



JUNE 2020  
**RESIDENT FOCUS  
GROUP GUIDE FOR THE  
HEALTH ACTION PLAN**

## CONTEXT FOR THIS TEMPLATE:

This template is meant to serve as a starting point for the public health professional to build from in planning a focus group for the Health Action Plan. Each project team should adapt the template and its content to reflect the context of each Health Action Plan. Opportunities for personalization are highlighted.

### DISCUSSION CHECKLIST FOR FOCUS GROUP DEVELOPMENT PROCESS

Below is a checklist of questions to help guide the conversation between affordable housing developers and public health professionals prior to the development of the focus group sessions and guide.

- Will members of the development team be present for the focus group session?
- If members of the development team will be present, what role will they play?
- Does it need to be explicitly stated that opinions and views shared during the session will not affect participants' access to housing (positively or negatively)?
- Do participants need to provide written consent for participation or will verbal consent suffice?
- How will you make the findings and results of the focus group and Health Action Plan accessible to participants?
- Who will be the lead contact if participants would like help accessing the results or have further questions?
- What level of accessibility/readability does this guide need to be tailored to?
- This template is designed for a 90-minute focus groups with an average of 8-12 participants, does this need to be adapted to fit the needs of the target population?
- Will incentives such as refreshments or gift cards be provided to participants?
- What needs to be prepared in advance of the focus groups – examples include data summary sheets, flip chart, blueprints, additional handouts etc.? Who will be responsible for the development of these materials?

The recommended length of a focus group session and number of participants is flexible. Typically, 90-minute focus groups with 8-12 participants are considered ideal, however, this can vary depending on the needs and capacity of the participant population and structure of the session. The template can be easily adapted to a 60-minute format when appropriate.

## Project Name

### Introduction (10 Mins)

Welcome to our session. Thank you for taking the time to join our discussion on health and health promoting services in the [Project Name] community. My name is [Facilitator's Name], and I'm working with the development team that will be designing, operating, and managing Project Name. Provide additional introduction about yourself.

Introduce other team members helping with facilitation or from the developer team that are attending.

- **TIP:** Using icebreakers and quickly sharing a few personal details about your background and interest in the project can help build rapport with participants.

## Purpose:

- We are here because health is not just about going to the doctor. Our health is affected by many things like access to good jobs, having places to buy healthy food, feeling safe in your neighborhood, and access to safe and affordable places to live. Today we would like to better understand how housing and the communities we live in impact health.
- Briefly describe development project
  - *TIP: Keep this description concise and short and avoid the use of jargon*
- Our goal is to gather your ideas about what types of building features, programs, and health promoting services should be included in the [Development Project] to maximize the health of people of living there. The information you are sharing with us is important, it will be used to help the [Project Name] have a positive impact on residents and the surrounding community. Your ideas will help shape the experience of people in similar circumstances.

## Process:

- There are no wrong answers. We are going to talk about your experiences, observations and perceptions. You won't hurt our feelings or make us feel better with whatever opinions you might share. We are interested in hearing your point of view even if it is different from what others have expressed. So, please feel free to speak open and honestly. Please know that our notes only capture your ideas, but not who said what. Your name will not be reflected in the notes.
- My role here is to ask questions and listen. I won't be participating in the conversation, but I want you to feel free to talk with one another.
- When we speak about community it can have different meanings. For example, it can mean your family, the people you live or work with, the neighborhood you live in, a group of people you belong to. We are interested in hearing about your community, no matter how you define it.
- Before we begin, let me suggest some things that will make our discussion more productive. The first suggestion is that only one person speaks at a time. Second, if you find that you've done a lot of talking, allow others to participate. Lastly, your participation today is entirely voluntary. You have the right to stop participating in the focus group at any time you wish. Do others have additional group agreements they want to add to this list? Is everyone in agreement with this?
- Explain who will have access to this information (consultants, public health professionals, development team, etc.) and how the findings it will be shared (online report, press release etc.). We're tape recording the session because we don't want to miss any of your comments. Remember that in our later reports, there will not be any names attached to feedback so that we can maintain confidentiality. Explain who will have access to the recording. If you don't want your first name to be used in the recording, please share with us what you would like to be called instead. Is everyone okay with us recording the session?

- You will be able to access the final report in [insert expected release date of final report] at [location where the findings can be accessed] If you have any questions about how the information we collect today will be used or if you are unable to access the final report online, please feel free to contact [insert contact information for community engagement lead – providing phone and email recommended] and they will be happy to help you.
- Are there any questions before we start?

## Introductory Ice Breaker Question (5 Minutes)

1. Ice Breaker Question – Let’s start by quickly going around the room. What would you like to be called?
  - **TIP:** *It is recommended that in addition to names that everyone share their preferred gender pronouns (She/her/hers – He/him/his – They/them/their etc.)*
  - **TIP:** *There are several online lists of non-intrusive ice breaker questions, some examples include:*
    - *Where is your favorite place in the city?*
    - *What is your favorite thing to do at the end of a long day?*
    - *If you could only eat one food for the rest of your life, what would it be?*
    - *What is one thing you couldn’t live without?*

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**ANNOUNCE THAT AUDIO RECORDING IS STARTING**  
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## Opening Question (5 Minutes)

2. Let’s start by talking about how you think about health. When I say the words health and wellness, what comes to mind for you?
  - Prompt: What does a community need to be healthy?
  - **TIP:** *List out responses on a flip chart or whiteboard*

## Understanding Health Priorities (20 Minutes)

Share a high-level overview of the findings from the data analysis phase. Ensure that the document is accessible to the participants with special attention to factors such as readability, clarity, use of graphics, and additional languages. Share why certain indicators were prioritized.

3. Do these health needs match what you see and experience in your community? Why or why not?
  - **TIP:** *Place the prioritized health needs from the data analysis section on a large flip chart or handout to revisit – it is recommended that this be done in advance.*

## ACCESSIBILITY RESOURCES

Below are some examples of resources that can be used to assess accessibility and readability of handouts

- ❑ Clear language lab resources by Literacy Works - <https://www.litworks.org/cli-resources>
- ❑ Readability calculators - <https://readable.com/>; <https://www.wyliecomm.com/2018/11/10-free-readability-calculators/>
- ❑ Creating accessible diagrams - <http://diagramcenter.org/community-resources.html#publishers>; <https://colorbrewer2.org/#type=sequential&scheme=BuGn&n=3>; <https://gmazzocato.altervista.org/en/colorwheel/wheel.php>; <https://libguides.butler.edu/accessibility/infographics>
- ❑ Using trauma-sensitive/trauma informed language - <http://www.nationalcenterdvtraumamh.org/wp-content/uploads/2014/08/NCDVTMH-TI-Writing-Guide-FINAL-Aug27.pdf>

### ADDITIONAL TIPS:

- *Hospitals and universities often have on-staff professionals for developing accessible and culturally appropriate documents and materials.*
- *Consider consulting individuals with experience and training in trauma-informed approaches when planning to discuss difficult issues such as violence and racism.*

4. Based on your experience in the community, are there any health needs that are missing from this list?
  - Prompt: These might relate back to the definition of health and wellness we developed at the start (e.g. physical, mental, emotional, environmental, spiritual, intellectual, economic, or agency) *Add to list as necessary.*
5. Of the health needs discussed (*revisit the list*) how would you prioritize these needs?
  - Prompt: Which health issues do you think are the most important for you and the people you know in the community?
  - **TIP:** *Use a sticky dot exercise to prioritize health needs. To do so, write categories of health needs on flip charts or large pieces of paper placed around the room. Give each participant a set number of sticky dots to “vote” with (usually 2-3). Ask participants to place their dots under the health issues that are most important to them and their communities. Don’t forget to include health issues that may have come up during the focus group discussion but were not highlighted during the initial data analysis phase.*

## Health Service and Program Opportunities (20 Minutes)

Thank you for your input so far. Next, we would like to talk about the strengths of your communities and what types of building features and programs would help residents stay healthy.

6. What do you love most about your community?
  - Prompt: Examples include cultural traditions, community events like block clubs, diversity, neighbors, resources such as museums etc.

7. Thinking about your community, what types of resources are available to help people be healthy and thrive?  
*Examples include community-based organizations, health promoting services, specific people, events, etc.*
  - What types of resources are available to address the health needs we discussed? *Refer to list of prioritized health needs*
8. Thinking about your community, what keeps people from maximum health and wellbeing?
  - Prompt: What are the root causes of the health needs we discussed?

## Strategies (10 Minutes)

Briefly describe/recap the type of housing being provided by the development (affordable apartments for individuals or families, single family homes, SROs, etc.)

9. What are some ways that you think prioritized health needs could be addressed in your community? In your unit? Through services and programming? Specifically, how can [Developer Name] address them?
  - **TIP:** *Create a list on a large note pad, white board, or other form that would allow residents to see this.*
10. What types of building features could be used to improve the health of residents?
  - **TIP:** *Provide a mock-up or blueprint of an example unit and/or building to participants and have them provide comments.*

## Prioritizing Program Opportunities and Design Features (10 Minutes)

11. Out of all the potential design features and programs we brainstormed which do you think would have the biggest impact on health and wellbeing? (*Refer back to lists from previous two sections*)
  - **TIP:** *Sticky dot prioritization exercise could be used here as well*

## Wrap-up (5 Minutes)

12. Now that we are at the end of our time, is there anything we should have talked about but didn't?
  - **TIP:** *Do a round robin exercise - Round robin: What is the top issue that should be addressed to improve health in your community?*

## Closing (5 Minutes)

This concludes our focus group. Thank you all very much for your time. We appreciate the valuable insight and information you have shared with us. Next our team will be combining the information you shared with the data we've collected so far to create a report that will be shared with [Development Team]. Although, there might not be an opportunity to incorporate all of the solutions that were mentioned today, the information and health priorities that you discussed with us will be influential in determining the final strategies used by [Developer Name] in [Project Name].

Repeat how the final information can be accessed and the lead contact for participants.



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