

Project Overview

The Center for Advancing Rural Health Equity (CARHE) provided three (3) 90-minute storytelling trainings for rural care workers in the month of October, 2024. Below is an overview of: the visioning stage, the training approach, findings from the trainings, and feedback from participants.

Visioning

Our guiding theme and goal: Create a tool that anyone working to improve the health of rural communities can use to tell the story of their impact, involvement, and innovation in service of creating a greater understanding of the needs and assets of rural communities' health ecosystems.

Whose voices need to tell these stories?

- All four pillars of CARHE: researchers, clinicians, educators, learners
- Anyone working to improve the health of rural communities/has a role in health equity
- The full ecosystem of care – to remind each person they are part of a larger system that values what they value and holds this work together
- Unusual suspects (example: someone from The Car Repair Program)
- Nonprofit workers and people in service roles
- Anyone on a care team
- Individuals who are trained to use data, but not to tell stories

What do we want to create with these stories?

- A better understanding of what this work looks like on the ground
- A tool to learn/talk about/raise awareness around the stigma, inequities, and diversity in rural communities that sometimes sounds abstract, but is a part of caring workers' everyday life
- An increased awareness of the ecosystem of people doing this work and a sense of community
- A chance to use asset framing to learn about and celebrate the work being done by people in these roles

Challenges and suggestions

- **Challenge:** Making sure everyone at the trainings is on equal footing
 - Solution: Facilitator built this into the opening exercise, community agreements, and overall approach to the training

- **Challenge:** Engaging people outside of the “standard audience”
 - **Solution:** cast a wide net with recruitment by reaching out individually to the unusual suspects, service providers, etc.
 - Encourage those we reached out to to send the invitation to people who they think would benefit from it
- **Challenge:** Staying focused on assets and strengths
 - **Solution:** Provided an assets-based training with clear guiding questions about the power and importance for individual stories for creating change, belonging, and improved health

Trainings

The three (3) trainings followed the following structure:

[5 minutes] Opening share (by facilitator or supporting team)

- Why we are here, the importance of this skill set, etc.

[10 minutes] Introductions

- What you want to be called, pronouns (optional), identities you want to share

[5 minutes] Agreements

- Go over community agreements:
 - Show up as you are and make space for others to do the same
 - Respect each other’s experiences and processes
 - Prioritize your own comfort
 - Respect confidentiality
 - Avoid comparisons or quantifications
 - Honor the ecosystem

[20 minutes] Why are we in a storytelling training?

- What is the importance of storytelling about rural health equity
 - The impact of your work likely isn’t always captured well in data-laden reports
 - There is nuance in the work you do that can be beautifully captured through story
 - Resources flow differently in rural settings, and telling the story of the impact of your work on individuals, families, and collectives is important
 - Hold storytelling in high regard. The purpose of stories is to connect and engage us, not be hoarded and exchanged as means of power. Stories are a great equalizer. They remind us that we have core things we share as a part of being human that can’t be taken from us. They connect us without hierarchies. They slow us down a bit.
 - How do we know if stories are true? The beauty is that we just do. We

get to believe people when they tell us who they are. We get to take pause when we hear them touting other people's stories and using stories as lies or to cause harm.

- Our guiding question: How do we tell stories that both protect and advocate for our needs and those of the people we serve?

Different storytelling formats:

- Conversation - this story-telling approach emerges from asking great questions. It can be a non-intimidating way to tell stories. Great questions can include:
 - When did you know you wanted to pursue a career in public health?
 - How did the kind of student you were when you were younger shape your career journey going into public health / working with your community?
 - What brought you to this community?
 - What made you stay in your community?
 - What's your favorite thing about your community?
- Scripted
 - Think like The Moth, or how you were taught to tell stories in 8th grade with a beginning, middle, and end
 - But, if you ask 100 people you will get 100 different answers about what makes a great story
 - Twists, surprises, etc. that break from common scripted stories are often what make them great.
 - One element of a great story like this is a story of a turning point – a moment that changed things, clarified things, or disrupted things.
- Naturally-occurring
 - When you think about storytelling as a part of your work, think about the stories you tell at the dinner table or when people ask you how your day was. Think about defining moments or turning points. If someone asked you to describe your work in one story, what story would you tell?
 - Self, us, and now
 - We want to be mindful of who the hero of the story we tell is
 - Avoid telling stories of saviourism
 - Example: a personal story, tying that story into a collective experience, and adding urgency by tying the story into the present moment with a call to action.
 - Example story was shared

[15 minutes] Small group storytelling

- If someone asked you to describe your work in one story, what story would you tell?
 - You can try a self-us-now format; a dinner table format; or another

approach that feels natural to you.

[15 minutes] Come back together for reflections

- How was that for you?
- Opportunities for 45-second shares/storytelling

[15 minutes] Places where stories can prompt change:

- Grant reporting
 - Could you sit two people down for a conversation – maybe an employee and a community member, a mentor and mentee, an intergenerational pairing – and have that conversation tell the story of the work you did?
 - Are there anecdotes you can use throughout your grant reports that bring forth the impact of your work?
 - If you are a granting agency, ask questions that elicit stories in your applications.
 - How might your community describe your work?
 - Tell us a story of a pivotal moment in your team's work?
- Websites
 - Incorporate audio snippets of people you serve telling the story of how your work impacts them
- Policy change
 - Policy change tends to live downstream of narrative change. We can reframe the narrative of rural caring work by telling a story of the innovation and impact of communities coming together to care for each other.
- Human connection
 - We can build storytelling into care work
 - Stories tend to be trust-building. When we take time to exchange stories, we are taking time to know and see each other.
 - Stories tend to be jargon-free, thus connective. Instead of: how does this pain impact your quality of life, you could ask, tell me about a day in your life living with this knee pain.
 - Asking patients a question or two on their intake form that prompts a story about who they are:
 - What is the most rewarding part of your life?
 - What motivates you to stay healthy?
 - What is the most challenging part of taking care of yourself?
- Satisfaction in your role
 - Many people in roles like yours want to feel connected to the people they care for
 - Introducing storytelling as a part of your work can increase a feeling of connectivity, understanding, and being on a team
- Stories can change the way we do our work. We often use patient stories to understand what failed in the system and how our work needs to change to safeguard from those failures. We can also use them to understand the expressed needs of the communities we serve and meet their expressed needs, using their shared wisdom and expertise in their context.

- Questions to trainees
 - Where do you see stories being overlooked?
 - Where do you see opportunities to bring stories to the forefront of decision making and care work?
 - How might stories be used to prompt change or to reframe something?
 - How can we tell stories that data can't capture?

[5 minutes] Closing exercise

Findings

Each training had significant participant engagement. Below are some highlights of the discussions that took place, and the guidance offered during the training to organizations with similar questions, considerations, and opportunities:

Working with small population sizes

In rural health equity work, small population sizes can lead to limited or missing data in assessments, which risks excluding certain communities from visibility and resources. To address this, collecting and sharing stories from these populations is essential to bring their needs and strengths to the attention of funders and decision-makers. Building trust and relationships through community engagement takes time, which traditional systems may not always support, but this effort leads to sustainable, long-term impact. While outcomes might not be immediately measurable in numbers served, the deep connections made lay a foundation for meaningful and lasting change. Stories are a reminder that policy and decision makers aren't deciding about numbers, they are deciding about people. They support communities in feeling as though they aren't being decided on behalf of, but rather are a part of larger decisions being made.

The group also discussed the need to de-identify storytelling participants in small communities where everyone is familiar with one another. Stories can still be true, even if identifying information needs to be changed. Storyteller safety and comfort is always the main priority.

Opportunities for storytelling

Sharing stories fosters openness and enhances health-seeking behaviors. Storytelling reflects this trust and serves as a powerful tool in showing the impact of community programs, especially in rural health contexts where care often looks different due to close-knit relationships. The group discussed using stories on platforms like websites, possibly with audio, to bring programs to life and make organizations' work accessible and relatable. Storytelling also supports policy change

by reshaping narratives, demonstrating innovation, and reframing how communities support each other. Additionally, stories create a jargon-free human connection, building empathy and understanding across communities.

Storytelling interventions do not require completely overhauling systems. Rather, each individual and organization can task themselves with finding ways to “sneak” storytelling into existing programs and processes.

Honoring storytellers

Numerous participants raised concerns about avoiding objectification in storytelling, where individuals share deeply personal stories that might be used for organizational gain, such as grants or reports, without an equal exchange. To avoid this unequal exchange, it is recommended that organizations foster awareness and care in the storytelling process, ensuring that the community—not the organization—remains the hero of each story, highlighting their own strength and resilience. To create a balanced experience, storytelling sessions should feel meaningful, such as by offering various storytelling methods (audio, written, or conversation) and welcoming supportive figures, like mentors, to participate. This approach values the participants, ensuring they feel respected and appreciated.

- When hosting storytelling opportunities or events, think about offering childcare, food, comfort items, and other elements to make the opportunity feel meaningful.
- Some organizations might opt to pay people for their time. This has to be done very carefully and intentionally to ensure that the compensation does not create a large power imbalance that might make participants feel obligated to share beyond their level of comfort.

Storytelling as trust-building

Storytelling is a trust-building exercise, thus, it takes time. The training emphasized the importance of allowing extra time in the recruitment process for trust-building, so storytelling sessions feel like genuine connections rather than transactional moments. Recognizing participants as experts on their own experiences is key, as is collecting feedback to ensure they feel comfortable and valued throughout. Transparency about how stories will be used also helps build trust, making participation feel beneficial to the storytellers, not just the organization. The central components of this approach are time and trust, which vary by project but are crucial for meaningful and respectful storytelling. This approach also increases the likelihood of engaging the people who are often hardest to reach with engagement efforts, and whose voices are most impactful in sharing the impact of care work within communities.

One participant shared their work on a medical-legal partnership project that brings lawyers into clinical and community settings to help address legal challenges tied to social determinants of health. Their quarterly reports outline patients' experiences, actions taken to help, and expected or achieved outcomes. The case studies in these reports are filled with stories, and they are exploring how stories can have an even larger role in their advocacy for policy change and give a platform to people who are not typically listened to by decision makers. The group discussed finding ways to make the case study creation process more patient-centered and meaningful by including the voices of the people being featured in the case studies.

Sometimes, storytelling builds trust through forgoing structure and allowing something more organic to emerge.

Preventative health storytelling

The group discussed the challenge of making preventative health stories compelling, as they are often seen as less exciting. Participants were invited to highlight relatable, everyday moments—like a healthy child's funny comments or the possibilities and milestone moments that happen because of the collective effort to keep people safe and well over their lives—as a way to illustrate the impact of preventative care. Reflecting on personal motivations for staying healthy, especially as people age, can also create powerful stories that underscore the value of prevention and the rich connections it fosters.

Changing the narrative of the work

One participant shared the challenge of changing perceptions of philanthropy, which is often seen as focused solely on money or sales, by emphasizing its connection to patient care. They shared a story about collaboration with an interdisciplinary team that highlights philanthropy's role in coordinating resources and care, underscoring how philanthropy can bring real, compassionate solutions to families in need. The story also exemplifies the importance of collaboration in rural care, where integrated support systems are essential.

Another story was shared by a community nurse about the unique nature of their care model—ancient yet new—which often requires them to explain their role. The group discussed the importance of their collaborative team, including community partners, despite the occasional isolation felt in remote settings. By thoughtfully crafting stories that reflect different aspects of their experience, nurses can advocate for their team's needs and foster a shared understanding of community nursing's challenges and collaborative efforts. This conversation brought up an important

aspect of storytelling as a kaleidoscope, where different versions of a story can be shared based on the audience and connection goals, with each version being true.

The group also discussed the approach of flooding society with authentic, connective stories that can help overcome the cultural challenges of listening and empathy. By making meaningful stories ubiquitous, we can create a collective narrative that fosters understanding and prevents people from overlooking each other's experiences. This approach could gradually shift cultural norms toward deeper connection and awareness in the work they do.

One example of this was a story about an organization that delivers food to communities. They have what is sometimes considered a "radical perspective" on food assistance, arguing that everyone deserves access to high-quality food as a basic human right. The speaker advocated for a shift in this mindset, emphasizing that quality food should be accessible to everyone, regardless of their circumstances. The group discussed how storytelling is an important part of changing this narrative by making sure that the general public is presented with stories on the impact of access to high-quality food.

Advocacy through storytelling

A government relations professional, advocating for a large healthcare system and its patients and providers, reflected on the importance of listening in advocacy work, especially given today's polarized state and federal environments. They share a recent example where storytelling made a decisive impact. This experience reminded them that advocacy is not only about direct persuasion but often about connecting people with policymakers to share real-life stories that drive change.

This led to a conversation about storytelling as a powerful tool that we all have a responsibility to wield carefully and truthfully with integrity.

Storytelling as resilience-building

The group discussed the importance of storytelling in fostering resilience within communities, particularly in the context of recovery from natural disasters. They observed how their own community comes together during floods, highlighting that strong connections and trust among individuals enhance resilience. Sharing stories allows people to relate to one another and feel part of a supportive community, which is crucial for recovery. Creating spaces for connection and storytelling enables individuals to feel less isolated, even if their experiences differ from their neighbors'. The group discussed the significance of providing a space for creativity and expression in the immediate aftermath of a crisis. This opportunity can help alleviate

the emotional burdens people carry, allowing them to feel less constrained by their experiences. By acknowledging that others are present and creating, individuals can begin to process their feelings and experiences. There is significant value in non-urgent interventions, such as "climate cafes," which can be as crucial as addressing immediate needs, as they foster connection and creative expression during challenging times.

Attendance

Training Date	Registrants
Wednesday, October 2nd, 2024 at 12pm ET	14 registrants
Monday, October 7th, 2024 at 6pm ET	12 registrants
Thursday, October 17th at 8am ET	21 registrants
Total	47 registrants

Training Date	Participants
Wednesday, October 2nd, 2024 at 12pm ET	11 participants
Monday, October 7th, 2024 at 6pm ET	4 participants
Thursday, October 17th at 8am ET	11 participants
Total	26 participants

Feedback

We received feedback from six of the 26 participants (23%) The feedback was as follows:

Question 1: I learned something in the training that I can apply to my work (1-5)

- 5 participants said 5, strongly agree
- 0 participants said 4, agree

- 1 participant said 3, neither agree nor disagree
- 0 participants said 2, disagree
- 0 participants said 1, strongly disagree

Question 2: Did the training meet your expectations

- 4 participants said “Yes”
- 1 participant said “I thought it was going to be more of a “how to”
- 1 participant said “I wasn’t sure what to expect”

Question 3: If you desire, please share how the training did/did not meet your expectations

- “The exercises were thought provoking”
- “It was nice to hear stories, but I do not have a connection to the other attendees...Maybe a resource group afterwards from interested participants could be helpful?”
- I would be interested in a part 2, to share more resources, supports, next steps. It was a good foundations session.
- I really appreciated the very structured definitions of types of stories with examples and also storytelling part of the learning that accompanied and reinforced the material
- This was my first experience with this topic and I feel like the facilitator provided a wonderful introduction to use and technique of storytelling with a gentle and engaging dialogue

Question 4: Did anything about the training surprise you?

- I’d like to dive more deep into the “who is being made the hero of the story” and balancing sharing impact with that. So important to consider.
- I was surprised by how I am looking at different podcasts, tvs shows, etc. as stories that are being told. I am now trying to figure out which “model” was followed.
- Wonderful stories told
- The variety of roles in attendance
- Gaining a little more confidence in my ability to tell stories
- Options for use of different storytelling styles and techniques

Question 5: Is there anything you wish would have been different in the 90 minutes we spent together?

- More time, of course
- A few more “build the toolbox” ideas
- I thought it was a very comfortable and valuable experience. I don’t usually come away from webinars feeling both of those things. Thank you!
- Three participants responded “no.”

Question 6: Is there anything else you would like us to know about your experience with this training?

- The exercises were thought provoking
- This was fantastic!
- The presenter was excellent
- More helpful in 90 minutes than I would have expected
- Thank you for offering multiple options. I wasn't able to join with my coworker on a different day.
- No

Question 7: What other topics would you be interested in if CARHE offered more opportunities like this?

- Deeper dive into this
- More tools to start a difficult conversation - perhaps about SDOH screening results
- Capturing a volunteer's interest
- Taking knowledge into action with storytelling (more examples, strategies, resources)
- A 2.0 session would be lovely!
- Helping folks access inexpensive options for preparing a will, DPOA, etc.