

Prioritizing a Participatory, Provider-centered Approach in Supporting Helping Professionals: Lessons Learned

[Behavioral Health](#)

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As a young therapist, the more interventions I was trained to use, the more overwhelmed I felt about delivering them. While I was learning the ins and outs of new therapeutic techniques, I felt unprepared for what it might actually be like for me and my clients to move through these new practices together. I didn't always have the support I needed to implement these practices in a way that made sense for my clients, caseload and clinical setting. I found myself wishing that more of my education and training included support to overcome the day-to-day barriers to implementation that I was experiencing.

Motivated to help address this challenge, I shifted my career to behavioral health research to examine what providers need to effectively implement new practices. In this post, I will share a few lessons I have learned since making that shift and working at PolicyLab on a project that centers community and partner voices in developing implementation supports.

There is [growing recognition](#) of the importance of community-based, participatory research and engaging community partners in co-creating interventions. I now work on a [project](#) developing implementation supports (i.e., tools to help providers—which I will use in this post to refer to helping professionals and those implementing interventions—execute an effective practice) for public school teachers' use of positive behavior management techniques. Throughout this research project we have prioritized the teacher perspective, as well as the input of other community partners.

During the first phase of the study, we interviewed teachers to understand their perspectives on barriers and facilitators to implementation of classroom interventions and collaborated with a team of school community partners to get their input. Through this community-based approach, we iteratively developed a toolkit of resources that teachers could use to support their implementation of evidence-based practices. Given the stressors placed on schools and teachers by the COVID-19 pandemic, it has been more important than ever to strengthen our partnerships and **value provider perspectives**.

Although this project has focused on working with schools and teachers, many of the lessons we have learned apply to efforts supporting all types of providers—such as therapists, physicians, nurses—in using evidence-based practices. **Here are some lessons we learned about the benefits of using this community-based approach:**

- **Listening to providers can help identify the most critical factors for designing supportive resources.** In our case, we learned that a key factor for teachers in implementing behavioral strategies with fidelity was ensuring a strong student-teacher relationship. Instead of designing resources that jump right into behavior management techniques, we designed the toolkit to begin with a foundation of strengthening their relationships with students.
- **Engaging partners supports provider buy-in.** Teachers told us that they are more likely to try a new resource if they know it was developed with the help of other teachers. Incorporating teacher voices within implementation supports communicates to teachers that their needs are valued and considered.
- **Partner input helps design for sustainability.** Partners told us about what kinds of implementation supports would be feasible for schools and teachers to use sustainably in the long run. We heard potential barriers we hadn't thought of, as well as ways to address them. This input helped us design for sustainability from the beginning.
- **Don't underestimate how much providers are willing to contribute and want their expertise to be recognized.** Despite the significant challenges of working in schools during the pandemic, teachers and school leaders generously shared their time and energy to weigh in about the development of a supportive resource for their colleagues and themselves.

My prior experiences as a therapist and more recent experiences in community-partnered research have shown me how critical it is to value providers' perspectives when developing implementation supports. Implementation barriers can be hard to overcome in real-world practice, and providers in real-world settings (whether that is clinics, schools or hospitals) are the experts in what type of support and resources they need.

As researchers, we must constantly evaluate if the voices of providers and the communities impacted have been centered in the work. In doing so, I hope that we will develop the type of implementation supports that I wish I had as a therapist, and that can help providers deliver the best care and support for children and families.



[Samantha Tavlin](#)

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