

# ENGAGE FOR EQUITY:

A LONG-TERM STUDY OF COMMUNITY-BASED PARTICIPATORY RESEARCH  
AND COMMUNITY-ENGAGED RESEARCH PRACTICES AND OUTCOMES  
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Nina Wallerstein, John G. Oetzel, Shannon Sanchez-Youngman, Blake Boursaw, Elizabeth Dickson, Sarah Kastelic, Paul Koegel, Julie E. Lucero, Maya Magarati, Kasim Ortiz, Myra Parker, Juan Peña, Alan Richmond, and Bonnie Duran.

# ABSTRACT

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- CBPR and CEnR have been proven Research Approaches.
- Recent literature shows outcomes in various fields.
- University of New Mexico Center for Participatory Research has targeted investigations to identify partnering practices.
- This article presents the research design of a current grant, Engage for Equity.
- Recommends partnerships to engage in collective reflexive practice.

# COMMUNITY-BASED PARTICIPATORY RESEARCH AND ENGAGED RESEARCH: ADVANCING HEALTH EQUITY OUTCOMES THROUGH PARTNERING PRACTICES:

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- CBPR and CEnR are valued research approaches in multiple research disciplines.
- CBPR aims to incorporate community partners throughout research procedures.
- CBPR is dedicated to colearning and health equality initiatives with the aim of balancing the power.
- Draws inspiration from Paulo Freire's praxis-based empowerment education and legacy of activist participatory research.
- Changes in support networks, empowerment, long-lasting partnerships, and health status are all outcomes of CBPR.

# COMMUNITY-BASED PARTICIPATORY RESEARCH AND ENGAGED RESEARCH: ADVANCING HEALTH EQUITY OUTCOMES THROUGH PARTNERING PRACTICES: (CONTD...)

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- Effects have been well-documented and are considered crucial to partnerships success.
- UNM-CPR has engaged in a targeted investigation to identify which partnering practices contribute to research, community, and health equity outcomes.
- Funded via 3 NIH phases and aims to establish equitable partnerships.
- The third stage of the E2 initiative, is described in the article along with its background, goals, underlying theory, instruments, intervention tools, and resources.
- There are lessons learned and suggestions made on the use and results of communal reflection

# BACKGROUND TO E2 (ENGAGE FOR EQUITY):

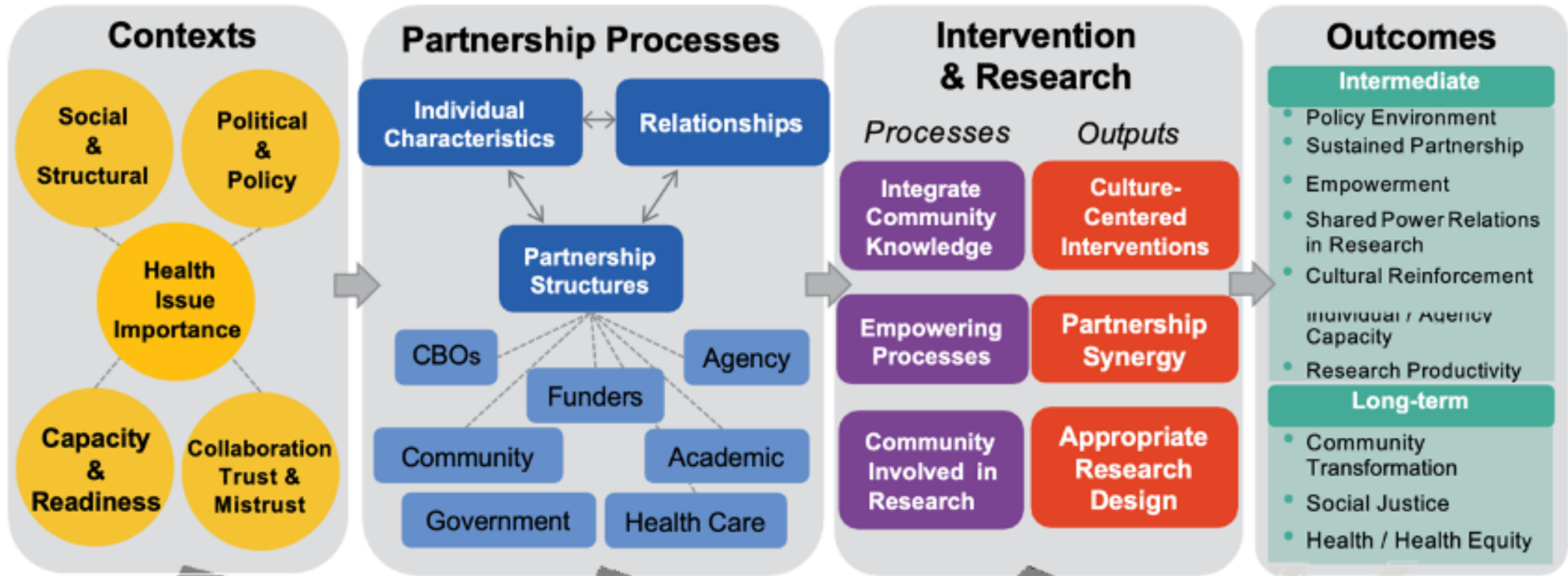
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- In 2006, UNM-CPR received pilot NIMHD funding to partner with UW-IWRI for a CBPR study.
- A CBPR conceptual model with four domains was produced, including contexts, partnering processes, intervention, and research designs, and health outcomes.
- The research by RIH, featured surveys of federally supported partnerships to examine connections between practices and results, validate scale psychometrics, and pinpoint paths to outcomes.
- Seven case studies advanced understanding of environments, power dynamics, and initiatives for social and racial fairness.
- The UNM-CPR and UW partnership was expanded to include other organizations in Stage 3 (2015 - 2020), and E2 also carried out a second set of partnership surveys and an intervention trial.
- Intervention drew on culture-centeredness, cognitive/epistemic justice theory, and Indigenous theories of multiple ways of knowing to prioritize community meaning-making, knowledge democracy, and practice-based knowledge.
- The E2 team aims to provide information that can be applied to enhance CBPR/CEnR and participatory action research science, convert data into community-academic activism for equity.

# BACKGROUND TO E2 (ENGAGE FOR EQUITY):

Adapted from Wallerstein et al, 2008 & Wallerstein et al, 2018:

<https://cpr.unm.edu/research-projects/cbpr-project/cbpr-model.html>



Visual from Amos Health 2017

# BACKGROUND TO E2 (ENGAGE FOR EQUITY):

Contexts	Partnership Processes		Intervention & Research	Outcomes
<ul style="list-style-type: none"> <li>• Social-Structural: Social-Economic Status, Place, History, Environment, Community Safety, Institutional Racism, Culture, Role of Education and Research Institutions</li> <li>• Political &amp; Policy: National /Local Governance/ Stewardship Approvals of Research; Policy &amp; Funding Trends</li> <li>• Health Issue: Perceived Severity by Partners</li> <li>• Collaboration: Historic Trust/Mistrust between Partners</li> <li>• Capacity: Community History of Organizing / Academic Capacity/ Partnership Capacity</li> </ul>	<p><b>Partnership Structures:</b></p> <ul style="list-style-type: none"> <li>• Diversity: Who is involved</li> <li>• Complexity</li> <li>• Formal Agreements</li> <li>• Control of Resources</li> <li>• % Dollars to Community</li> <li>• CBPR Principles</li> <li>• Partnership Values</li> <li>• Bridging Social Capital</li> <li>• Time in Partnership</li> </ul>	<p><b>Relationships:</b></p> <ul style="list-style-type: none"> <li>• Safety / Respect / Trust</li> <li>• Influence / Voice</li> <li>• Flexibility</li> <li>• Dialogue and <u>Listening</u> / Mutual Learning</li> <li>• Conflict Management</li> <li>• Leadership</li> <li>• Self &amp; Collective Reflection/ Reflexivity</li> </ul> <p><b>Individual Characteristics:</b></p> <ul style="list-style-type: none"> <li>• Motivation to Participate</li> <li>• Cultural Identities/Humility</li> <li>• Personal Beliefs/Values</li> <li>• Spirituality</li> <li>• Reputation of P.I.</li> </ul>	<ul style="list-style-type: none"> <li>• Processes that honor community and cultural knowledge &amp; voice, fit local settings, and use both academic &amp; community language <u>lead</u> to Culture-Centered Interventions</li> <li>• Empowering Co-Learning Processes lead to Partnership Synergy</li> <li>• Community Members Involved in Research Activities leads to Research/Evaluation Design that Reflects Community Priorities</li> <li>• Bidirectional Translation, Implementation, Dissemination</li> </ul>	<p><b>Intermediate System &amp; Capacity Outcomes</b></p> <ul style="list-style-type: none"> <li>• Policy Environment: University &amp; Community Changes</li> <li>• Sustainable Partnerships and Projects</li> <li>• Empowerment – Multi-Level</li> <li>• Shared Power Relations in Research / Knowledge Democracy</li> <li>• Cultural Reinforcement / Revitalization</li> <li>• Growth in Individual Partner &amp; Agency Capacities</li> <li>• Research Productivity: Research Outcomes, Papers, Grant Applications &amp; Awards</li> </ul> <p><b>Long-Term Outcomes: Social Justice</b></p> <ul style="list-style-type: none"> <li>• Community / Social Transformation: Policies &amp; Conditions</li> <li>• Improved Health / Health Equity</li> </ul>
	<p><b>Commitment to Collective Empowerment</b></p>	<p>resource management</p> <ul style="list-style-type: none"> <li>• Participatory Decision-Making</li> <li>• Task Roles Recognized</li> </ul>		

# METHOD

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E2 has two phases:

1. Refining surveys to deepen understanding of partnering pathways toward outcomes.
2. Implementing a collective-reflection intervention to strengthen partnerships.



# PHASE 1 SURVEYS

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- 2015 saw the identification of 384 CBPR/CEnR projects with federal funding from four online repositories using the RIH sampling approach.
- The CES survey was altered with new scales and adjustments to old ones, while the KIS survey was improved with questions on community stewardship.
- 53% of PIs responded to the KIS survey and 69% of participants responded to the CES survey.
- Among the four model domains, the CES survey generated seven higher order constructs, including the collective empowerment construct, which has four scales: collective reflection, evidence of community fit, shared CBPR ideals, and influence to impact change.

# PHASE 1 SURVEYS

**Table 1.** Higher Order Constructs.

Higher order constructs	CBPR model domain	Individual scales
Capacity	Context	Community history, bridging social capital, and partnership capacity
Collective empowerment	Partnership processes	Collective reflection/reflexivity, community fit, shared CBPR principles, influence/agency
Relationships	Partnership processes	Leadership, conflict resolution, participation, trust
Community involvement in research	Intervention and research design	Background/design, interpretation and dissemination, community action
Synergy	Intervention and research design	Synergy scale
Systems and capacity changes	Intermediate outcomes	Personal and agency capacity, shared power relations, and sustainability
Future outcomes	Outcomes	Policy, research, health, and social change

Note. CBPR = community-based participatory research.

## PHASE 2 SURVEYS

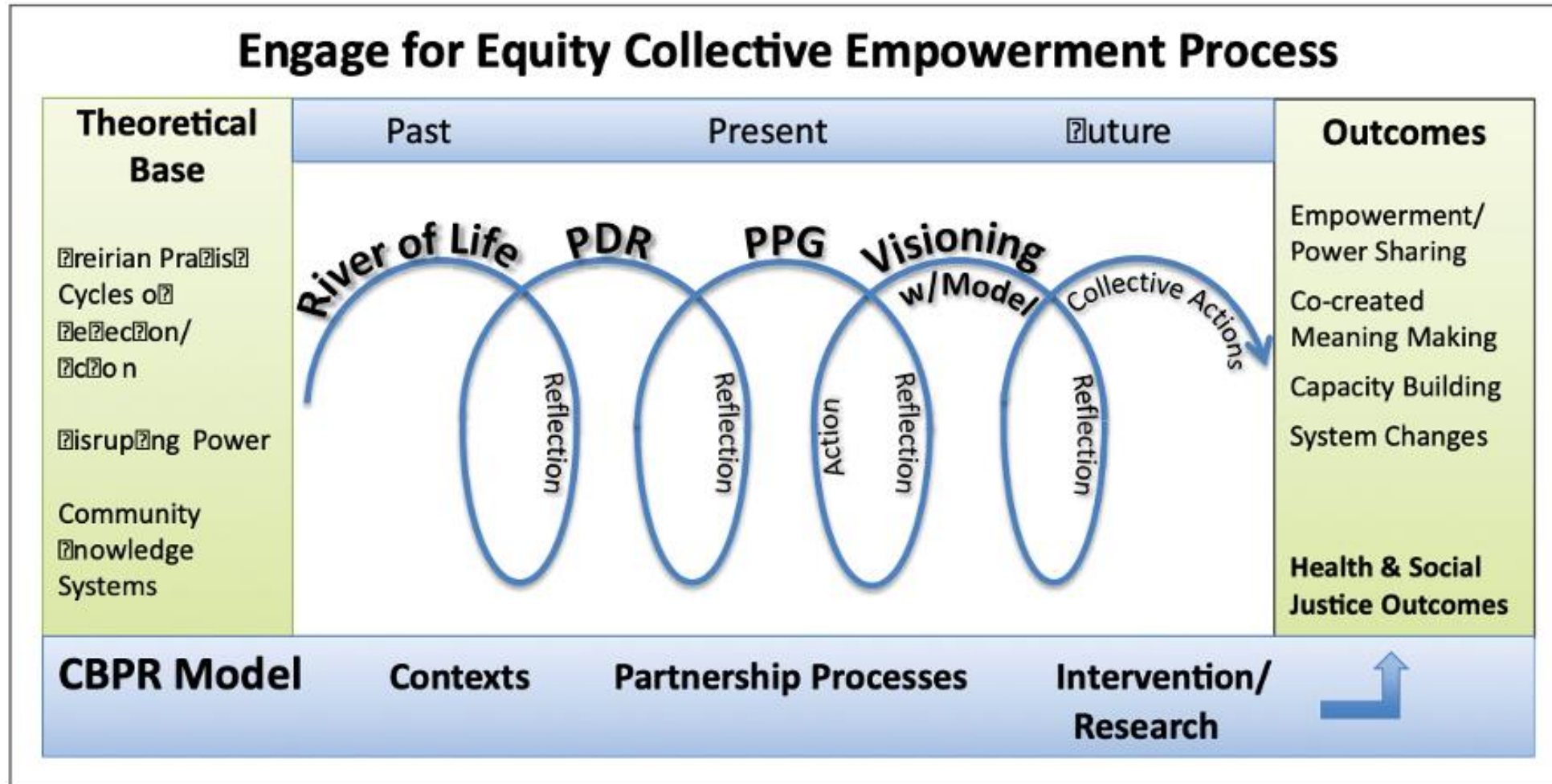
- The second phase of E2 evaluated procedures for active reflection and action.
- A randomized clinical trial was conducted to compare online access to tools for group reflection with in-person training.
- 30 partnerships were given web-based access, whereas 39 partnerships were randomly assigned to the workshop intervention.
- 25 of the 39 partnerships that were invited to the workshops showed up.
- Four tools—River of Life, CBPR Model as Visioning Tool, Partnership Data Reports (PDR), and Promising Practices Guide—have been modified or created to support group reflection and action processes (PPG).
- Using the website, the resources and group reflection/action procedures were made available to all partnerships.
- Partnership teams were led through each tool during the training with report-backs to the entire group

## PHASE 2 SURVEYS (CONTD...)

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- The qualitative techniques included the construction of a figurative "River of Life" and the use of the CBPR model as a planning aid.
- Each partnership received statistical means of their current-day data from each CES scale and several KIS constructs from the quantitative PDR tool.
- The PPG provided benchmarks for promising partnering practices at the national level that were linked to survey results compiled from 379 federally supported partnerships.
- The participants were reminded that the website contained tools and information they could utilize to support their partnerships.

# PHASE 2 SURVEYS (CONTD...)



**Figure 2.** Theory of change: Collective empowerment process.

Note. PDR = partnership data reports; PPG = promising practices guide; CBPR = community-based participatory research.

# PHASE 2 SURVEYS (CONTD...)

Characteristics of partnerships and projects	Web (n = 30)		Workshop (n = 39)	
	n	%	n	%
<b>Who initiated the project</b>				
Community partners	2	7	1	3
Academic partners	12	40	17	44
Both	16	53	20	51
Other	0	0	1	3
<b>Types of community partners (not mutually exclusive)</b>				
Patients or caregivers	14	47	17	44
Health care (staff, providers, clinics, systems)	24	80	27	69
Community (individuals, associations, organizations)	26	87	35	90
Government (local, state, federal, tribal agencies)	16	53	25	64
Policy makers	12	40	9	23
Nationally based membership associations	4	13	6	15
Other community partners	10	33	11	28
<b>Primary study type</b>				
Pilot	2	7	2	5
Descriptive	3	10	3	8
Intervention	20	67	19	49
Policy	0	0	0	0
Dissemination and implementation	3	10	8	21
Some other type	2	7	7	18
<b>Race, ethnicity, or population group (projects chose all that apply)</b>				
American Indian/Alaska Native	7	23	18	46
Asian	6	20	2	5
Black or African American	17	57	17	44
Native Hawaiian or Other Pacific Islander	3	10	2	5
White	17	57	14	36
Hispanic or Latino	16	53	12	31
LGBTQ	3	10	1	3
Low socioeconomic status	19	63	22	56
Persons with disabilities	4	13	2	5
Immigrants	5	17	2	5
Additional population group(s)	15	50	16	41
None of the above indicated	1	3	3	8

# WEB-BASED INTERVENTION AND EVALUATION

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- A web-based intervention was developed to see if a straightforward strategy might provide results and enable wider diffusion than workshops.
- The website includes instructional and storytelling films, downloadable facilitation guides, examples, and information about the paradigm and step-by-step procedures for using the four instruments.
- To enable partners to take the online CES and receive a customised PDR and compiled data for analysis, a new web app is currently undergoing beta testing.
- Using surveys, interviews, and web analytics, the effects of the two intervention delivery systems on changes in partnering behaviors and outcomes are being assessed.

## WEB-BASED INTERVENTION AND EVALUATION (CONTD...)

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- In order to increase challenges to power inequities and enhance health equality results, the E2 intervention seeks to find effective collective-reflection tools.
- The E2 national team constantly considers lessons learned and difficulties faced while utilizing their resources for their own think tank collaboration.
- Through the analysis of team interviews, the significance of facilitation, positionality, and the CBPR model as a general implementation framework is investigated.
- Following a workshop where inclusiveness principles were questioned, the practice of using gender-specific pronouns was changed.
- During a formal River of Life exercise, the team faced an internal conflict from 2009 again and talked about restoring trust by acknowledging the violation, issuing apologies, and changing behaviors.



# IMPORTANCE OF COLLECTIVE REFLECTION:

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- Encourage collaborative reflection/action cycles in the spirit of Freire.
- Contribute to the theory of change founded on collective empowerment and the CBPR conceptual model.
- After determining areas of strength or worry, additional tools and training may be required.
- For CEnR projects, theoretical underpinning facilitates collective reflection.

# MIXED METHOD REFLECTION TOOLS

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- Reflection on situations and practices is made possible by River of Life and Visioning with the CBPR Model.
- PDR and PPG offer quantitative data and analysis in comparison to international standards.
- Partnerships can strengthen their capacity to achieve desired objectives by looking at tools and survey instruments on <http://engageforequity.org>.

# STRONGER THEORIZING ABOUT CBPR

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- Research has been done on power dynamics in partnerships and participatory action research projects, including how academic privilege or external financing hierarchies may influence power-sharing goals.
- There are hierarchies within universities, and initiatives are made to support safe spaces for self-reflection and equal team contributions, especially for students from marginalized groups.
- Additionally, power relations have been seen in public settings like workshops, surveys, and multisite case study analyses.
- Similar to theories of synergy and trust, collective empowerment is recognized as a middle-range theory of change that includes group reflection, impact, shared ideals, and community fit.
- Further research is required to better understand the methods for upending power structures, achieving power sharing through community members' perceptions of their impact and fit with the community, and sustaining cycles of reflection and action.
- It is advised that more research be done to clarify the conceptual mechanisms of CBPR and CEnR for better health and health equity.

# ADVANTAGES FOUND IN THIS STUDY

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- Community engagement and participation leads to improved health outcomes and health equity.
- Partnership models that promote shared power and decision-making are effective in promoting collective empowerment and community ownership.
- The use of online tools and resources can enhance community-based participatory research and make it more accessible.
- Critical reflection and reflexivity are important components of successful partnerships.
- Long-term partnerships can lead to more sustainable and impactful interventions.
- Community-based participatory research can contribute to the advancement of the science of CBPR and inform policy and practice.

# LIMITATIONS

- Self-report measures
- Lack of true control group
- Small sample size
- Limited focus
- Limited diversity

# MAJOR FINDINGS

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- The E2 process, which is a critical reflection tool for partnership assessment and improvement, was found to be feasible and acceptable in community-based participatory research (CBPR) partnerships.
- The use of E2 improved partnership functioning and identified areas for improvement in CBPR partnerships.
- Collective empowerment was identified as a key factor in the success of CBPR partnerships, with shared values, influence, and community fit being important components.
- Power dynamics and hierarchies within partnerships can present challenges to achieving true power-sharing and collective empowerment.
- Self-report measures used in the study may have certain biases and limitations.
- The study highlights the need for continued work to improve the theoretical mechanisms of CBPR and CEnR for achieving better health outcomes and health equity.

# MAIN DISCUSSION POINTS

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- Importance of CBPR and CEnR
- The need for power-sharing within partnerships.
- The role of reflexivity spaces in promoting equal contributions from all team members, particularly those from marginalized identities.
- The identification of "collective empowerment" as a middle-range theory of change, comprising collective reflection, influence, shared values, and community fit, and its potential for promoting health equity.

# RECAP

- E2 is a research project funded by NINR
- Aims to extend the science of CBPR and CEnR by developing measures and collective-reflection tools to strengthen partnerships, and to identify promising collaborative practices that contribute to health equity outcomes.
- Builds on previous NIH research
- Goal of E2 is to promote the value of community, patient, and other stakeholder participation for achieving health and health equity outcomes.



# CONCLUSION

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- While this study has identified promising practices and lessons learned for community-based participatory research, there are still limitations that need to be addressed, such as the lack of comprehensive outcome analyses and the use of self-report measures.
- Moving forward, it is recommended that researchers use a more comprehensive and rigorous approach to evaluate the impact of CBPR interventions.
- In addition, greater attention should be paid to power dynamics within partnerships, and efforts should be made to promote safe reflexivity spaces for marginalized community members.
- Overall, this study highlights the potential of CBPR to promote health equity and provides valuable insights for improving the practice and theory of CBPR.

# REFERENCES

- Anderson LM, Adeney KL, Shinn C, Safranek S, Buckner-Brown J, & Krause LK (2015). Community coalition-driven interventions to reduce health disparities among racial and ethnic minority populations. *Cochrane Database of Systematic Review*, (6), CD009905. 10.1002/14651858.CD009905.pub2
- Belone L, Tosa J, Shendo K, Toya A, Straits K, Tafoya G, ... Wallerstein N (2016). Community-based participatory research for co-creating interventions with Native communities: A partnership between the University of New Mexico and the Pueblo of Jemez. In Zane N, Bernal G, & Leong FTL (Eds.), *Evidence-based psychological practice with ethnic minorities: Culturally informed research and clinical strategies* (pp. 199–220). Baltimore, MD: United Book Press.
- Boursaw B, Oetzel J, Dickson E, Thein T, Sanchez-Youngman S, Peña J, Parker M, Magarati M, Littledeer L, Duran B, & Wallerstein N (2020). Psychometrics of measures of community-academic research partnership practices and outcomes. *Manuscript submitted for publication*.
- Cacari-Stone L, Minkler M, Freudenberg N, & Themba MN (2018). Community-based participatory research for health equity policy making. In Wallerstein N, Duran B, Oetzel J, & Minkler M (Eds.), *Community-based participatory research for health: Advancing social and health equity* (3rd ed., pp. 277–292). San Francisco, CA: Jossey-Bass.
- Cook T, Brandon T, Zonouzi M, & Thomson L (2019). Destabilising equilibriums: Harnessing the power of disruption in participatory action research. *Educational Action Research*, 27, 379–395. 10.1080/09650792.2019.1618721

## REFERENCES (CONTD...)

- Cornell Empowerment Group. (1989). Empowerment and family support. *Networking Bulletin*, 1, 1–23
- Cornwall A, & Jewkes R (1995). What is participatory research? *Social Science & Medicine*, 41, 1667–1676. 10.1016/0277-9536(95)00127-S
- Devia C, Baker EA, Sanchez-Youngman S, Barnidge E, Golub M, Motton F, ... Wallerstein N (2017). Advancing system and policy changes for social and racial justice: Comparing a rural and urban community-based participatory research partnership in the U.S. *International Journal for Equity in Health*, 16(1), 17. 10.1186/s12939-016-0509-3
- Dickson E, Magarati M, Boursaw B, Oetzel J, Devia C, Ortiz K, & Wallerstein N (2020). Characteristics and practices within research partnerships addressing health and social equity. *Nursing Research*, 69(1), 51–61. 10.1097/NNR.0000000000000399
- Drahota A, Meza RD, Brikho B, Naaf M, Estabillo JA, Gomez ED, ... Aarons GA (2016). Community-academic partnerships: A systematic review of the state of the literature and recommendations for future research. *The Milbank Quarterly*, 94, 163–214. 10.1111/1468-0009.12184
- Duran B, Oetzel J, Magarati M, Parker M, Zhou C, Roubideaux Y, Muhammad M, Pearson C, Belone L, Kastelic SH, & Wallerstein N (2019). Toward health equity: A national study of promising practices in community-based participatory research. *Progress in Community Health Partnerships: Research, Education, and Action*, 13(4), 337–352. 10.1353/cpr.2019.0067



THANK YOU!

-Advait Gogte