

## Putting People First: Working with Hospitals to Improve Community Health

## Who Is – and Is Not – In the Room/Lifeboat Exercise<sup>1</sup> (15 minutes)

*Dialogue:* We want to talk a little bit more about is who is here. From the introductions we have some indication of who we are in this room, but let's dig a little deeper and find out what some of our commonalities and interests are.

**Note to Facilitator:** The goal of the Lifeboat Exercise is to help identify who is – and who is not – in the room and to create understanding about why that's important. This exercise helps participants get to know each other and provides an introduction to thinking about different perspectives of a group or a community.

*Dialogue:* Our analysis of the health care issues in our community will be influenced by who makes up our group. This group represents only a slice of the community, so we will also need to note whose perspective is missing, and acknowledge that the absence of that perspective will affect our work together.

Facilitator introduces the LifeBoat Exercise Scenario and follows exercise guide below:

1. You are on a ship that might sink, so you must practice getting into lifeboats.

2. The facilitator calls out categories (age, race/ethnicity, insurance status, etc.) on which basis we divide ourselves into lifeboats. [Site leader: localize these; see potential categories listed below.] Select only 8-10 categories for this exercise to be cognizant of time.

- Favorite Baseball Team (Mets, Yankees, Red Sox)
- Age Group (Under 20; 21-30; 31-40; 41-50; 51-60; 61-70; 70 +)
- Favorite Type of Music (Classical, Rock, Pop, Rap, Salsa, Meringue/Bachata, Gospel, Other)
- Number of Languages Spoken (1, 2, 3, 4 or more)
- Ice Cream Flavor (Chocolate, Vanilla, Strawberry, Coffee, Other)
- Insurance Status (Private Insurance, for example through a job; Public Insurance; No Insurance; Don't Know)
- Length of Time Lived in LOCATION (Less than 5 years; Between 5-10 years; 10-20 years; More than 20 years)

<sup>&</sup>lt;sup>1</sup> Taken from Rick Arnold, Bev Burke, Carl James D'Arcy Martin, Barb Thomas "Educating for Change" 1991 Between the Lines and the Doris Marshall Institute for Education and Action. Ontario, Canada.

Community Catalyst works to ensure consumer interests are represented wherever important decisions about health and the health system are made: in communities, courtrooms, statehouses and on Capitol Hill. www.communitycatalyst.org

- How You Got to the Meeting Today (Walked, Bus/Train/Public Transportation, Bicycle, Car/Taxi, Other)
- Favorite Football Team (Giants or Jets)
- Favorite Basketball Team (Knicks or Brooklyn Nets)

3. When a category is called, participants scramble to find others in the same category in a certain area of the room. For example, the facilitator can call out, "All those under 20 years old find each other, between 21 and 30 find each other..." and so on.

In general there should be a lot of talking and movement around the room as people try to find the others in their category. This will seem a little chaotic, but it allows people to organize themselves and get to know each other.

4. Once at their lifeboats, participants should take thirty seconds or less (this is a quick activity) to exchange names.

5. Each group will then identify who they are to the other small groups. i.e., we were born in the 50's, or we were born in the 80's.

6. Tell the participants to carefully note who was not represented in the categories. For example: there were no participants born in the 50's or 60's, but a lot of people born in the 70's. The participants will be asked to reflect on who is present and who is absent later in the session.

7. This is a safety drill so it must be done quickly. After you are done with one category, go on to the next.

Remember: only select 8-10 categories total.

Once you've gone through all of the categories, instruct participants to go back to their seats.

## **Small Group Discussion: (20 minutes)**

Ask each small group to address one of the following questions in their work (make sure to display these questions on a PowerPoint slide or somewhere in the room).

- Is health care the same no matter who we are? Why or why not?
- Is health care access the same no matter who we are? Why or why not?
- Why is it important to talk about health care in relation to who we are?

Participants will then be asked to provide their answers to the larger group (can choose to only share answers to third question, if short on time). (10 minutes) Facilitator should track responses on a flipchart.

**Note to Facilitator:** These questions are important because they set the framework for some of the data gathering that will be conducted by the group later. The examples you use to get people thinking in the large group discussion, i.e. whose perspective is missing, who was not represented in your lifeboat, should be based upon the results of the Lifeboat exercise. Focus on categories where you saw the gaps in representation.

*Dialogue:* Any analysis we do of the health care system will reflect our own interests and experiences. Who we are, and how we see the world are key components in developing solutions to the problems and issues that face us.

*Dialogue:* It is important to understand how our views have been shaped by race, class, insurance status, health status, religion, gender, language, age, sexual orientation etc. It is also important to talk about the perspectives we bring, even if we don't agree with each other. The differences offer both constraints and possibilities as we consider what's needed to create a healthier community to best meet people's needs. In policy settings, both within institutions of health care and government, many of our perspectives are often missing entirely.