Community-Based Participatory Research

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Goals

- Consider why CBPR is important
- Define CBPR
- Consider the essential role of trusting, equitable relationships in CBPR
- Consider whether CBPR is right for you
Handouts

- Excerpt of curriculum, “Developing & Sustaining CBPR Partnerships”
- Gust & Jordan's Community Impact Statement
- Community Partner Summit Group's chapter in Handbook of Engagement
Mission

To promote health (broadly defined) through partnerships between communities and higher educational institutions
Overcoming complex societal problems and creating healthier communities requires collaborative solutions which bring COMMUNITIES and INSTITUTIONS together through authentic partnerships that build upon the assets, strengths, and capacities of each.
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)
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
Defining “community” in CBPR 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?
- Are those with resources (e.g., knowledge, connections, funding) needed to address the issue at the table?
- Do they play decision making roles?
Community involvement in research

Recipient of research results
Research subject/participant/site
Institutional Review Board member
Board member (advisory, governing)
Advocate
Consultant
Member of the research team
Co-author
Co-principal investigator
Principal investigator
Community involvement in research

Much of the research, which is presented as community-based research, could better be named community-placed research, located in communities but not involving communities as partners.

O'Toole et al., 2003 JGIM
What is CBPR?

“...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 interventions to improve the health and well being of community members.”

Israel, BA Annual Review of Public Health, 1998
What is CBPR?

“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

“Scientific inquiry conducted in communities in which community members, persons affected by condition or issue under study and other key stakeholders in the community’s health have the opportunity to be full participants in each phase of the work – conception, design, conduct, analysis, interpretation, conclusions and communication of results.”

Federal Interagency Working Group on CBPR, 2003
NIH Scientific Interest Group on CBPR, 2007
Community-Based Participatory Research (from AHRQ evidence report on CBPR)

Health Concerns Identified

Participants recruited and retention systems implemented

Measurement instruments designed and data collected

Intervention designed and implemented

Data analyzed and interpreted

Translation of findings

Traditional Research Approach

C. helps identify key issues

C. helps with study design, budget, proposal submission

C. gives guidance re recruitment and retention

C. helps with measures development and testing

C. helps guide intervention development

C. helps with data interpretation and publications

→ Incr. motivation to participate

→ Incr. acceptability and “buy-in”

→ Enhanced recruitment and retention

→ Increased reliability and validity

→ Greater relevance and likelihood for success

→ Enhanced potential for translation and dissemination

Issues selected from data

Design: science and feasibility

Budget: research expenses

Recruitment and Retention based on science and “best guesses”

Measures adopted or adapted from other studies, psychometric testing

Intervention designed by researchers based on literature and theory

Researchers report findings from analysis and publish in peer review journals
Why Do CBPR?

Historically, research has...

Rarely directly benefited and sometimes actually harmed the communities involved
Excluded them 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
Why Do CBPR?

Health interventions have often not been as effective as they could be…

Not tailored to the concerns & cultures of participants

Rarely include participants in all aspects of intervention design, implementation & evaluation

Focused narrowly on individual behavior change with less attention to broader social & structural issues
CBPR: A Case Example
Success Factors

- Trusting relationships
- Equitable processes and procedures
- Diverse membership
- Tangible benefits to all partners
- Balance between partnership process, activities and outcomes
- Significant community involvement in scientifically sound research
- Supportive partner organization policies and reward structures
- Leadership
- Culturally competent and appropriately skilled staff and researchers
- Collaborative dissemination
- Ongoing partnership assessment, improvement and celebration
- Sustainable impact

Ingredients of Successful Partnerships

“You can’t just walk in with the expectations of creating a partnership. It takes time to develop mutual understanding and make sure you don’t exploit.”

“There is suspicion of dominant institutions. If I go into communities, all the relationship building is personal. People need to get to know me and trust me personally and know that I will deliver and not just disappear after the study. This happens over time.”

“It is key that all partners benefit, are clear what the benefits are and resources are shared.”
Principles of CBPR

Respect each other’s contributions;
Encourage change & promote knowledge to benefit community;
Share credit and responsibility for results;
Promote an emphasis on locally relevant health issues;
Examine social, economic and cultural influences on health;
Collaborate on all major phases of the research process;
Treat research participants ethically;
Furnish results to the community in a useful manner;
Utilize community strengths and expertise; and
Link research to action to enhance community capacity.
Community Impact Statement Process

Preparing the Ground

Making the Connections/Building the Relationships

Doing the Work

The Harvest: Evaluation/Dissemination/Policy Implications/Completion
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

CCPH board of directors, 1998 & 2006

- 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.
Framework for Authentic Partnerships

Citation: Achieving the Promise of Authentic Community-Higher Education Partnerships: Community Partners Speak Out! CCPH, 2007

1. Quality processes

“We are not just talking about a process that involves partners. There needs to be a process of shared decision making.”

~ Ella Greene-Moton, Flint, MI

Relationship focused…open, honest and respectful….trust-building…acknowledging of history…committed to mutual learning…sharing credit
2. Meaningful outcomes that are tangible and relevant to communities

“OK, we can work together on community-based participatory research, but only if you support our kids in the pipeline. Bring them to campus for programs, teach them skills they use to be more marketable, give them academic credit.”

~ Vickie Ybarra, Toppenish, WA

Eliminating health disparities…affordable housing…education, economic development…
3. Transformation at multiple levels

“We build social capital when we’re doing this work. We don’t often talk about that.”

~ Douglas Taylor, Atlanta, GA

- Personal transformation, including self reflection and heightened political consciousness
- Institutional transformation, including changing policies and systems
- Community transformation, including community capacity building
- Transformation of science and knowledge, including how knowledge is generated, used and valued and what constitutes “evidence”
- Political transformation, including social justice
Exercise 2.1.1: Funding First, Relationships Second

www.cbprcurriculum.info
Discussion

- How can you apply the ideas discussed today when you get home?
- Where can the framework and principles of partnership and CBPR be applied in university structures, policies and procedures?

Governance bodies  New student orientation  Purchasing practices
Strategic planning processes  New faculty orientation  Hiring practices
Curriculum development  Sub-contracting procedures  Construction
Indirect cost recovery policies  Where else?....
Research ethics review
Is CBPR Right for You?

Is opportunism and self-interest driving the agenda?
Do you and your team have the necessary skills?
Would you find it challenging to participate in a co-learning and reciprocal research relationship?
Are you more comfortable with a linear approach to research?
Do you find yourself questioning validity/reliability of CBPR study designs?
Are you uncertain/skeptical about the scientific objectivity of CBPR?
Does your academic institution not value CBPR?
Are you a community member who wants an intervention or community service but who has no interest in research questions?
Do you have adequate time to invest in developing a CBPR partnership?

Examining Community-Institutional Partnerships for Prevention Research Group, 2004
Is CBPR Right for You?

Do you have a clear community of identity to work with? Have the people you’ve called a “community” really see themselves this way?

Do you believe that attending to social inequities should be part of a research agenda? You may worry that this objective clouds the research process and could reduce objectivity and integrity.

Do you question the need to address health – and therefore your research – from an ecological perspective? Taking an ecological perspective requires examining determinants of health from more than one ecological level (e.g., individual, interpersonal, community, organization or policy).

Are you committed to a participatory process, to community participation in the entire research process, and to delivering meaningful value and benefits to the community?

Examining Community-Institutional Partnerships for Prevention Research Group, 2004
Upcoming Events
Community-University Partnerships: Bringing Global Perspectives to Local Action, May 10-14, 2011, Waterloo Region, Ontario, Canada – Proposals Due September 10, 2010!
www.cuexpo2011.ca

Online Reports & Toolkits
Developing & Sustaining CBPR Partnerships

Electronic Discussion Groups
CBPR, community partners, service-learning

www.ccph.info
Community-Campus Partnerships for Health

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

Contact us by phone 206-666-3406 or email at ccph.info@gmail.com or visit us online at www.ccph.info
Workshop Evaluation

What worked well?

What could have been improved?