Frequently Asked Questions about Community-Engaged Research

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Sources
This document makes extensive use of materials from the following sources:


**WHY COMMUNITY-ENGAGED RESEARCH?**
There is a growing recognition that traditional research approaches, while appropriate for many research questions, have failed to solve complex health disparities. Health problems exist within the context of people’s lives, and the explanations will likely be found in the messy complexity of real life. A community-engaged research approach can enable researchers to conduct research and produce results which may be directly translated to improve human health.

**WHAT IS COMMUNITY-ENGAGED RESEARCH?**
Community-engaged research is a framework or approach for conducting research, not a methodology in and of itself. It is characterized by the principles that guide the research (see Principles of Community-Engaged Research) and the relationships between the communities and academic researchers. Community-engaged research requires partnership development, cooperation and negotiation, and commitment to addressing local health issues.

Keep in mind that community engagement exists on a continuum, with much variation in the strength and intensity of the community-academic collaboration. This varies by research objective, project, participants, community history and local politics, among others. Each partnership will develop its own way of working together. At the core of all community-engaged research, however, is the understanding that the community will be involved in a meaningful way.
CBPR

One type of community-engaged research is Community-based Participatory Research, or CBPR. A widely used definition from the WK Kellogg Foundation defines CBPR as 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 to improve health outcomes and eliminate health disparities.

The CBPR ideal of full partnership and equal control, while powerful, is difficult to achieve and often requires long-term relationships.

The continuum of research

Below is a comparison table of Traditional, Community-Engaged and Community-based Participatory Research. The table is for comparison purposes only; most projects will involve a variety of techniques that blur the boundaries between “types” of research.

<table>
<thead>
<tr>
<th></th>
<th>Traditional</th>
<th>Community-Engaged</th>
<th>CBPR</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Research Objective</strong></td>
<td>Based on epidemiologic data &amp; funding priorities</td>
<td>Community input in identifying locally relevant issues</td>
<td>Full participation of community in identifying issues of greatest importance</td>
</tr>
<tr>
<td><strong>Study Design</strong></td>
<td>Design based entirely on scientific rigor and feasibility</td>
<td>Researchers work with community to ensure study design is culturally acceptable</td>
<td>Community intimately involved with study design</td>
</tr>
<tr>
<td><strong>Recruitment &amp; Retention</strong></td>
<td>Based on scientific issues &amp; “best guesses” regarding how to best reach community members</td>
<td>Researchers consult with community representatives on recruitment &amp; retention strategies</td>
<td>Community representatives provide guidance on recruitment &amp; retention strategies and aid in recruitment</td>
</tr>
<tr>
<td><strong>Instrument Design</strong></td>
<td>Instruments adopted/adapted from other studies. Tested chiefly w/psychometric analytic methods.</td>
<td>Instruments adopted from other studies &amp; tested/adapted to fit local populations</td>
<td>Instruments developed with community input and tested in similar populations</td>
</tr>
<tr>
<td><strong>Data Collection</strong></td>
<td>Conducted by academic researchers or individuals w/no connection to the community</td>
<td>Community members involved in some aspects of data collection</td>
<td>Conducted by members of the community, to the extent possible based on available skill sets. Focus on capacity building.</td>
</tr>
<tr>
<td><strong>Analysis &amp; Interpretation</strong></td>
<td>Academic researchers own the data, conduct analysis &amp; interpret the findings</td>
<td>Academic researchers share results of analysis with community members for comments &amp; interpretation</td>
<td>Data is shared; community members &amp; academic researchers work together to interpret results</td>
</tr>
<tr>
<td><strong>Dissemination</strong></td>
<td>Results published in peer-reviewed academic</td>
<td>Results disseminated in community venues as well</td>
<td>Community members assist academic researchers to</td>
</tr>
</tbody>
</table>

The table for comparison purposes only; most projects will involve a variety of techniques that blur the boundaries between “types” of research.
journals as peer-reviewed journals identify appropriate venues to disseminate results (public mtgs, radio, etc.) in a timely manner & community members involved in dissemination. Results also published in peer-reviewed journals.

WHAT IS A COMMUNITY?
According to a study conducted by MacQueen et al., community is:

A group of people with diverse characteristics who are linked by social ties, share common perspectives, and engage in joint action in geographical locations or settings.

Some common elements of community are:
- Locus (a sense of place) – city, village, neighborhood, workplace, etc.
- Sharing (sharing common interests and perspectives)
- Joint action (joint actions that bring people together)
- Social ties (family, friends)
- Diversity

It is important to remember, when conducting community-engaged research, that communities are not homogenous and seldom speak with one voice.

Also keep in mind that the risks (and benefits) of the research often affect not only the individual research participants, but also the entire community from which they are drawn.

BARRIERS TO COMMUNITY-ENGAGED RESEARCH

Community Barriers
- History of leaving community concerns and interests out of the research agenda, leading to caution on the part of communities.
  - Topics selected without determining if they addressed perceived needs of the community
  - Studies conducted “on” communities; only community involvement was community members as research subjects
  - No mechanisms for sharing research findings or continuing successful programs
  - Communities felt they seldom received benefits from the research
- Time: research often an additional responsibility for already overworked individuals in organizations with their own mission and mandates to fulfill.
- Unclear distinctions between research, advocacy and administrative change can lead to unrealistic expectations
Academic Barriers

- Time: building partnerships, negotiating, planning and communicating are all time consuming activities over and above regular research responsibilities
- The community-engaged research approach may not fit neatly within the academic status quo, leading to funding and promotion challenges
- Expectations for dissemination of results:
  - Community members often expect to hear about results soon after the research is completed; don’t want to wait the months or years it takes to appear in academic journals
  - Some academic journals (e.g. New England Journal of Medicine, JAMA) will not publish articles whose findings have been previously disseminated via newspaper, TV, etc.
  - Given the above, how to give results to the community in a timely manner without compromising the researcher’s ability to present findings in academic venues?

BENEFITS OF COMMUNITY-ENGAGED RESEARCH

Community-engaged research takes place under real world conditions, which increases the applicability of its findings to practical applications that improve human health.

Meaningful community involvement can also improve the research process itself, and therefore the ultimate findings:

- Develop research questions concerning health issues of concern to the community
- Help in recruiting participants – people more likely to support the research and researchers when they understand the purpose of the research and how the results may affect them
- Identify risk associated with participation and help develop appropriate ways to protect participants
- Improves study and instrument design through community input to produce user friendly, culturally sensitive, accurate and valid practices and measures
- Involvement in analysis and interpretation can provide important explanations of results, and local interpretation may provide ideas the researchers had not considered
- Opportunity to build greater trust and respect between academic researchers and communities. This may lead to future research collaborations.
- Research may be more likely to lead to improvements in community health