A PANEL ON COMMUNITY-BASED PARTICIPATORY RESEARCH (CBPR) METHODS: LESSONS FROM THE FIELD & MAKING IT WORK

CFAR Behavioral and Community Science Core Seminar
December 3, 2014
Today’s Seminar

- General Overview of CBPR
- Examples of CBPR
- Panel Discussion
- Q & A
Community-Based Participatory Research (CBPR)

• “A partnership approach to research that equitably involves, for example, community members, organizational representatives, and researchers in all aspects of the research process” (Israel et al., 2003)

• “A collaborative approach to research that equitably involves all partners in the research process and recognizes the unique strengths that each brings” (W.K. Kellogg Foundation, 2001)
What is CBPR?

• An orientation to research that alters researcher-community relationships

• CBPR is NOT:
  • ”Community-placed” research
  • Sporadic or symbolic inclusion of communities
  • Basic research

Why CBPR?

• Growing recognition that “traditional” research approaches have failed to solve complex health problems

• Community demands for research addressing locally identified needs
Community Based Participatory Research

• Active involvement of community members in community assessment and all other research activities.

• Community members work with researchers to:
  • Define the research problem
  • Set research objectives
  • Design the methodology and data collection instruments
  • Participate in data collection
  • Interpret data
  • Use results to guide program planning and evaluation
  • Acquire valuable skills

• Community members in control of types of questions asked and issues investigated
Traditional Research as Compared to Community Based Participatory Research

Traditional Research
- Community is a passive subject of study
- Research Design – done a priori by academic institution
- Needs assessment, data collection, implementation, and evaluation – academic institution’s responsibility
- Usually sustainability plan is not included

CBPR
- Involves the community being studied in the research
- Research Design – done with representatives from community & academic institution
- Needs assessment, data collection, implementation, & evaluation – everyone’s responsibility
- Sustainability is priority that begins at program’s inception
# CBPR Principles

<table>
<thead>
<tr>
<th>Key Factor</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Focus on community</td>
<td>Concept of community as a unit of social identity; identify and work with communities and strengthen social relationships through collective engagement</td>
</tr>
<tr>
<td>Community assets</td>
<td>Build on community’s skills, resources, and social relationships</td>
</tr>
<tr>
<td>Equal participation</td>
<td>In all phases</td>
</tr>
<tr>
<td>Beneficial knowledge</td>
<td>Generates knowledge mutually beneficial to all – contributing to broad understanding of factors related to health</td>
</tr>
<tr>
<td>Empowerment</td>
<td>Encourages co-learning; community members learn new skills, while academic researchers learn from community member’s knowledge, experience, and unique perspectives of local problems. By acknowledging inequalities between researchers and community members and by enabling power sharing, research helps empower the community.</td>
</tr>
<tr>
<td>Cyclical and iterative research</td>
<td>As one problem is solved, research identifies other issues requiring attention, and process begins again</td>
</tr>
<tr>
<td>Ecological perspective</td>
<td>Ecological model of health; emphasizes physical, mental, and social</td>
</tr>
<tr>
<td>Broad dissemination</td>
<td>All partners have access to research findings; format and language easy to understand and use; community has a voice in how published and contributions/ownership of information is acknowledged</td>
</tr>
</tbody>
</table>
Rationale for CBPR

1. Improves the **quality and validity** of research
2. Enhances the relevance and usefulness of research data for all partners
3. **Joins together partners with diverse** skills, knowledge, and expertise
4. **Strengthens** the research and program development capacity of partners
5. Increases possibility of **overcoming distrust** of research
6. Provides **additional funds and possible employment opportunities** for community partners
7. **Aims to improve health and well-being of communities**, both directly through examining identified needs, and indirectly through increasing control of research process

Initiating CBPR: Key Steps

1. Select the community with which to work
2. Select key community partners
3. Create joint ownership of study
4. Determine research question(s)
5. Design research study
6. Sustainability and action steps
CDC Healthy Communities Program

http://www.cdc.gov/nccdphp/dch/programs/healthycommunitiesprogram/tools/

CDC's Healthy Communities Program

Tools for Community Action

- The Community Guide
- Community Health Resources Database
- CHANGE Tool and Action Guide
- SOCIAL MEDIA TOOLKIT
- PHYSICAL ACTIVITY AND NUTRITION STRATEGIES AND MEASUREMENTS
- RESEARCH TO PRACTICE

The Community Guide

The Guide to Community Preventive Services offers science-based recommendations and findings on strategies and policies that improve health and prevent disease in communities. Find policies, programs, or services, funding, research, and education on a wide range of health topics, including obesity, physical activity, and tobacco.

Community Health Online Resource Center

On this Page

- The Community Guide
- Community Health Online Resource Center
- Community Health Assessment and Group Evaluation (CHANGE) Tool and Action Guide
- Research to Practice: Building Our Understanding
- Action Guides
- Social Media Toolkit
- Physical Activity and Nutrition Strategies and Measurements
- Making the Case for Healthy Living Strategies
CBPR Research Example: Community Child Health Network

- Multidisciplinary research network focused on reducing maternal and child disparities related to reproductive outcomes.
  - 5-site prospective study of more than 2500 families, the majority facing multiple risk conditions, often living in under-resourced communities, yet displaying many strengths and utilizing resilience resources
- First and only NICHD-supported Community-Based Participatory Research network addressing perinatal health issues.
  - Adopted and implemented principles of CBPR, building on early and ongoing work of Israel and colleagues as well as network colleagues working from community and academic perspectives

CBPR Research Example: My Sister’s Keeper

- A community-academic partnership, initially funded by UAB’s School of Public Health Community Health Scholars Grant, between members of the West End community (led by Sheila Tyson) and UAB researchers (Drs. Suzy Davies and Robin Lanzi) to engage in community-based participatory research to address maternal depression.
- CBPR methods guided MSK in creating a bridge to enable two-way transfer of knowledge and behavioral skills between West End residents and academic scientists, a sustainable connection for continued efforts to eliminate health disparities.
  - Formalized partnership between West End Community and UAB School of Public Health
  - Conducted over 175 individual surveys with mothers
  - Conducted focus groups with mothers who screened positive for depression concerning the mental health needs in the community
  - Collaboratively developed maternal mental health promotion plan as outlined below
  - Created a My Sister’s Keeper mental health resource corner in the West End Library

Lanzi, Tyson, & Davies (2013)
Tyson, Davies, & Lanzi (2013)
Davies, Tyson, & Lanzi (2012)
Panel Members

- Isabel Scarinci, PhD, MPH
  - Professor, Associate Director, Division of Preventive Medicine and Comprehensive Cancer Center
- Magdalena Szaflarski, PhD
  - Assistant Professor, Department of Sociology
- Claudia Hardy, MPA
  - Program Director, Deep South Network for Cancer Control, UAB Comprehensive Cancer Center
- Cari Oliver, CIP
  - Assistant Director, Office of the Institutional Review Board (OIRB)
Panel Discussion

• What different projects/topics have you approached with CBPR? How did you get started?
• What are some of the benefits of a CBPR approach?
• How can community members get involved? How have you involved community members?
• What are some of the challenges of CBPR?
• Have you encountered any ethical issues/dilemmas in conducting CBPR? If so, how have you handled them/resolved them?
• CBPR funding....Who funds CBPR? How have you been funded? How have you connected with funders?
• What key nuggets of advice do you have for researchers/students getting started in CBPR?
Advantages of CBPR

• Recognize multiple causes of health problems, require interventions to impact multiple levels of the SEM
• Community participation has indirect effect on health
  • Strengthens social networks of community members
  • Enhances sense of social connectedness, perceived control, individual coping capacity and health status
• Encourages shared a sense of ownership
• Facilitates development of interventions integrated into existing community structures.
• Can be very cost effective.
Additional Benefits of CBPR

- Growing recognition that “traditional” research approaches have not solved complex health disparities
- Community members are weary of being “guinea pigs,” and want research to address their locally identified needs
- Significant community involvement can lead to scientifically sound research
- Research findings can be applied directly to develop interventions specific for communities
- Potential to build greater trust and respect between researchers and communities
Challenges of Community Based Interventions

• Implementing community relevance and self-determination, central tenets of community organizing
• Representativeness of larger community
• Power differentials between public health professionals and community members
• Confusion over lines of authority and/or the roles individual members play in the collaborative process
• Complex, time-consuming process.
Additional Challenges to CBPR

- Deciding on the topic; what defines “good science”
- Differences in priorities
- When to act on findings
- Data sharing – how and to whom?
- Publication – community partners roles; authorship?
- Other ethical challenges

(Minkler, 2005)