**The School of Health and Human Sciences:**

**Review of Unit-level Support for Community Engagement**

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**Submitted to the HHS Dean**

**Written by the HHS Community Engagement Working Group**

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**Purpose of the Report**

This report shares findings and recommendations about the forms and levels of support for community engagement within the School of Health and Human Sciences (HHS). This report was developed by a small working group of faculty and administrators at the request of the HHS Dean, and is informed by a larger study that seeks to pilot and refine an *organizational assessment rubric* that is designed to be used by the unit of a school or college to examine structures, policies, and practices with the goal of advancing community engagement within the school/college for the purposes of self-assessment and strategic planning for a college. This study is sponsored by the American Association of State Colleges and Universities and the New England Resource Center.

The Carnegie Foundation’s definition of **community engagement** (adopted by UNCG) is *the collaboration between institutions of higher education and their larger communities (local, regional/state, national, global) for the mutually beneficial exchange of knowledge and resources in a context of partnership and reciprocity.*

 **Data Collection Process**

The working group included two faculty members (one AP and one tenure-track), two associate deans (Research and Academic Administration), and the Director for the Institute for Community and Economic Engagement (who is also a tenured faculty member in Peace and Conflict Studies within the unit). Many of the components of the rubric could be completed by working group members using existing data. However, questions about infrastructure and support (Dimension Six) required additional faculty information and input. To gain information and input in these areas, the working group met with department chairs at regularly scheduled meeting to discuss components of the rubric. In addition, the working group met with the HHS Research Advisory Committee and three focus groups of HHS faculty to solicit their views on the ways community-engaged work is valued and supported and ways to improve the recognition and support of this work.

***Components of the Rubric Used to Guide Data Collection***

The self-assessment rubric contains eight Dimensions, each of which includes a set of Components that characterize the Dimension. The eight Dimensions of the rubric are listed below (see Appendix for list and their respective Components):

1. Leadership and Direction
2. Mission and Vision
3. Visibility and Communication
4. Recognition
5. Rewards
6. Capacity-Building Infrastructure for Support and Sustainability
7. Assessment
8. Curricular Pathways

**Key Findings**

Overall, faculty members we spoke with identify community engagement (CE) as key aspect of the School’s identity and ethos. Discussions, and hence findings, were guided by the rubric, and

specifically the Dimensions and Components included within the rubric. Below we report areas in which support for community engagement appeared to be present and relatively sufficient, as well as priority areas for increasing the level of support or improving existing structures that support community engagement within HHS.

***Current Support for Community-Engaged Scholarship, Teaching, and/or Service in HHS***

*Mission and Vision*

* CE is aligned with the HHS mission and vision statements
* CE is included in the HHS Strategic Plan

*Visibility and Communication*

* CE is featured publicly and visibly on website, HHS branded items (e.g., mugs), HHS publications and Board of Visitors presentations

*Recognition*

* Annual Community Engagement Award ($1,000)
* Annual faculty reporting includes information about CE (aligned with Provost’s guidelines)

*Rewards*

* CE is articulated across all three areas of tenure-track faculty work (since April 2012)
* CE is incorporated in Non-Tenure Track policies as well (e.g., Teaching activities include: “Participating in Community Engaged Teaching: Developing and delivering community-based instruction, such as service-learning experiences; Service may include: “Collaborating with the external community”)*.*

*Assessment*

* HHS began tracking CE as part of its larger effort to track all forms of faculty scholarship and expertise using a web form in Qualtrics. However, systems for tracking and assessing CE, for the most part, are handled at the university-level as UNCG adopts The Collaboratory®, a database developed by UNCG and licensed to TreeTop Commons, LLC. Tracking CE extends beyond the unit. Assessment of CE teaching, research and service activities, if collected, is not collected at the unit level.

*Curriculum*

* Some departments have integrated community engagement into their capstone experiences, and other elective courses. Examples include: Peace and Conflict Studies, Social Work, Human Development and Family Studies, and Public Health Education.
* HHS has offered unit-wide courses, such as the Grant Writing for Community Organizations course, which has been taught as community-engaged. There may be some additional opportunities for CE in university-wide courses, but there is not a desire to create a minor, major, or certificate area specific to CE within the unit; rather it should be embedded within programs and departments.

***Priority Areas in which to Increase or Improve Support for Community-Engaged Scholarship, Teaching, and/or Service in HHS***

Across focus groups, faculty expressed a need for additional, as well as more strategically focused support to identify, connect, and maintain various types of relationships for various teaching and research activities with external/community organizations. Below are the themes that were raised and addressed in faculty focus groups which focused primarily on the Dimension titled, *Capacity-Building Infrastructure for Support and Sustainability.* Faculty who attended the focus groups, and who are for the most part, scholars with community engagement experience in teaching and/or research, expressed desire for additional support from HHS for the functions and funding below:

***Functional Support***

1. **Identify and connect with potential community partners for teaching and research.** Faculty also discussed the challenges of knowing which faculty members and departments have partnerships with specific external organizations. Currently, there is no mechanism (either technical or structural) to collect information across HHS that can help HHS faculty to identify collaborators, as well as areas of “saturation” (i.e., many faculty working with same partners or on same issues). Several faculty members discussed the importance of networking for the purpose of helping faculty to learn about persons, organizations and initiatives that would advance faculty scholarship, as well as transform student learning through community-engaged courses, placements, and research opportunities. Some faculty noted that new faculty (and faculty new to community engagement) could accelerate their scholarly activity with key introductions to communities that aligned to their scholarship and teaching aims. Other faculty noted that UNCG faculty and students were noticeably absent from key community-focused initiatives that would align with and advance faculty scholarship and student learning and development. For example, one faculty member might attend a meeting about a community-identified priority that involves practitioners, scholars, funders, and local leaders across sectors, identify many connections for other faculty members to become involved in the initiative to advance academic and community aims, but not have the time to make the necessary introductions and connections. These were seen as missed opportunities for UNCG broadly, but for HHS faculty, specifically, as many of these areas are related to areas of health and wellness. While it may be helpful to have HHS-specific support, faculty felt that CE is not siloed according to College/School and felt that it needed to be in conversation with and coordinated at the university-level to ensure that full spectrum of talent was connecting to the full spectrum of priorities in the community. Faculty recognized that the Dean’s office was able to attend some of these meetings, but that this could be a part or full-time role.
2. **Assistance in navigating systems to develop and establish partnerships -** Establishing community-university partnerships often requires faculty to address questions and challenges not seen in other forms of scholarship. For example, faculty often have to create memoranda of understanding (MOU) or some other agreement that outlines expectations for community and university partners in a variety of areas. Agreements might be about roles in a project, ownership of data, ways in which funds are received, administered and spent, liability, or student learning contracts. Depending on the questions, different offices must be consulted (legal, financial, payroll, etc.). Faculty expressed the need for someone who could help them to predict issues before they arise, guide their efforts to identify appropriate people and processes to enable work to happen quickly and effectively, and problem-solve when unforeseen problems or new questions arose. Some faculty shared that they have received helpful assistance from the HHS Office of Research when these issues arose. Sometimes these issues are connected to research activities, but sometimes they arise in teaching areas as well. Could HHS provide support that not only addresses the ad hoc needs of faculty, but also develops systems and tip sheets that help with organizational learning as well?
3. **Assistance with grant-writing to support community engagement --** The conversation within the focus groups appeared to suggest that HHS does not provide support for community-engaged scholarship. The working group wondered whether this perception is true given that (a) a large proportion of faculty who have participated in the grant writing workshops offered in the summer by the associate dean for research have been community-engaged, (b) the associate dean has worked with many faculty to apply for funding from national foundations, such as NIH, and (c) weekly emails listing funding opportunities sent from the office of the associate dean for research (by Lisa Walker) include community engagement as well. We recommend that CE be explicitly stated as an area of support provided by the office of the associate dean for research (i.e., address communication) AND that the associate dean consider whether support that is aimed at CE specifically and separately from other forms of scholarship may be warranted given different funding sources, requirements, and considerations (e.g., IRB, subcontracts to community partners) (i.e., address professional development programs). One recommendation was that grant-writing workshops for CE needed to welcome and include community partners as co-researchers, and not be for UNCG faculty only.
4. **Faculty development programs for integrating community engagement into scholarship and teaching** - Related to above, faculty expressed interest in more support for how to effectively integrate community engagement into research and teaching more broadly than how to find and manage grants. To some extent, some faculty members have already accessed support for these activities from university-wide offices such as the Office of Leadership and Service-Learning and the Institute for Community and Economic Engagement. Some faculty said that they were not aware of the services available. Faculty would like development opportunities for faculty *and community partners*. Some faculty discussed having speakers come to talk about their community-engaged scholarship.  Next steps would require a clearer understanding of what types of professional development opportunities are most needed by HSS faculty and the most effective way to offer them (whether through partnerships with OLSL and ICEE, or to manage them within HHS as an HHS-focused initiative). We also found that improving communication about existing resources and opportunities is also essential so that faculty are aware and can take advantage of them.
5. **Training for personnel review committee members on evaluating community-engaged scholarship for Tenure Track and Academic Professional Track Faculty -** Some faculty felt that HHS adequately recognizes CES in both policy as well as practice, however, some faculty worried whether this was the case across all departments. While there is a general sense among faculty that CES is recognized as a legitimate and valued form of scholarship, questions still arise about how to evaluate it effectively. In review of practices and policies, we found no formal training provided to candidates or reviewers on how to document or evaluate CES at HHS level. While ICEE offers workshops annually, and some faculty attended them, they tended to be the faculty going up for tenure, and not the reviewers evaluating dossiers. We think that the issue of how to evaluate scholarly quality and impact is not unique to CES, and that there are a number of questions that arise in which reviewers do not receive formal norming or development opportunities in, such as how to fairly evaluate new impact factor tools.

***Financial******Support***

One area of discussion raised by the rubric was the issue of funding. Faculty recognized that HHS had limited funds and suggested that the following items would be helpful for all forms of scholarship, not only for CES.

1. **Stipends or course release for seeding engaged research or course development** -- Grants provide money once the partnership is established, but not to establish the essential partnership. Many times these partnerships take extended periods of time to meet with various constituents and to work out agreements and sometimes contracts. Seed money that allowed faculty to pursue partnerships, rather than project solely, would help to foster inter-disciplinary partnerships.
2. **Support for faculty, administrators, community partners, and students to attend professional development opportunities to advance community-engaged teaching and/or research, including but not limited to conferences --** Limited funding is often used to support scholars’ participation in meetings, workshops, and conferences within their academic discipline. Those who seek to expand towards community engagement conferences, publications, and associations would like to have access to additional funds that allow them to expand into this area, while maintaining their disciplinary connections and profile.

**Recommendations**

Community engagement as a core element of the HHS identity -- even as a point of pride -- was evident throughout conversations with faculty. With a few exceptions, faculty reported an overall sense of faculty/ administrator recognition about the importance of community engagement as part of the School’s mission and as a legitimate and valued form of scholarship and teaching.

One of the questions that the Dean of HHS asked the working group to address was whether HHS needed to reconsider the need for some formal role and structure, such as a director of an office of community engagement, or whether support for community engagement was “beyond” the need for such a role and formal structure. We also considered the benefits and challenges of threading support for community engagement into existing roles and structures.

The final conclusion of the working group is that HHS requires additional focused attention to several key functional areas (as outlined above). Identifying what structures are required to appropriately and effectively address these functions requires additional consideration. Therefore, we recommend that the Dean consider appointing a faculty person (e.g., through a half-time appointment) who can help to create a vision and plan to advance capacity-building infrastructure to support and sustain community engagement within HHS.

A vision and plan may include:

* re-establishing the HHS community engagement advisory committee;
* working within existing roles and structures to integrate support for CE scholars, such as working with the HHS associate dean of research to offer workshops on writing grants for community engagement with community partners, and tracking community-engaged research across HHS faculty to assist in connecting scholars to opportunities for collaboration;
* partnering with the Institute for Community and Economic Engagement to offer workshops developed with and for HHS faculty on topics, such as conducting and disseminating community-engaged scholarship, documenting and reviewing community-engaged scholarship in promotion and tenure dossiers, and writing retreats with co-researchers including community partners and students;
* partnering with the Office of Leadership and Service-Learning to offer professional development for community-engaged curriculum development and teaching; and
* identifying new roles and structures to support and sustain community engagement, such as a full-time position whose role is to develop relationships in the community for the purpose of connecting faculty (and funding) to research and teaching opportunities. Faculty members’ recommended a full-time administrative position to liaise with community organizations and to support community-engaged teaching, research, and service across departments within HHS. This position would be filled by a person who is familiar with HHS faculty members’ scholarship and teaching areas, available to attend meetings related to health and wellness and which are held by various groups, from neighborhoods, to grassroots groups, to formally established community initiatives and organizations, and able to connect across disciplines and units to encourage multi- disciplinary collaborations within and beyond HHS. Faculty also recognized that this request comes at a time of multiple strategic priorities and limited budgets, so that this request would need to be considered within that context.