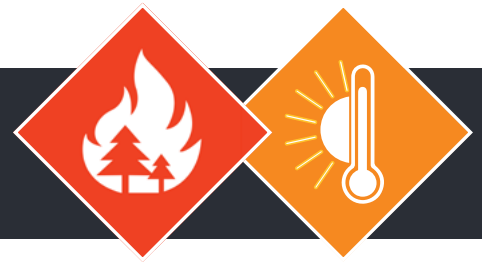


Reaching People Where They Are

Community Outreach & Local Adaptation



Focus: *Creative interventions to reach patients in the community before, during and after extreme weather events.*

A one-size-fits-all plan rarely works well on the ground. While standard guidelines provide a baseline, the most effective strategies are the ones tailored to the specific needs of your community: whether that means navigating tribal service boundaries or finding ways to reach homebound and unhoused patients. By moving beyond a generic approach, facilities can transform standard plans into practical, localized strategies and protocols that work for their specific staff and patient demographics.

The following field-tested lessons show how clinics and health centers have successfully integrated and adapted the resources provided by AmeriCares to fit their specific facilities and communities.



At a glance:

- **Listen and adapt to patient and community needs:** Use patient surveys to choose the most effective supplies and create inventive interventions for high-risk groups.
- **Build on existing success in community outreach** by folding extreme weather interventions into established and well-received outreach programs.

1 Listen and adapt to patient and community needs.

Successful adaptation begins with a willingness to bridge the gap between clinical advice and a patient's physical reality. When budgets are tight, many effective solutions can emerge from observing the specific barriers patients face such as a lack of shade, a hot commute or unstable housing. By creating a continuous feedback loop between staff and the community, clinics and health centers can pivot their resources in real time to meet shifting needs.

Filling the gaps to protect against heat.

In the Southwest, a clinic director noticed that many unhoused patients were coming in with painful burns and kidney issues. They realized the problem wasn't just the air—it was the ground. The pavement was so hot it was physically injuring people who had nowhere else to sit. To help, the clinic began handing out yoga mats. This gave patients a simple way to stay off the scorching concrete and avoid direct heat injury.

This same “listen first” approach helps when deciding what to buy too. One facility that was waiting on funding didn't want to guess what would be most helpful. They surveyed their patients to see if they preferred fans or misters. By letting the community pick, the clinic made sure their limited money went toward things people would actually use.



Key takeaways:

- **Establish a feedback loop:** Use short surveys or chat with patients to find out which supplies and interventions are helpful and which ones aren't working for them.
- **Look for local hurdles:** Think about the environment in which patients live. Are there things like hot pavement or a lack of shade on their commute that make it hard for them to follow your advice?
- **Stay flexible:** Set up a way to change your supply or distribution list mid-season. If the heat gets worse or patients ask for something different, be ready to pivot.

2 Build on existing success in community outreach.

Transforming a generic plan into a localized intervention often means finding ways to be helpful without reinventing the wheel. Rather than asking patients to navigate a new, standalone program during a crisis, some facilities have found success by folding extreme weather interventions into the established and well-received programs their community already values. This integration helps ensure that extreme-weather-readiness is seen as a normal part of year-round preventative health and wellness that fits the existing habits of the community rather than an additional task to complete.

Leveraging hard-won trust.

One way to expand the reach of extreme weather safety is to integrate it into programs that have already earned community trust. In the Pacific Northwest, a facility added wildfire smoke safety to “**Project Breathe**,” an existing lung health and smoking cessation campaign.

By adding wildfire smoke safety and N95 mask distribution to this trusted program, the clinic didn’t have to build a new audience from scratch; they simply shared new information through a source patients already valued.



Key takeaway:

- **Build on existing success:** Don’t launch isolated campaigns; integrate extreme weather interventions into established outreach programs to increase community buy-in and save resources.

Summary checklist for clinics or health centers

- Patient-led priorities:** Have you used patient surveys to determine which supplies (e.g., cooling towels, air filters or electrolyte packets) are most needed by your community?
- Dynamic supply planning:** Do you have a process to adapt your distribution kits mid-season based on shifting supply availability and real-time patient feedback?
- Leverage trusted channels:** Have you identified your facility’s most successful existing outreach campaigns to use as platforms for extreme heat and wildfire smoke safety education?
- Combine weather-safety information with existing campaigns.** Non-communicable diseases (diabetes, COPD, asthma) are exacerbated by extreme weather, and events or outreach for one can be combined with the other.