



# FACT SHEET

## The Community Engagement Initiative: A Grassroots Approach to Improving Access

### Why It Matters

Participating in the community contributes to a person's physical, emotional and spiritual well-being. But for people with disabilities, community participation can be difficult. This includes activities like going out to a restaurant, visiting the doctor, using public transportation or attending a local gym.

People can make a difference in their communities, though. They can use tools for social planning, social action, and community development to make change.

The Community Engagement Initiative, which we call "CEI," is one of those tools. The CEI gives people a tested process to follow that makes community participation easier. They begin by identifying local barriers that people with disabilities experience, then work with others in the community to create solutions.

### How It Works:

#### Four Steps to Improve Community Access

The CEI is a grassroots process designed to improve access to key areas of life for people with disabilities. In this research project, we focus on **access to health care and recreational opportunities**.

We have partnered with Centers for Independent Living (CILs) and other community-based organizations (CBOs) to carry out the CEI in their communities.



One or two staff members in each organization leads the four-step process:

- **A town hall meeting.** People with disabilities, their families and advocates meet to identify the barriers to health care and recreation in their community. Then they prioritize these barriers, deciding which ones are most important to address first or the easiest to change.
- **A community collaboration meeting.** People who attended the town hall meeting meet with representatives from other local organizations to discuss the most important barriers. Together, they decide which barriers to work on. This group may include representatives from the local bus company, the community hospital, the city's Parks and Rec program, or even the mayor's office – any group or business that might help remove the barriers.

The CEI Facilitator's Guide (shown at right) is a resource for centers for independent living and other community-based organizations that use this grassroots process to make change in their communities.



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*“[The CEI] opened a good collaborative process that can be replicated in other parts of the valley. It helped identify potential partners and steps to expand [transportation] service in the future.”*

*- CEI Community Member Participant*

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- **A mobilization process.** Volunteers from the two meetings and other interested people work together to create solutions. They carry out plans to remove or decrease the barriers to health care and recreation.
- **An evaluation process.** Reports by the people who take part in the CEI help our researchers understand what worked, what made it work and what didn't work so that we can improve the CEI process for other communities to use.

### **Where and How We Worked**

For this research project, we partnered with eight CILs and other CBOs in two states, New Hampshire and Montana. They had nine months to use the CEI process in their communities.

We know from previous research that the CEI process helps communities make change. However, we don't know the best way to transfer knowledge about this tool to new users. So in this project we asked:

#### **How much technical assistance does an organization need to successfully use the CEI?**

To answer this question, the research team provided three different levels of knowledge transfer (KT) support to the lead organizations:

- **Every organization** that took part in this study received \$4,000, a how-to CEI manual, and access to resources, tools and materials on the CEI website.
- **KT Intensive Assistance** organizations also got in-person training and onsite technical assistance from the research team.
- **KT Moderate Assistance** organizations also got in-person training from the research team (but no onsite technical assistance).
- **KT Minimal Assistance** organizations did not receive extra assistance from the research team (no in-person training or onsite technical assistance).

## Types of Barriers: What Needs Fixing?

What makes it hard for people with disabilities to get the health care and recreation that they need? At the CEI town hall meeting, participants identify three types of barriers: transportation, community design, and attitudes and communication. These examples from our research communities show some of the barriers they decided to work on.



### **Transportation Barriers**

- Public transit has no afterhours or weekend service.
- The only transportation service is a cab company with no accessible van and drivers who smoke cigarettes.
- The hospital doesn't have a shuttle service.
- Bus service to and from nearby communities is limited.



### **Community Design Barriers**

- Lack of accessible parking downtown and at recreational sites.
- Businesses and recreation centers have inaccessible entries and interiors (heavy doors, narrow aisles).
- Lack of recreation activities, including indoor opportunities for winter.
- Playgrounds and picnic tables at parks are not accessible.



### **Attitude and Communication Barriers**

- Need for community awareness and public education regarding person-first language.
- Lack of awareness among health care providers of mental health issues.
- Ramps are provided "at the back door."
- Accessible parking is abused.



### **Other Barriers**

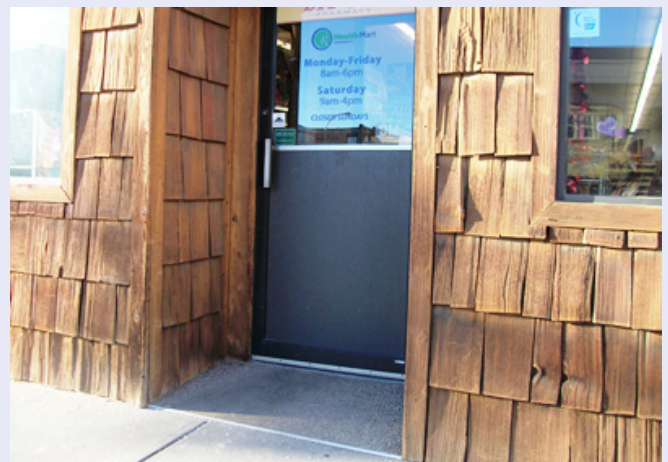
- Parks and Recreation staff need training to work with kids with disabilities.
- Better marketing of programs is needed so people will know what's available.

## What Are the Barriers to Community Participation?

Some barriers are visible, like these design examples. Others relate to transportation options or attitudes and communication.



Lack of accessible parking



Heavy entrance door



Narrow, crowded aisles

## Community Success Stories

Participating communities are still working on the goals they set to resolve the important barriers they identified. Here are a few accomplishments so far.

- In one city, signage has been ordered for an unmarked, low-grade, accessible hiking trail. Mileage signs have been posted along the trail, and plans are underway to install a kiosk and map. Plus, new materials about public transportation schedules and locations have been created and distributed.
- Work groups in another town addressed the lack of recreation activities by hosting community dances and starting a cribbage night at a local coffee house.
- New accessible parking spaces have been added downtown in one community. Other changes include: additional bus stops have been added with new signage to clearly mark each stop; sidewalk repairs have been included in the town's the budget; and city management and personnel became more aware of access issues.
- One city re-established its local transportation committee. This committee is looking for local resources for accessible transportation options and working to involve the right people in efforts to improve transportation.
- A community center in one town purchased a 14-passenger van with a lift. In addition: the CEI committee reviewed blueprints to see that new buildings are barrier free; a community newsletter was re-established; and committee members are increasing awareness of person-first language by giving presentations to groups and businesses.

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*“The CEI process helped raise awareness around recreation access. Prior to this, accessible recreation was null.”*

*- CEI Facilitator*

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## Next Steps

Our goal is to empower people with disabilities to increase their community participation. This research enables us to offer CILs and other CBOs a tested method for making change in their local communities.

Some of the communities in this study resolved more of their barriers than others, and they made different types of changes. For example, one group's work led to a large purchase – an accessible van – while others took smaller steps, like creating easy-to-use bus schedules. That is the benefit of the CEI: The people who are “the grassroots” decide what is needed and work together to make it reality.

We will evaluate the experiences each community had with this process so we can understand the best way to share the CEI with new users.

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