



Exploring the Role of Partnerships in Health Promotion

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Citation for this Presentation

Greene-Moton E. Exploring the Role of Partnerships for Health Promotion. Invited Presentation, Australian Health Promotion Association Conference, May 2010.



Objectives:

- Define health promotion
- Describe the CCPH Model
- Identify strategies to implement the CCPH Model in health promotion
- Provide examples of existing health promotion partnerships using the CCPH Model



At an individual level, health promotion is the process of enabling people to increase control over the determinants of health and thereby improving their health.



- ❑ People are impacted by determinants of health in the communities where they live.
- ❑ If we venture to understand the fundamental need for healthier communities, the important role that communities play in health promotion becomes apparent.
- ❑ We then begin to believe that we move from individual actions to the power of shared ideas, resources, and experiences that work to create those healthier communities.



- ❑ But the health of a community is impacted by societal forces over which community members have little control.
- ❑ Overcoming complex societal problems and creating healthier communities requires collaborative solutions which bring **COMMUNITIES** and **INSTITUTIONS** together as equal partners and build upon the assets, strengths, and capacities of each member.



CCPH views inclusion as a strength and a centerpiece of all truly collaborative relationships and/or authentic partnerships.



CCPH At-A-Glance

- Nonprofit membership organization launched in January '97
- 15-member board of directors that follows a policy governance model
- 1,800 members from communities and campuses across Canada, the US & other countries
- Private & public funding
- Staff, students & senior consultants



Mission

To promote health (broadly defined) through partnerships between communities and higher educational institutions



Goals

- **Combine knowledge, wisdom & experience** in communities and in academic institutions to solve major health, social and economic challenges
- **Build capacity** of communities & higher educational institutions to engage each other in authentic partnerships
- **Support communities** in their relationships & work with academic partners
- **Recognize & reward** faculty for community engagement & community-engaged scholarship
- **Develop partnerships** that balance power & share resources equitably among partners
- **Ensure community-driven social change** central to service-learning & community-based participatory research (CBPR)

WHERE DO WE START?

- “A collaborative approach to research that equitably involves all partners in the research process and recognizes the unique strengths that each brings. CBPR begins with a research topic of importance to the community and has the aim of combining knowledge with action and achieving social change...”

W.K. Kellogg Foundation, 2001

Why Do CBPR?

□ *Historically, research has...*

- Rarely directly benefited and sometimes actually harmed the communities involved
- Excluded affected communities from influence over the research process
- Resulted in understandable distrust of, and reluctance to participate in, research
- Been labeled by communities as parachute, helicopter or drive-by research
- Led to interventions that are not tailored to the concerns & cultures of participants, and focused narrowly on individual behavior change



- ❑ As interest in community-based participatory research (CBPR) grew, there was a growing need and demand for educational resources that help build the knowledge and skills needed to develop and sustain effective CBPR partnerships.



- ❑ An evidence-based curriculum was developed, intended as a tool for community-institutional partnerships that are using or planning to use a CBPR approach to improving health. It can be used by partnerships that are just forming as well as mature partnerships



Curriculum Components

- Unit 1: CBPR – Getting Grounded
- Unit 2: Developing a CBPR Partnership – Getting Started
- Unit 3: Developing a CBPR Partnership – Creating the “Glue”
- Unit 4: Trust and Communication in a CBPR Partnership – Spreading the “Glue” and Having it Stick
- Unit 5: Show Me the Money – Securing and Distributing Funds
- Unit 6: Disseminating the Results of CBPR
- Unit 7: Unpacking Sustainability in a CBPR Partnership



Principles of Partnership

CCPH board of directors, 1998 & 2006

- Partnerships form to serve a specific purpose and may take on new goals over time.
- Partners have agreed upon mission, values, goals, measurable outcomes and accountability for the partnership.
- The relationship between partners is characterized by mutual trust, respect, genuineness, and commitment.
- The partnership builds upon identified strengths and assets, but also works to address needs and increase capacity of all partners.
- The partnership balances power among partners and enables resources among partners to be shared.



Principles of Partnership –Cont'd

- Partners make clear and open communication an ongoing priority by striving to understand each other's needs and self-interests, and developing a common language.
- Principles and processes for the partnership are established with the input and agreement of all partners, especially for decision-making and conflict resolution.
- There is feedback among all stakeholders in the partnership, with the goal of continuously improving the partnership and its outcomes.
- Partners share the benefits of the partnership's accomplishments.
- Partnerships can dissolve and need to plan a process for closure.



Defining Community

CCPH board of directors, 2005

- Defining “community” in community-based research is more about the process of asking questions than about a strict definition of who “is” community or “represents” community:
 - Are those most affected by the problem at the table?
 - Are those who have a stake in the issue being addressed at the table?
 - Do they play decision making roles?



Defining Community

CCPH board of directors, 2005

- There is no “one” definition of community
 - Geography
 - Age
 - Ethnicity
 - Gender
 - Sexual orientation
 - Disability, illness or health condition
 - Common interest or cause
 - Shared values or norms

Focusing on the work...

Fundamental Causes of Health Disparities

- Social/Institutional/Environmental Conditions

- Immigration & Acculturation ~ Socio-Economic Status ~ Neighborhood Environment ~ Occupational Exposures ~ Access to Health Care ~ Quality of Health Care



- Behavioral and Biological Risk Factors

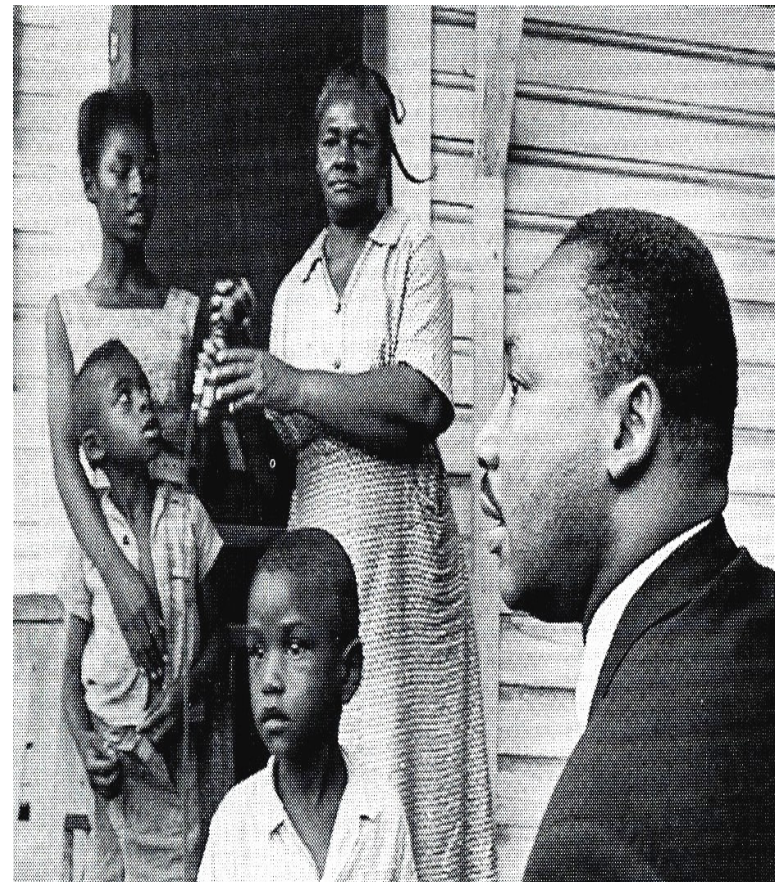
- Biological Aspects of Race/Ethnicity ~ Genetic Attributes & Gene Expression ~ Sedentary Lifestyle ~ Rates of Cigarette Smoking ~ Nutrition Choices & Options ~ Alcohol & Drug Consumption ~ Risk Taking Behaviors



- Health Outcomes

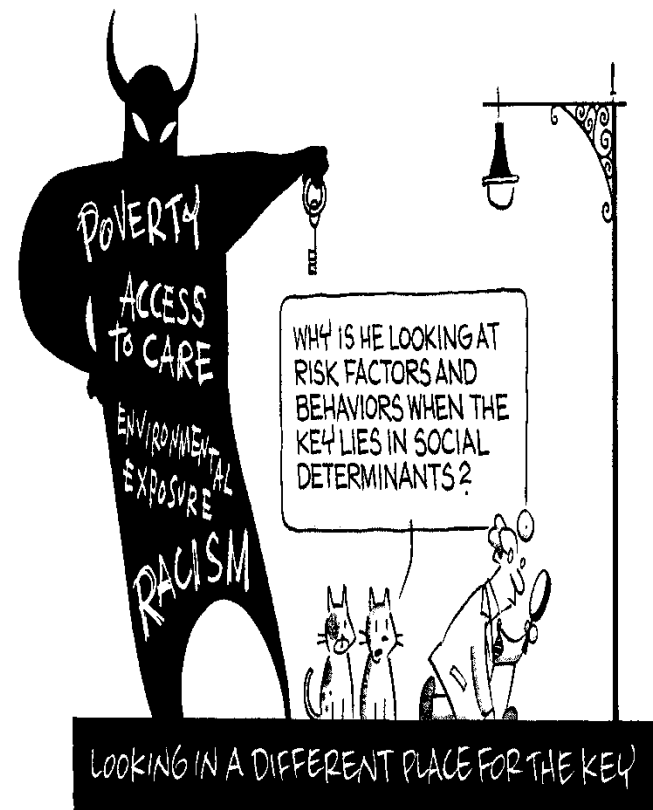
Health Disparities: A Social Justice and Human Rights Issue

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- Of all forms of inequality, injustice in health care is the most shocking and inhumane.
- ~ Rev. Martin Luther King Jr.
- 2nd National Convention of the Medical Committee for Human Rights, Chicago, March 25, 1966



Looking for *Causes* ... in all the *WRONG PLACES*

- **T**here's an old joke about a man who late one night dropped his keys in the middle of a dark parking lot. He moves some distance over to the side of the lot and begins a fruitless search for them under a bright light. When asked why he was not looking where he actually dropped them, he replied, "because this is where the light is."





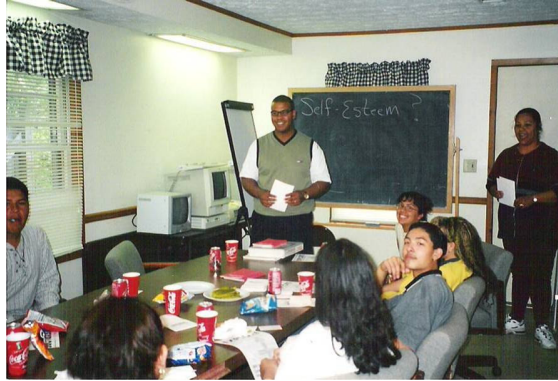
Partnerships looking in the right Places...

- Community-Based Organization Partners (CBOP)
- Community Based Public Health Caucus (CBPH Caucus)
 - National Community Based Organization Network (NCBON)
 - An Academic Boot Camp (ABC)
- Community Board (Prevention Research Center of MI)
- National Community Committee (NCC)



Australia Connections

- 27 members in Australia, from 12 organizations:
 - Charles Darwin University
 - Curtin University of Technology
 - Flinders University
 - James Cook University
 - La Trobe University
 - Monash University
 - University of Melbourne
 - University of Sydney
 - University of Technology, Sydney
 - University of Western Australia
 - University of Western Sydney
 - University of Wollongong
- CCPH Executive Director was
 - Visiting Scholar at University of Sydney in 2002
 - CCPH hosted Rae Walker, La Trobe University, in 2006
 - CCPH hosted Michael Cuthill, University of Queensland, in 2006
 - CCPH Board Member invited speaker at Australian Health Promotion Association Conference in May 2010
 - CCPH Executive Director & Board Chair-Elect invited speakers at Australian Universities Community Engagement Alliance Conference in July 2010



Faces of CCPH



Stay Connected & Informed

www.ccph.info

- ❑ Monthly E-News & Partnership Matters E-Newsletter
- ❑ Electronic Discussions Groups
- ❑ Facebook & Twitter
- ❑ CBPR Partnerships Curriculum
- ❑ Community-Engaged Scholarship Toolkit
- ❑ CES4Health.info
- ❑ CBPR and Service-Learning Workshops and Training Institutes
- ❑ CCPH Consultancy Network



Tap into CCPH Resources!

www.ccph.info

Upcoming Events

Community-University Partnerships: Bringing Global Perspectives to Local Action, May 10-14, 2011, Waterloo Region, Ontario, Canada – Proposals Due July 1, 2010!

Online Reports & Toolkits

Ensuring Community-Level Research Protections
Developing & Sustaining CBPR Partnerships

Electronic Discussion Groups

CBPR, community partners, service-learning



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Community-Campus Partnerships for Health

We invite you to join a growing network of communities & campuses that are collaborating to promote health

Email us at ccph.info@gmail.com or
visit us online at www.ccph.info

