OF ITS NATURAL HISTORY, THE INVOLVEMENT OF COMMUNITY ANALYSIS IN PRE-SELECTION OF ITS MEMBERSHIP, THE DEVELOPMENT ON THE TASK FORCE'S "SENSE OF OWNERSHIP" OF THE PROJECT, AND ANALYSIS OF THE PROCESS OF TASK FORCE ACTIVITY.

THE UNIQUENESS OF THE CAB IN MHHP IS THAT IT IS UNCOMMON IN THE HEALTH FIELD, AND HAS SUCH AN UNCOMMONLY HIGH PARTICIPATION RATE.

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THE LIMITATIONS HAVE TO DO WITH LOSS OF CONTROL OF THE PROGRAM AND THE EFFECTS ON DESIGN, OPERATION AND INTERPRETATION IN ANY SITUATION "OWNED" OUTSIDE THE RESEARCH BASE.