



Instructions for Conveners and Facilitators

INSTRUCTIONS FOR CONVENERS AND FACILITATORS

Purpose

By giving you tools to host or to participate in your own “conversation,” the Community Conversation Toolkit will help you engage members of your community in the *National Conversation on Public Health and Chemical Exposures*. Feedback from these conversations will contribute to the *National Conversation Leadership Council’s* action agenda. When complete, the action agenda will outline how the United States can use and manage chemicals in ways that are safe and healthy for everyone.

How will input from my community conversation be used?

From April to June 2010, people across the United States will convene community conversations about chemical exposures. The major ideas from each conversation will appear on a publicly accessible Web site. Summaries of community conversation results will appear in a report shared with the *National Conversation’s* Leadership Council and work groups. This report will help the Leadership Council and work groups develop recommendations for the action agenda. They will use the report to determine whether:

- (1) Ideas expressed in community conversations would support recommending some actions over others, and
- (2) Any major issues highlighted during community conversations have not been considered.

Who leads a community conversation?

Every community conversation needs three major players: a convener, a facilitator, and participants. Here are descriptions of each one’s role:

Convener’s role

The convener brings together a group of people to share their values, experiences, and ideas. The convener organizes the meeting, finds the meeting space, invites and welcomes attendees, and summarizes and, using the summary template, sends in the results of the discussion. A local conversation may have more than one convener if several organizations partner to hold a community conversation.

Facilitator’s role

The facilitator may also be the convener. The facilitator helps make sure all voices are heard. The facilitator makes sure everyone has a chance to speak and that no one person takes over the discussion. The facilitator should keep track of time and move the dialogue along. The facilitator should remain neutral and refrain from sharing personal views.

Participants’ role

By participating in this facilitated discussion participants are there to share their knowledge, experience, and opinions on issues relating to chemical exposures and public health. Participants should be willing to follow ground rules set by the facilitators and by the group and be willing to listen to other opinions.



EVERY COMMUNITY
CONVERSATION NEEDS
A CONVENER,
FACILITATOR AND
PARTICIPANTS.

What is in this toolkit?

1. Outreach tips
2. Instructions for Conveners and Facilitators
3. Understanding the Issues background reading
4. Discussion Guide
5. Community Conversation Summary Template
6. Sign-in sheet

What you need to hold a community conversation

1. Location (living room, community meeting room, church fellowship hall, etc.)
2. Facilitator (The convener may serve as the facilitator; otherwise ask a volunteer before the meeting)
3. Note taker (Finding a volunteer before the meeting will be helpful)
4. Printed sign-in sheet
5. Copies of the Understanding the Issues document, Discussion Guide, and *National Conversation* fact sheet (one for each attendee)
6. Printed copy of the summary template
7. Pens/pencils for people to sign in
8. Snacks and drinks for attendees (optional)
9. Large paper on which to write the ground rules and paper for taking notes
10. Tape (to post the ground rules in a visible location)
11. Name tags if participants don't know one another well

Detailed Agenda:

I. Before starting

Convener or Facilitator:

- Ask people to sign in
- Hand out copies of the background reading for people to review before the conversation starts, and
- Invite participants to enjoy the snacks

II. Overview of our community conversation (5 minutes)

Convener:

Thank you so much for coming! I've invited you to be a part of this discussion today because _____ (say a little bit about your reasons for organizing this conversation). This discussion is part of a much bigger discussion known as the *National Conversation on Public Health and Chemical Exposures*. The *National Conversation* is gathering input from people all around the United States. The



THE FACILITATOR
HELPS MAKE SURE
ALL VOICES ARE
HEARD.

National Conversation will then develop recommendations to better protect people from harmful chemical exposures. This project will result in a national action agenda that outlines how the United States can use and manage chemicals in ways that are safe and healthy for all people. The action agenda will be useful to many kinds of organizations, industry, government agencies, and others.

Community conversations, like the one we are holding today, are an important part of this effort. From April to June 2010, people across the United States will convene community conversations about chemical exposures. The major ideas from each conversation will appear on a publicly accessible Web site. Summaries of community conversation results will appear in a report shared with the National Conversation's Leadership Council and work groups. This report will help the Leadership Council and work groups develop recommendations for the action agenda. They will use the report to determine whether

1. Ideas expressed in community conversations would support recommending some actions over others, and
2. Any major issues highlighted during community conversations have not been considered.

Your ideas are important to this process so thank you for being here!

(Introduce the facilitator or let people know that you will be facilitating)

III. Introductions (10 minutes)

Facilitator:

If participants already know each other: Please tell us why you think it is important to be here today.

If participants do not know each other: Please pair up with someone you don't know. Interview each other for 3 minutes each to learn more about one another and your motivation for participating in this discussion. In 6 minutes we will come back together and ask you to introduce your partner to the group.

IV. Ground rules for our discussion (5 minutes)

Facilitator:

When we discuss topics like chemical exposures, we can become pretty passionate. Today (tonight) we want to have an open, respectful, and productive conversation. So we need to agree on how we are going to interact. Here are some suggested ground rules:

- Be respectful.
- Everyone deserves to be heard.
- One person speaks at a time.



- Speak for yourself, not for others.
- If you are offended or uncomfortable, say so—and say why.
- Disagreements are okay, but don't make them personal—no name-calling or stereotyping.
- Stick to the issue.
- Everyone helps the facilitator keep the discussion moving and on track.
- Personal stories stay in the group unless people decide it's okay to share them.

What do you think? Is there anything you want to add or subtract? Does anyone have any questions before we get started?

V. Identify a note taker (5 minutes)

Facilitator: (if you didn't do this before the meeting) (5 minutes).

To submit our input we are going to need someone to take notes. Would someone volunteer to **record the main ideas and views** discussed here? You can use the Summary Template and/or other paper to take notes on each discussion topic.

VI. Community conversation (1 hour 15 minutes)

Facilitator:

Let's get started. (Pass around copies of the Discussion Guide). Over the next 90 minutes we are going to discuss our views and ideas about chemical exposures. Remember, these questions have no "right" or "wrong" answers – the *National Conversation* is interested in learning what you think about these issues.

Topic 1: When it comes to the impact of chemical exposures on our health, people vary in their level of concern. We invite you to share any concerns you may have.

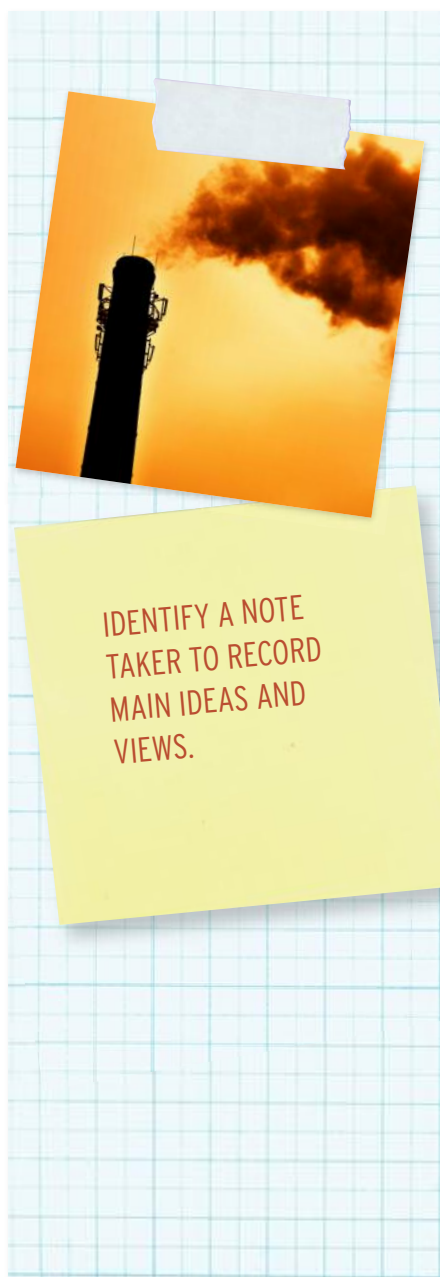
(Consider asking people to go around the table and share their thoughts to encourage everyone to participate. You may want to distribute paper and pens and ask everyone to write down one concern, then share that aloud one-by-one.)

VIEWPOINT A: Chemical use and exposures do not concern me.

I trust that most products for sale are safe or receive enough scrutiny to be safe. I think that air, water, or other types of pollution are regulated well enough to protect my family and me. I am much more concerned about other threats to my health.

VIEWPOINT B: I'm a little concerned.

I've read in the news about dangerous chemicals and about lapses in our nation's chemical safety system. I'd like to avoid some chemical exposures. For instance, I don't buy toys for my child that might contain lead and I avoid eating fish containing high mercury levels. While I think I can maintain good health without paying a lot of attention to this issue, I'd like to learn more about the potential risks of chemical exposures.



VIEWPOINT C: I'm very worried about my everyday exposures to chemicals.

I think that harmful chemicals are used far too widely in the United States. I try very hard to avoid exposure to them. I drink filtered water, buy mostly organic produce and natural cleaning and personal care products, and work to educate others about the issue.

VIEWPOINT D: I'm more confused than concerned

I hear conflicting reports about the risks posed by chemicals. I don't know whom to trust or where to go to get accurate information that I can understand.

Possible follow up questions:

What viewpoints stand out or are closest to your own?

Is there a viewpoint you would like to add?

Is there a viewpoint you don't agree with?

Are there any common areas of concern?

What additional information would you want or need to be better able to answer this question?

Topic 2: Think about and discuss a few values you believe should guide our nation's approach to protecting us from harmful chemical exposures. Here are some examples:

(Read the question aloud and give people 2 minutes to review the viewpoints and think about their answers. Remind people the listed viewpoints are there only to spark ideas and encourage them to share others. It may be helpful to ask people to write their ideas down.)

Please share your thoughts with the group.

VALUE A: Transparency

We need to make information readily available about chemicals and public health. For instance, government decisions should be made openly, and businesses should list publicly the ingredients in their consumer products.

VALUE B: Convenience

Chemicals support our modern way of life. We should look for ways to reduce exposures that do not force us to make huge changes in our lifestyles.

VALUE C: Prevention

While much about the effects of chemical exposures on human health is still unknown, we should nonetheless try to stop exposures to harmful chemicals.

VALUE D: Justice

Chemical exposures are not borne equally across the United States. Everyone should enjoy a clean and healthy environment and access to resources that can help protect health.



REMEMBER, THESE
QUESTIONS HAVE NO
"RIGHT" OR "WRONG"
ANSWERS.

VALUE E: Personal Responsibility

People should take personal responsibility for their health by making choices that limit their exposure to harmful chemicals in their food, consumer products, water, and environment.

Possible follow up questions:

What do you think about what you have heard?

Do you believe we have found any common ideas?

Topic 3: We can learn from specific stories of success or failure related to protecting people from harmful chemical exposures. Have you experienced any successes or failures regarding protection from chemical exposures? If so, discuss what contributed to such successes or failures.

VIEWPOINT A: Success

Successes come in many forms. Perhaps...

- After meeting with local community members and hearing their concerns, a business voluntarily replaced a toxic chemical in one of its products with a safer, less expensive substitute.
- A government agency investigated health concerns of our community. They involved us in the process, addressed many of our questions, and helped us understand why other questions couldn't be answered.
- The city stopped using pesticides in the parks after a local university collected data on children's exposures.
- A group of nurses educated parents about ways to reduce asthma triggers in their homes.

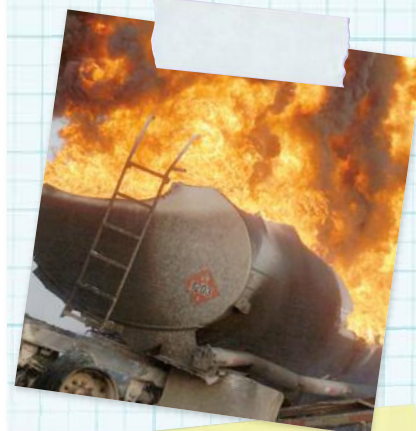
VIEWPOINT B: Failure

Failures also come in many forms. For instance...

- Our community asked a government agency to investigate a local chemical release but could not get anyone to respond.
- After hearing about chemicals in some personal care products, I tried to switch to safe options. I had a difficult time finding information to help me make a decision.
- The health department investigated health concerns in our community, but in the end it didn't have enough information to provide us with any answers.
- My doctor dismissed my concerns about chemical exposures.

VIEWPOINT C: I don't know

I'm new to this issue. I might have a story to share later on during the *National Conversation*.



TRY TO DRAW OUT
PARTICIPANTS WHO
HAVEN'T SAID MUCH.

Possible follow up questions:

What specific actions ensured success?

What do you believe or know caused the failure?

Are there specific actions that can be taken to avoid failure in the future?

Topic 4: Many groups, from government to businesses to nonprofit organizations, have a part in protecting the public from harmful chemical exposures. After listening to the personal accounts you just heard, or other experiences, share your thoughts on steps one or more of these groups might take to prevent harmful exposures.

Does anyone have any specific experiences you would like to share that speak to this question?

VIEWPOINT A: Build capacity at the state and local levels to address public health concerns related to chemical exposures

While many policy decisions related to chemical exposures occur at the federal level, public health concerns are often local. Currently, state and local governments vary in the resources they have to protect the public from chemical exposures and, when problems are identified, to respond adequately to those exposures. Federal agencies should commit resources to make sure that state and local governments can adequately respond to residents' concerns and can provide protection from local environmental health threats.

VIEWPOINT B: Involve members of the public in decisions that affect their health

Government agencies, corporations, universities, community groups, and others should provide meaningful opportunities for interested members of the public to participate in decisions at local, state, and national levels.

VIEWPOINT C: Encourage partnerships

We need to do a better job of working together to promote health and to prevent chemical exposure. At the local level, building effective partnerships may require federal agencies, foundations, and others to provide resources to community-based groups. At the national level, federal agencies ought to coordinate their research and share information more freely.

VIEWPOINT D: Take a comprehensive approach to promoting health

Promoting public health requires government agencies to look at chemical exposures in addition to the other public health issues that communities face. For example, while a health department works with a community to study possible risks from local water contamination, it can also work with this same community group and others on programs to combat obesity and poor nutrition.



VII. Next steps? (10 minutes)

Convener or Facilitator:

Those are all the questions for today, but the conversation doesn't have to end here! We've had a great discussion and we have a lot of energy in this room. Is anyone interested in having a follow-up meeting to think about actions this group can take locally on these issues?

If so, would someone here be willing to get this group back together in a few weeks? (If there is a volunteer, be sure to share a copy of the sign-in list with that person so he/she can organize a future meeting.)

(If you created a list of local groups working on related issues, provide this to attendees so they can stay connected to or get involved in efforts to prevent harmful chemical exposures in your community).

VIII. Wrap up (5 minutes)

Convener:

Thank you everyone for coming and participating in this community conversation! Your input, along with that of hundreds of other people across the country, will help improve our nation's system for protecting people from harmful chemical exposures. To follow the progress of this initiative and give additional input through upcoming Web dialogues, please go to the Web site listed on the *National Conversation* fact sheet distributed to you.

(Collect the notes from the notetaker and the sign in sheet.)

IX. Report back to the *National Conversation*!

Convener:

To be completed within one week of the event.

1. **Download the electronic copy of the summary template**, available at: www.atsdr.cdc.gov/nationalconversation/community_conversations.html.
2. **Fill out** the summary template using the notes from the meeting.
3. **Send** the summary to nationalconversation@cdc.gov. All summaries are due by **June 30, 2010**.

