CES4Health.info: An Online Tool for the Peer Review and Dissemination of Innovative Products of Community-engaged Scholarship from around the World

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Outline of Today’s Session

1. Setting the context – knowledge mobilization
2. Responding to the context: CES4Health.info
3. Why CES4Health.info was developed: value and benefits
4. CES4Health submission and peer review processes overview via virtual tour
Setting the Context

KNOWLEDGE MOBILIZATION
Do we have data overload or filter failure?
And are we having the impact we are seeking?

“My question is: Are we making an impact?”
Are We Still Hunting and Gathering?

Never in human history have we hunted for so much data, information and knowledge.

Never in human history have we gathered so much that is useful but not used.
Over – Consumption?

- Email: 144 billion email per day worldwide. (2012)
- Websites: 624 million (2012)
- Users: 2.4 billion (2012)
- Mobile: 6.7 billion mobile subscriptions (2012)
- Facebook: 1 billion users (2012)
- Google: 1.2 trillion searches on Google (2012)
- YouTube: 4 billion hours/month of video watched (2012)
- Youth: spend less time watching TV (60%) and more time online (600%)
Data and information is for processing.
It becomes knowledge when it has a social life.
Significant shift in thinking about research impact

- **Passive push** (until 1970s+)
  - Dissemination via traditional journals, conferences

- **Push harder** (1990s+)
  - Focus on implementation, e.g. performance feedback

- **Partner & pull** (2000+)
  - Linkage & exchange, e.g. joint production
Decisions are a complex calculus

Philip Davies, Is Evidence-Based Government Possible?
Jerry Lee Lecture 2004, Washington, DC

Knowledge Mobilization Works ©Peter Levesque 7 June 2013
Systems Thinking and Knowledge Mobilization

Now What: Decisions, Directions, Actions

So What: Meaning, Analysis, Interpretation

What: Data, Information, Description, Stories

MULTIPLE INPUTS FROM RESEARCH, PRACTICE, EXPERIENCE, CULTURE

Value Creation

Incentives to Share between Levels

Supporting Infrastructure

Initiatives

Innovation

Programs
Policies
Priorities
Processes
Practice

Products
Perspectives
Procedures
Possibilities
People Skills

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Core of Value Creation is Conversation
We need to be creative:

In order to create the “ideal” future, you need a lot of ideas from which to choose otherwise the future tends to look like a linear extension of what already exists.

Or

If you want to know what the future is, be part of its development. (Peter Drucker)
More Context

- What is “Community-engaged Scholarship” (CES)
  - What is Community Engagement?
  - What is Scholarship?
  - What is CES?
Products of CES

- **Conventional**: Journal manuscripts
  Impact primarily on academic audiences

- **“Innovative”**: Diverse and innovative
  - Results of CES: *Examples*: Policy briefs, videos, photo voice exhibits
  - Tools that can be adapted or adopted by others: *Examples*: Assessment instruments, instructional manuals, partnership agreements
Challenges of Disseminating Innovative CES Products

- Lack of peer reviewed publication outlets
- Format of peer-reviewed journals not conducive to innovative CES products
- Traditional peer-review process may not find value in CES products, innovative or conventional
Challenges of Promotion and Tenure

- The traditions of the system – need updating
  - Impact – Need expanded definition (not just academic publications and journal impact scores)
    - Demonstrate community impact
  - What “counts” as scholarship– Need acceptance of diverse scholarly products (not just peer-reviewed journal articles)
Challenges of Making Community Impact Through CES

- Traditional products of CES not usually intended for community audiences
- Community audiences have limited access to traditional products
- Innovative products of CES may have impact on community with which they were created
- Limited impact elsewhere - few mechanisms for broad dissemination of innovative products
- No mechanism for determining what impact products made
Responding to the Context

CES4HEALTH.INFO
A component of Community-Campus Partnerships for Health’s Faculty for the Engaged Campus Initiative, supported in part by the Fund for the Improvement of Postsecondary Education of the US Department of Education
Purpose of CES4Health.info

- Mechanism for peer review & online publication of products of community-engaged scholarship in forms other than journal manuscripts

- Intended to both increase impact of these products in communities & increase likelihood they will count in faculty promotion & tenure review
Minimum Submission Criteria

- **The CE** in CES4Health – Community-engaged, not community-placed

- **The S** is CES4Health - The project that resulted in the product was approached in a scholarly way – builds upon or is grounded in previous practice or evidence

- **The Health** in CES4Health – Defined very broadly
Examples of 52 Products Published to Date

- CBPR with Indigenous People (educational video)
- Partners in Research: Curricula to Prepare Community and Faculty for CBPR Partnerships
- Engaging the Underserved: Personal Accounts of Communities on Mental Health Needs for Prevention & Early Intervention Strategies (report)
- Toolkit to Establish & Sustain Year-Long Walking in Rural Communities
- Overtown Cookbook (evidence-based & taste-tested culturally diverse healthy recipes)
- Mapping Memories (digital stories of refugee youth & curriculum resources for engaging youth)
- “What’s the Big Deal?” Readers’ Theatre to Inform, Inspire, and Ignite Action
The Value of CES4Health.info
CE4Health Review Process

- **Rigorous review:**
  - Reviewers complete one hour training with Editor.
  - Comprehensive reviewer rating form – quantitative and qualitative sections
  - Review criteria based on Glassick, Huber and Maeroff (1997)
Making It Count in P & T Reviews

- Fills a gap: Offers rigorous peer review and broad dissemination
- Authors include citations in peer reviewed publication section of dossier
- Educates administrators & committee members
  - Send letters to those identified (congratulatory and educational)
- Demonstrates impact: Track “hits” and downloaded products
- Can survey users for feedback on quality and impact
Making It Accessible to Communities

- Fills a gap: High quality applied products, along with guidance for their use by others, are freely available online.

- Accessible - Robust search options:
  - Keyword, title & author
  - General topics (e.g., nursing, social & behavioral sciences)
  - Specific topics (e.g., HIV/AIDS, domestic violence)
  - Specific populations (e.g., homeless, refugees)
  - Methodological approach (e.g., focus group, survey)
  - Resource type (e.g., evaluation tool, curriculum)
  - Product type (e.g., DVD, website)

- We know there is community interest - “hits” and downloaded products.
Other Benefits for Community Partners

- Opportunity to be recognized for their contribution
  - Co-authorship, acknowledgements

- Might highlight something good happening in their community

- The process of preparing for and submitting to CES4Health should embody principles of partnership
A Virtual Tour
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Tips for Product Development and Submission

- Technical assistance available

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