



# ACET, Inc.

## Action Consulting and Evaluation Team

Summer 2010 Newsletter

Issue 29

### *Thank You, Emily!*



ACET would like to thank Emily Spangler for her dedication and hard work as an ACET intern this spring. Emily began her internship in February 2010 with

the goal of furthering her knowledge in evaluation and research in order to provide strong programs in a community health or health education organization. Emily worked on many community-based qualitative and quantitative projects, including focus group facilitation and reporting, key stakeholder interviews, report writing, and data collection and analysis. We would also like to congratulate Emily for earning her Master's in Public Health from Baylor University this May! We wish her all the best with her endeavors.

### *Congratulations Kirsten!*

Kirsten Rewey, Ph.D., Senior Research and Evaluation Associate, recently published an article by special invitation in Psi Chi Journal of Undergraduate Research. Kirsten worked with Tina Velasquez at the University of Wisconsin-Stout to develop a checklist to assist student authors, faculty advisors, and reviewers in aligning their manuscripts with the most recent version of the Publication Manual of the American Psychological Association (6th ed.). The article was published in the Winter 2009 issue. Please join us in congratulating Kirsten on her publication!

### *The Results Are In*

ACET offered its second workshop, "The Results are In" on February 23, 2010, and would like to thank everyone who attended – your attentiveness and questions were highly appreciated.

The workshop was facilitated by Joseph Curiel, M.A., ACET's Evaluation Specialist, who shared his knowledge of common types of survey data and available options for analyzing various types of data. The workshop also provided participants with many options for reporting data by using graphs and several tips and tricks for making your visual displays both easy to understand and visually appealing.

The workshop was the second in a series of free community workshops ACET plans to facilitate in order to help organizations build their evaluation capacity. ACET plans to host their third workshop on qualitative analysis in late summer, so be sure to subscribe to our blog to keep updated. Feel free to email Heather Scholz ([heather@acetinc.com](mailto:heather@acetinc.com)) if you are interested in attending any of our workshops or have suggestions for future workshops topics.

### *Recent Happenings with American Evaluation Association*

ACET staff continue to be active with the American Evaluation Association (AEA). In March, our staff submitted proposals for presentations at AEA's annual conference in November which will be held in San Antonio, Texas. Heather was asked to review submissions for the Human Services topical interest group at the conference and Stella volunteered to chair a session for a topical interest group. In addition, ACET's blog was added to the AEA blogroll (<http://www.eval.org/Resources/Blogs.asp>). Everyone at ACET regularly participates in the educational activities and resources available through AEA to stay current in the evaluation field.



### *Reminder...*

Want to read more? Subscribe to our blog at [www.acetinc.com/blog](http://www.acetinc.com/blog)! The blog is updated weekly with new information on funding opportunities, educational resources, ACET tips, and fun tidbits about the team. To subscribe, simply enter your email address on the left sidebar of the screen. You'll receive a brief email each time we post. We love hearing from you, so we encourage you to comment often.

# ***Community-Based Participatory Research***

**By Emily Spangler, ACET Intern**

Community and public health programs seek to improve living conditions for people and populations, but assessing the effectiveness of these programs can be especially challenging for evaluators, researchers, and professionals alike. Specifically, researchers and evaluators need people willing to participate in the evaluation while community members may be hesitant to take part in an evaluation or research study because they fear being “used” and then neglected. As a result, a general lack of trust on behalf of both the researcher/evaluator and community members can stop an evaluation or research study in its tracks.

Community-based participatory research (CBPR) seeks to provide a collaborative approach to research by involving community members and researchers in the design, implementation, and evaluation of health-related research. Like other participatory approaches, CBPR begins with the identification of an issue or concern of importance to the community, and then seeks to maximize the community’s involvement in addressing that issue by enlisting key stakeholders and community leaders to encourage collaboration. CBPR has been used in a wide variety of settings, ranging from a program providing HIV testing and counseling for Latino women to a program promoting activity among African American church members by aligning with church leaders. CBPR seeks to work with the programming and organizations already in place and also seeks to gain valuable community input and support at each step of the planning, implementation, and dissemination process.

For example, researchers from Case Western Reserve University faced the challenge of balancing community member needs and research objectives when asked to provide cervical cancer education to South African women. The need was present: cervical cancer is the leading cancer among South African women. While the community had been inundated with HIV/AIDS educational programs, they knew little about what cervical cancer is or that it could be prevented. Researchers chose to employ the techniques of CBPR and begin their program planning by meeting with South African women of all ages. These focus groups revealed a duality in the daily lives of these women as they struggled with fear, poverty, and violence, yet also demonstrated a great deal of resilience, community spirit, and pragmatism. Researchers also discovered that the term “cancer” held a social stigma among the women (Mosavel, Simon, Van Stade, & Buchbinder, 2005).

Armed with this valuable information, staff adapted their program. Noting the community women’s strength, they decided to train key leaders to educate their peers. Recognizing a desire to learn, researchers adjusted the program to be more comprehensive in nature, addressing cervical health rather than exclusively cervical cancer prevention (Mosavel, et al., 2005).

CBPR effectively addresses many of the challenges faced by traditional research, such as incorporating social and cultural language and norms, maintaining program sustainability, and gaining the trust and respect of the community. CBPR enables community involvement, thereby building trust between community members and researchers. CBPR also seeks to involve local programming and organizations throughout, as well as equip local leaders, leading to sustainable programming. CBPR also allows for the sharing of academic knowledge, enables the appropriate use of language, and allows for bidirectional learning and shared power. In taking a community approach, researchers should be willing to negotiate and adjust programming as needed, be able to think creatively if an approach is not working well, and always be open to reinvention. CBPR also seeks to integrate programming with existing programs, thereby leading to local ownership and program sustainability (Minkler, Blackwell, Thompson, & Tamir, 2003).

CBPR has a solid reputation in many communities and is respected by leading academic institutions, both small and large philanthropic organizations (e.g., Robert Wood Johnson Foundation, Annie E. Casey Foundation), and government officials and organizations at all levels (e.g., Center for Disease Control and Prevention, State of Minnesota; Minkler, et al., 2003). The Institute of Medicine recently identified CBPR as one of the most essential skills for public health professionals in the 21st century (Gebbie, Rosenstock, & Hernandez, 2002). CBPR offers promise for health professionals, funding agencies, and community members alike that complex health research can be purposeful and effective.

## References:

Gebbie, K., Rosenstock, L., & Hernandez, L. M. (2002). Who will keep the public healthy? Educating public health professionals for the 21st century. Washington, DC: Institute of Medicine, National Academy of Sciences.

Minkler, M., Blackwell, A. G., Thompson, M., & Tamir, H. (2003). Community-based participatory research: Implications for public health funding. *American Journal of Public Health*, 93(8), 1210-1213.

Mosavel, M., Simon, C., Van Stade, D., & Buchbinder, M. (2005). Community-based participatory research (CBPR) in South Africa: Engaging multiple constituents to shape the research question. *Social Science and Medicine*, 61(12), 2577-2587.