

The Detroit Community-Academic Urban Research Center: Establishing and Maintaining a Partnership for Change*

Alex Allen, Director
Butzel Family Center

Barbara A. Israel, Professor

University of Michigan School of Public Health

Presented at the Community-Campus Partnership for Health
Sixth Annual Conference “The Partnership as the Leverage Point for Change”

Miami, FL

May 5, 2002

*Parts of this presentation were drawn from selected references listed at the end of these slides. We acknowledge the contributions of our colleagues in the Detroit Community-Academic Urban Research Center and affiliated projects.

DEFINITION OF COMMUNITY-BASED PARTICIPATORY RESEARCH (CBPR)

Community-based participatory research in public health is a partnership approach to research that equitably involves, for example, community members, organizational representatives, and researchers in all aspects of the research process; with all partners contributing their expertise and sharing responsibility and ownership to enhance understanding of a given phenomenon, and to integrate the knowledge gained with action to improve the health and well-being of community members.

Detroit Community-Academic Urban Research Center (URC) Partner Organizations

Butzel Family Center

Community Health and Social Services Center (CHASS)

Detroit Health Department

Detroit Hispanic Development Corporation

Friends of Parkside

Henry Ford Health System

Kettering Butzel Health Initiative

Latino Family Services

Southwest Counseling and Development Services

University of Michigan Schools of Public Health and Nursing

Warren/Conner Development Coalition

Centers for Disease Control and Prevention

Overall Mission of the Detroit URC

Establish an effective community-based participatory research partnership to jointly identify factors affecting the health and well-being of residents on the east and southwest sides of Detroit, and to implement and evaluate interventions and policies to address these factors in ways that recognize, build upon and enhance the resources and strengths in the communities involved.

Processes Involved in Developing the Center and URC Board

- Grant proposal submission - what not to do
- Meetings with partner organizations
- Developing the URC Board
 - ◆ establishment of operating norms
 - ◆ adoption of CBPR principles

URC Principles of Community-Based Participatory Research

1. Emphasis on local relevance of public health problems and examination of the social, economic and cultural conditions that influence health status
2. Integrates knowledge generation and intervention for mutual benefit of all partners
3. Builds on strengths and resources and enhances the capacity of participants in the process

URC Principles of Community-Based Participatory Research (continued)

4. Promotes co-learning and empowering process in which all partners are involved in all major phases of the research process
5. Facilitates collaborative partnership
6. Disseminates findings to all partners in clear language respectful to and that will benefit the community

URC Principles of Community-Based Participatory Research (continued)

7. Conducted according to norms of partnership (e.g., mutual respect, open communication)
8. Publications/presentations resulting from research involve and acknowledge all partners
9. Adheres to “human subjects” review process standards and procedures

Processes Involved in Developing the Center and URC Board (continued)

- Process of setting priorities
 - ◆ identification of community strengths and problems
 - ◆ discussion of issues partner organizations address
 - ◆ selection of levels of affiliation and participation
 - ◆ further identification of problems and selection of priorities
- Establishing an infrastructure

Detroit Community-Academic Urban Research Center: Accomplishments

- The URC presently has 11 funded CBPR projects including:
 - ◆ East Side Village Health Worker Partnership
 - ◆ LA VIDA - Southwest Detroit Partnership to Prevent Intimate Partner Violence Against Women
 - ◆ Eastside Access Partnership
 - ◆ Michigan Center for the Environment and Children's Health
 - ◆ Racial and Ethnic Approaches to Community Health (REACH Detroit)
 - ◆ Healthy Environments Partnership

Accomplishments (continued)

- Over 23.5 million dollars received
 - ◆ governmental and foundation funding
 - ◆ CBOs serve as lead organization/fiduciary
- Hired over 150 community members for full or part-time positions
- Building new relationships
 - ◆ linking east and southwest Detroit
 - ◆ linking University and communities

Accomplishments (continued)

- Disseminated results through over 20 publications, and 70 presentations, posters, workshops
- Has involved 20 University of Michigan faculty and over 60 graduate students (including post-doctoral scholars)
- Involves community-based partners as guest lecturers in classes and preceptors for student internships

Changes Occurred as a Result of the Partnership

- Individual level (e.g., capacity building, enhanced asthma related knowledge and skills, increased social support)
- Family level (e.g., improved quality of life for family members)
- Organizational level (e.g., University, Community-Based Organizations)
- Community level (e.g., improved access to affordable fruits and vegetables)

Evaluation Results: Challenges

- Establishing and maintaining trust
- Agreeing upon a common purpose
- Significant time required to develop positive relationships and jointly carry out tasks
- Seeking balance between task and process/
research and action

Challenges (continued)

- Working together amidst ethnic, cultural, social class and organizational differences
- Following agreed-upon CBPR principles in practice
- Working toward fair distribution of resources and benefits

Challenges (continued)

- Questions of scientific quality of the research
- Proving partnership/intervention success
- Competing institutional demands and risks

Lessons Learned and Recommendations for Conducting CBPR

- Jointly develop CBPR principles and what it means to have a “collaborative, equitable partnership”
 - ◆ Use informal democratic processes and consensus decision-making
- Create a balance between time spent on process issues and tasks/products
- Select mutually defined priority issues, goals and objectives

Lessons Learned and Recommendations (continued)

- Focus on community strengths as well as problems
- Need to decide how community is defined and who represents the community
 - ◆ Start small, involving a few highly regarded CBOs within communities of identity
 - ◆ Obtain support and involve top leadership from partner organizations
 - ◆ Build on prior history of positive working relationships
- Establish procedures for dissemination

Lessons Learned and Recommendations (continued)

- Acknowledge researcher orientation and commitment
- Apply methodological flexibility and different criteria for judging effectiveness
- Establish and maintain infrastructure
- Reach a balance in the distribution of benefits and resources
- Conduct ongoing evaluation of the partnership process

Concluding Remarks

Need for greater:

- institutional awareness and recognition of the meaning and value of community-based participatory research;
- funding support from public and private funding institutions, particularly in communities that experience a disproportionate burden of health disparities;
- emphasis on promoting policy changes consistent with and supportive of CBPR;

Concluding Remarks (continued)

Need for greater:

- emphasis on capacity building and training of all partners to enhance skills needed to conduct CBPR;
- benefits and reward structures for involvement in CBPR; and
- use of multiple case study evaluations to assess the context, process and outcomes of CBPR endeavors.

Selected References

1. Israel, B.A., Schulz, A.J., Parker, E.A. and Becker, A.B. Review of community-based research: Assessing partnership approaches to improve public health. *Annual Review of Public Health*, 19: 173-202, 1998.
2. Lantz, P.M., Viruell-Fuentes, E., Israel, B.A., Softley, D., Guzman, J.R. Can communities and academia work together on public health research? Evaluation results from a community-based participatory research partnership in Detroit. *Journal of Urban Health*, 78(3): 495-507, 2001.
3. Israel, B.A., Lichtenstein, R., Lantz, P., McGranaghan, R., Allen, A., Guzman, R., Softley, D., Maciak, B. The Detroit Community-Academic Urban Research Center: Lessons learned in the development, implementation and evaluation of a community-based participatory research partnership. *Journal of Public Health Management and Practice*, 7(5): 1-19, 2001.

Contact person:

Barbara Israel, Dr. P.H.

Professor, Department of Health Behavior & Health Education

School of Public Health, University of Michigan

1420 Washington Heights

Ann Arbor, MI 48109-2029

samanj@umich.edu