

COMMUNITY-BASED PARTICIPATORY RESEARCH

BEYOND COLLABORATION

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PURPOSE

The purpose of this paper is to discuss examples of health promotion interventions that apply Community-Based Participatory Research (CBPR).

We argue that some intervention projects that intend to promote CBPR do not foster full participation of the communities involved, but only reach to the level of collaboration between researchers and communities.

METHODOLOGY

1. Definition of themes of interest: projects that had CBPR as principles
2. Inclusion criteria: qualitative and quantitative studies, mixed methods studies in English, French, Portuguese, or Spanish languages.
3. Search through electronic data base: PubMed, SciELO, Google Scholar.

INTERVENTION PROGRAMS APPLYING CBPR

❖The Kahnawake Schools Diabetes Prevention Project (KSDPP)

Its main commitment is to prevent type 2 diabetes in the Mohawk community near Montreal, Canada (KSDPP, 2015).

❖The Four Corners American Indian Circle of Services Collaborative (4CC)

Its main commitment is to create an integrated medical/mental-health/cultural systems to serve the needs of American Indians with HIV/AIDS on the Navajo Nation (Iralu et al., 2010).

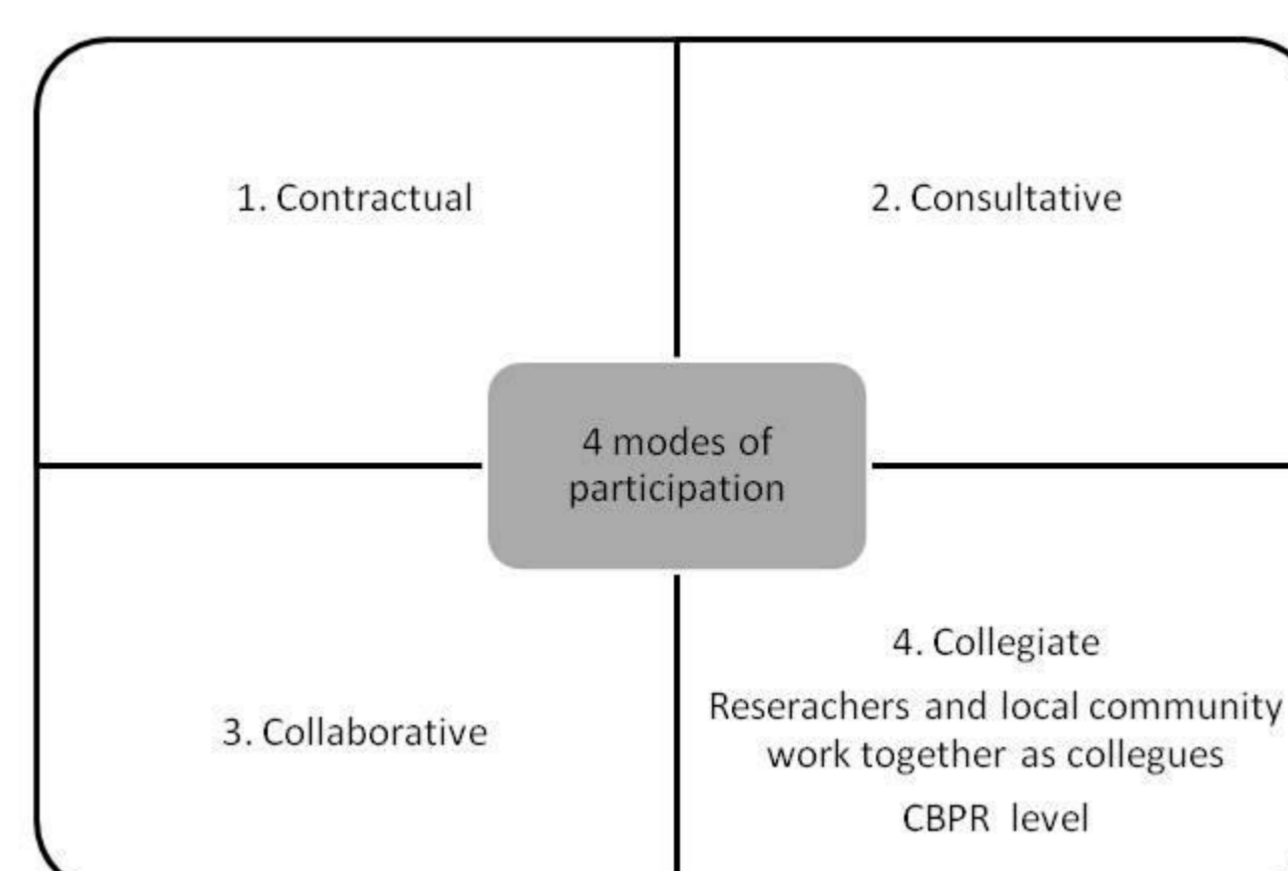
❖The Caruso Project

Its purpose was to investigate the environmental sources and pathways of human exposure to mercury, as well as its early effects on the health of the riverside populations of the Tapajós region (Fillion et al., 2008).

❖The American Cutaneous Leishmaniasis Project (ACL)

Its purpose was to identify the images, ideas, conceptions, attitudes, and conditions related to practices of prevention and care of American Cutaneous Leishmaniasis (Santos et al., 2014).

MODES OF PARTICIPATION



Source: Cornwall & Jewkes, 1995

Principles of CBPR (Hacker, 2013)	
"CBPR acknowledges community as a unity of identity".	Group of people who have something in common, whether social or geographic. i.e.: health and school departments, immigrants, churches, indigenous.
"CBPR builds on strengths and resources within the community".	Lay knowledge of the community has the same value as the academic knowledge.
"CBPR facilitates a collaborative, equitable partnership in all phases of research, involving an empowering and power-sharing process that attends to social inequalities".	Partnership between academics and community members are built with trust, respect, transparency, and communication.
"CBPR fosters colearning and capacity building among all partners".	Researchers learn about the realities of the community and community members learn about critical thinking and evaluation.
"CBPR integrates and achieves a balance between knowledge generation and intervention for the mutual benefit of all partners".	The balance between the research needs and community action is difficult to handle. It should be discussed in the beginning of the project.
"CBPR focuses on the local relevance of public health problems and on ecological perspectives that attend to the multiple determinant".	The issues explored are relevant to the communities involved.
"CBPR involves systems using a cyclical and iterative process".	Cyclical process with several phases. i.e.: question development, data collection, and analysis. New questions may emerge.
"CBPR disseminates results to all partners and involves them in the wider dissemination of results".	Diffusion of outcomes has to benefit all parties meaning different things to academics and to communities, i.e.: peer-reviewed journal or community forum.
"CBPR involves a long-term process and commitment to sustainability".	Going beyond the specific project to other projects appropriated to the partners.

3 types of relationships that restrain collaboration (Wallerstein, 1999)

"Hello-goodbye"	"Two planets"	"Stand-off"
Reserchers and communities meet, dance together, then wander off	Neighter group has much contact with each other	There is little agreement and resentment between communities and reserchers

DISCUSSION

❖CBPR interventions are intensive and demanding of both researchers and communities. There are several barriers to the implementation and development of the projects or programs, some of them are likely necessary, but the implementation team should build projects with minimal intensity difficulties (Glasgow & Emmons, 2007).

❖One of the ways of mitigating these barriers is through equally empowering all participants of the projects.

❖Freire's empowerment education theory is paramount to the success of a CBPR intervention.

❖The methodology offered by Freire has three stages which are the basis of an empowering education program: listening, participatory dialogue, and action (Wallerstein & Bernstein, 1988).

❖There is a need for more formal training in CBPR who needs to be more accessible to community members and researchers (O'Toole, et al., 2003).

❖Only with the empowerment and equal participation of the local community, researchers, and stakeholders, CBPR interventions may be indeed called participatory.

CONCLUSION

❖ Some of these studies addressing CBPR are not well implemented.

❖ In some CBPR projects and programs listed, the research question and the issues that need to be solved by the communities, did not come from the community but rather from participating researchers.

❖ More studies addressing the "step-by-step" of the implementation processes of projects are needed.

❖ More information about project successes and failures has an equal importance to the knowledge construction about CBPR.

❖ Researchers should pay more attention to how to use the CBPR approach and how to address CBPR terminology on their publications.

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