

Community-Based Participatory Research: Valuable and Versatile

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Abstract:

Community Based Participatory Research—CBPR—is a unique research approach that involves community members alongside qualified professional and academic researchers to pinpoint issues and to actively find solutions to mutual problems (Ward 2018).

CBPR has two critical aspects: integrating local, scientific knowledge and employing community capacity building strategies. These aspects are specific to the community problem at hand and are tested by CBPR participating researchers. Communities are encouraged to create and to implement problem-solving tools without the help of experts. Both aspects pave the way for hands-on involvement from community members; from formulating research questions to developing and testing interventions (Windsor et al, 2014).

CBPR research is vital because academic and community partners learn from each other, which fosters the key research principle of community capacity building research (Israel et al. 2003). On one end, community members teach researchers about local health disparities, issues, and community priorities. These can range from HIV-prevention in New Jersey, to improving air quality in Southwest Baltimore, to creating pathways to trauma stabilization in Pakistan. CBPR research has proven to be successful in multiple regions and fields.

Conversely, researchers take this information and use research methods to not only create tools to solve local problems, but to also teach community members how to use these tools (Wallerstein & Duran 2006). The goal is to find pertinent solutions to current problems, and the best way to test solutions is to gain feedback from those who are directly affected.

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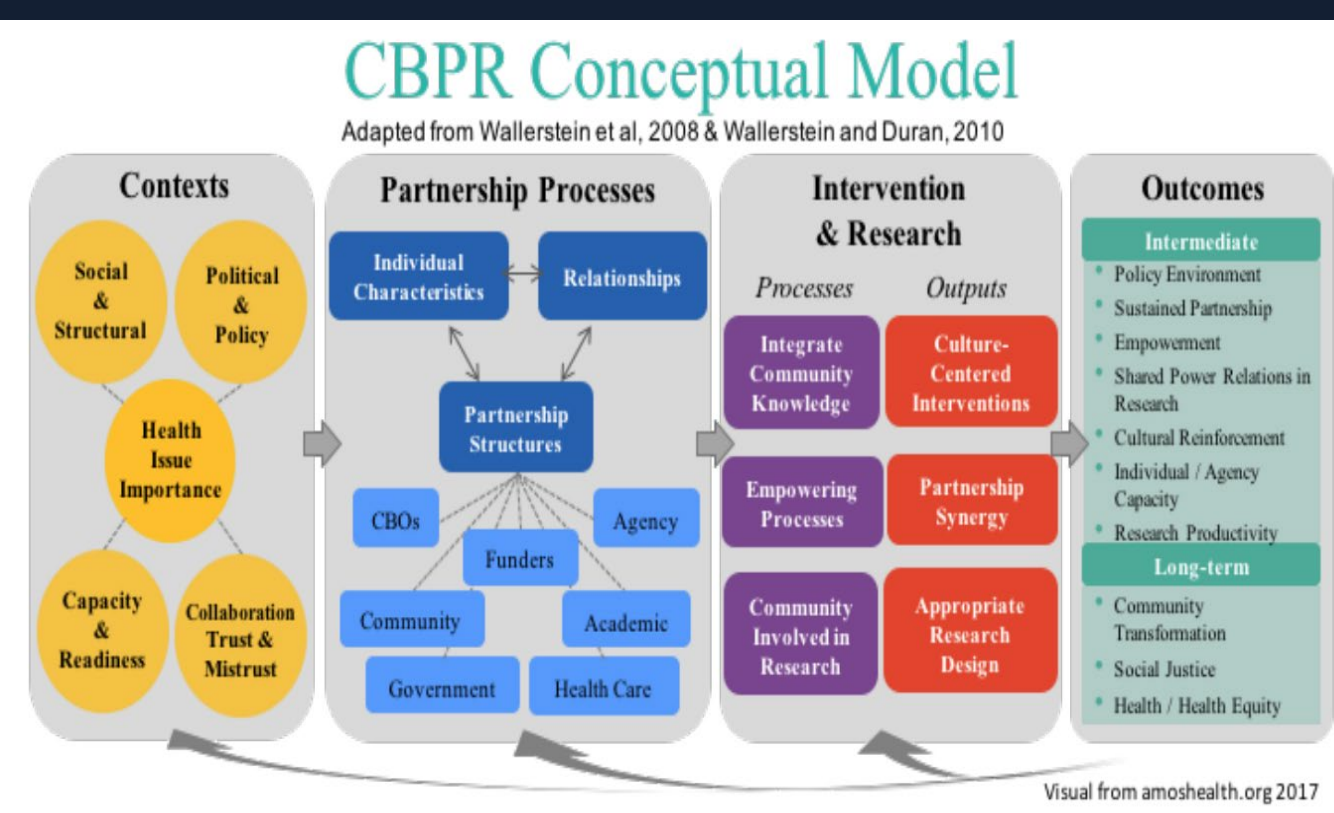
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INTRODUCTION

Community Based Participatory Research—CBPR—is a unique research approach that involves community members alongside qualified professional and academic researchers to pinpoint issues and to actively find solutions to mutual problems (Ward 2018). A collaborative and symmetrical relationship between community members and professionals ensures the research conducted is accurately representative of the priorities and needs of the community members themselves (Minkler & Wallerstein, 2003). CBPR’s two critical aspects of integrating local and scientific knowledge and employing community capacity building strategies are what paves the way for community members to be involved hands-on from formulating research questions to developing and testing interventions (Windsor et al, 2014).

CBPR research is vital because academic and community partners learn from each other which fosters a **key research principle**: community capacity building research (Israel et al. 2003). On one end, community members teach researchers about local health disparities, issues, and priorities; and, on the other end, researchers take this information and use research methods to create solutions which they teach to community members (Wallerstein & Duran 2006). This exchange of expertise benefits research professionals and the community, and aids collaborative efforts by giving community members responsibilities such as recruiting participants, collecting data, conducting interviews, supervising staff, analyzing data, and writing and presenting research results (Pinto 2009). The goal is to find pertinent solutions to current problems, and the best way to test solutions is to gain feedback from those who are directly affected.



AIM

The following are the three aims of our poster presentation:

Aim 1 to introduce and explain the concept of Community-Based Participatory Research (CBPR).

Aim 2 to disseminate our literature review findings on CBPR examples to raise awareness on different types of CBPR.

Aim 3 to provoke discussion around CBPR and to highlight implications of CBPR in action with the *Community Wise Project* being one such example.

CBPR AROUND THE WORLD

Communities Engaged and Advocating for a Smoke-Free Environment (CEASE)

Location: Southwest Baltimore

Goal: To share the work of the participants with community leaders and policy makers, and to present them for public exhibition at City Hall.

Focus: To discover ways to lower the excessive smoking rates specifically affecting youth. CEASE provided the youth with cameras and were instructed to take unguided photos with the project theme titled, “Youth Perspectives on the Tobacco Environment and Community Health”.

Discussions were led with the following guiding questions through the acronym **SHOWED**: 1) What do you **See** in this photograph? 2) What is really **Happening** in the photograph? 3) How does this relate to **Our** lives? 4) **Why** do these issues exist? 5) How can we become **Empowered** by our social understanding? 6) What can we **Do** to address these issues? There was an additional question set with the acronym **PHOTO**: 1) Describe your **Photo**? 2) What is **Happening** in your picture? 3) Why did you take a picture **Of** this? 4) What does this picture **Tell** us about life in your community? 5) How does this picture provide **Opportunities** to improve life in your community?



Developing Culturally Relevant Intervention Plan For Psychological Trauma: An Application of Community Based Participatory Research Approach For Mental Health

Location: Peshawar, Pakistan

Goal: To develop a culturally sensitive intervention plan for trauma stabilization with community collaboration.

Focus: To develop an intervention for psychological trauma in Peshawar, Pakistan in response to Army Public School attack on Dec. 16, 2014.

Four Common Themes:

- 1) Sense of insecurity and fear;
- 2) Need to mourn and grieve according to cultural/religious norms;
- 3) Need for a separate place away from a hospital setting—to access psychosocial care;
- 4) Reconnection with everyday life.

Intervention Goals:

- 1) Restoring sense of safety through the provision of a safe space to express distress;
- 2) Facilitating grieving and mourning in communal meetings according to cultural norms;
- 3) Provision of psychosocial support by establishing a center at a physically convenient place;
- 4) Facilitating grief work and resumption of sense of control by becoming a part of the decision-making process such as consultation for the school reopening date or the building’s reconstruction.

3-Phase Participatory Process Trauma Intervention Plan:

- 1) Reaching Out and Engagement;
- 2) Mourning and Grief Work;
- 3) Reconnection, the School Reopens.

Bringing Healthy Retail to Urban “Food Swamps”: a Case Study of CBPR-Informed Policy and Neighborhood Change in San Francisco

Location: Tenderloin, San Francisco, California

Goal: To enact and influence policy change in Tenderloin.

Focus: Food swamps—areas within a community where healthy food options are unavailable—are evident, therefore the Tenderloin Healthy Corner Store Coalition worked with health departments, along with academic partners and the community to target this issue; this can also be described as, “food desert”.

Research Components: The research included interviews of 17 corner store owners or managers, policy makers and other stakeholders in the area. Surveys of the community regarding the food choices available to them were taken, proving the majority of residents find issues with the products being sold.

COMMUNITY WISE

Location: Essex Country in Newark, NJ.

Goal: To foster community involvement in developing a substance abuse treatment and HIV-prevention program, which supports local, low-income African Americans to reduce substance use frequency and lower recidivism rates.

Focus: Use this manualized, multi-level, community-based, intervention program as a tool to reduce substance use frequency among individuals with histories of incarceration and substance use disorders.

The project developed into the *Community Wise Optimization Project*, which surveyed and sorted 528 randomly assigned men with histories of substance use disorders and incarceration into 16 experimental conditions.

Research Components: Community Preparation, Community Brainstorming, Community Sorting and Rating, Multivariate Statistical Analysis, and Community Interpretation.

3-Level Project Component:

- (1) Critical Dialogue
- (2) Quality-of-Life-Wheel
- (3) Capacity Building Projects

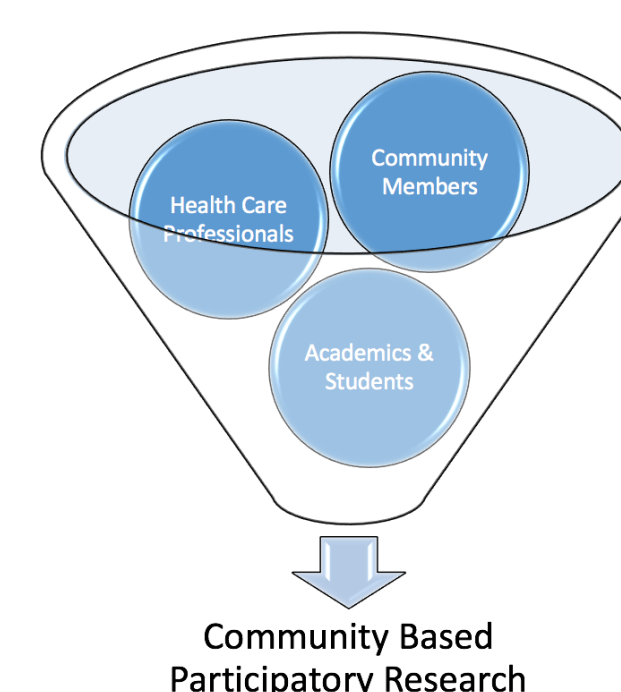


Image adapted from East Coast Community Healthcare

IMPLICATIONS

CBPR is beneficial because it allows for the collaboration between community members and professional researchers in studies and interventions. Yet, with most successful techniques come setbacks. The **first setback** is while most CBPR studies give way for community members to assist, there may be limits to the degree of their involvement in the research. The **second setback** is, in many cases, it takes empathy for researchers to fully understand a community member’s problem, but this immersion might be difficult if researchers are emotionally detached from the problem. Lastly, the **third setback** is data retrieved from surveys can be incredibly beneficial, but if subjects don’t answer questions honestly and thoroughly, the data might be skewed.

CONCLUSION

Community Based Participatory Research (CBPR) has proven to be a critical approach to gathering data and providing collaboration between researchers and community members in order to identify solutions to current issues. It is used to gain a mutual understanding of solutions to local issues and to help tend to community member’s needs. In addition, gaining feedback from community members allows researchers to streamline and to formulate questions better, and thus contribute to better solutions and inventions to problems. Intervention methods applied to issues such as substance misuse, food stamps, psychological trauma, and public health in impoverished neighborhoods, display CBPR is a critical approach to understanding these topics. CBPR is a collaborative research application that is essential to the field of Social Science.

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