

## **ROLE PLAY: THE START OF A COMMUNITY-BASED PARTICIPATORY RESEARCH (CBPR) PARTNERSHIP?**

**By Susan Gust and Sarena D. Seifer (see companion case study sent to panelists in advance)**

**First performed during Community Engagement Grand Rounds, University of Cincinnati, April 12, 2011**

**INTRODUCTION:** We explain that we are using a role-playing type of exercise to give some texture to these characters in this fictional situation. We are not basing this script on anyone that we know nor is this situation based in any reality to the best of our knowledge. Our goal is to not necessarily entertain but to try to portray the multiple levels upon which this work unfolds in real situations and how each person or entity has many facets which might benefit or complicate a project.

As CBPR work becomes more sophisticated, hopefully, the lines between the “we” and “they” will also begin to dissolve. Community members will be part of the institution and institutional members will be part of the community. Each has their assets to be lent as well as challenges that must be openly discussed.

There is no right or wrong way for this scenario to unfold. We hope to provoke you to think about what parts of any of these characters do you perhaps intimately understand and what will you do?

Dr. Jackson      **SUSAN**  
(in her office)

- ★ Reads about a new NIH funding program and wants to apply
- ★ Is sure she we will be able to get the funding
- ★ Really cares about the problem
- ★ Never has done CBPR; Not sure how to start and doesn't really have time to think about these sorts of details
- ★ Calls Dr. Lacey to ask her to get this “CBPR part” off of the ground; knows that Dr. Lacey has a great deal of experience in this and lots of trusted contacts in the community.

Dr. Lacey                      **SARENA**

(receives the call in her office)

- ★ Well-connected in the community
- ★ Lives in the community/has a child in a local school, faith community
- ★ Has done a lot of CBPR
- ★ This would be great on her CV and would help her with promotion and tenure
- ★ Doesn't want to use the members of her community
- ★ Decides to start by calling her friend, Janine, and colleague at the local health dept.

Janine                              **SARENA**

(receives the call from Dr. Lacey in her office)

- ★ Exchange of some pleasantries
- ★ Turns out, Janine has already read about this NIH funding proposal from a listserv she is on. Was going to call Dr. Lacey about it.
- ★ Loves the idea. Even better that renowned Dr. Jackson wants to participate.
- ★ She is certain that her supervisor will enthused about this idea and will gladly commit two personnel to the project with one of them being Janine. It will help to cover her salary and the salary of another for the next few years. Money is tight because the city has had to make drastic cuts due to State budget shortfalls. In fact, there was some hinting that Janine may have become  $\frac{3}{4}$  time in a few months. She has a child with a chronic condition and this would have posed a hardship for her. This might stave this off.
- ★ Individuals in this agency have worked successfully with CBPR before but it has not yet become embraced by the department.
- ★ The public health agency is eager to work with a new, emerging direct service nonprofit that works with a specific ethnic population. This nonprofit represents a certain constituency of one of the more powerful City Council members. Janine is certain that this nonprofit will want to participate because they really want to get into more of the "big leagues".
- ★ Dr. Lacey somewhat reluctantly agrees to have Janine make the call. But, she is glad that it is a new person/organization and not one with whom she has a relationship.

CBO Executive Director, Olivia  
(in her new office)

**SUSAN**

- ★ Olivia receives the call from Janine at the City Health Dept. and is very excited to be getting the call.
- ★ She wants to make a good impression so is extremely positive even though she is not sure what CBPR is or exactly who all of these different players are, what they want out of it, etc.
- ★ She is very excited about this idea and how it will serve her community. She knows that her community suffers with a high incidence of diabetes. She feels good about accepting this offer because it is the “right thing to do”.
- ★ She already commits one full-time staff person to work on this project even though she is just conducting the final interviews for this project and doesn’t really have this type of work in the job description. But, with this amount of funding, she should be able to make it work.

Terri- A community activist **SUSAN**

Dr. Lacey

**SARENA**

(each are on the phone)

- ★ Terri calls Dr. Lacey and asks what in the heck is going on? She has worked closely with Dr. Lacey before but hears about this project through some of her neighbors who are founding board members of the new nonprofit where Olivia is the ED.
- ★ Diabetes runs in Terri’s family. She does not yet have it but is concerned that she may eventually.
- ★ Partially, Terri feels slighted by Dr. Lacey who she thought was a trusted person but then again, they don’t quite have the relationship to say that.
- ★ She likes the idea of this study and the potential impact it may have on the community and the public policy changes that may come from it but she also is well-seasoned enough as an activist to know that the process thus far is headed on a collision course. How does she deliver that info and expertise without sounding like an obstructionist and so that it may be able to be helpful in altering the process? She asks that a community meeting be called with all of the key players present. She promises to help to get people to the meeting.

## **BREAK and DIALOGUE WITH PANEL and AUDIENCE**

### **QUESTIONS**

1. What are some of the tensions that exist within this scenario?
2. Is there a person that is more “right” than the others and if so, why?
3. Who holds the power in this scenario and how or why?
4. Who holds the greatest assets in this scenario?
5. What do you think will happen at the meeting?

### **CITATION:**

Gust S & Seifer SD. Role Play: The Start of a Community-Based Participatory Research Partnership? Community-Campus Partnerships for Health, 2011. <http://ccph.info>