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Improving Collaboration Between Researchers and Communities

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SYNOPSIS

Active collaboration between communities and researchers is critical to developing appropriate public health research strategies that address community concerns. To capture the perspectives of inner-city Seattle communities about issues in community-researcher partnerships, Seattle Partners for Healthy Communities conducted interviews with community members from the ethnically diverse neighborhoods of Central and Southeast Seattle. The results suggest that effective community-researcher collaborations require a paradigm shift from traditional practices to an approach that involves: acknowledging community contributions, recruiting and training minority people to participate in research teams, improving communication, sharing power, and valuing respect and diversity.

In the past two decades, there has been a large increase in community-based health research, particularly in low-income and ethnic minority communities.[1-3] Much of this research has been in the context of developing, implementing, and evaluating programs to strengthen the delivery of health services and improve health in these communities. Partnerships between communities and research institutions have emerged as a common strategy in these endeavors.[3-5] A major lesson from these experiences has been that effective partnerships require active community participation, community ownership and control of programs, and community capacity building.[6,7]

In collaborations between communities and researchers, challenging issues are frequently encountered, including the appropriate definition of target communities, developing effective community representation, and determining the role of community members. Researchers and communities have employed various approaches to address these concerns, some of

which have been characterized by: mutual benefits to both communities and researchers, the development and use of culturally sensitive methodologies, and clarification of the roles and expectations of community members and researchers.[7-11]

Seattle Partners for Healthy Communities (SPHC) is a Centers for Disease Control and Prevention–funded Urban Research Center whose primary goal is to support and evaluate community-based health promotion programs that are sensitive to the cultural needs of minority communities in Central and Southeast Seattle. Recognizing the challenges it was likely to face, SPHC established a collaborative of community members, groups, agencies, and academic and public health institutions to accomplish its objectives. SPHC is based in Public Health–Seattle & King County, a local health department.

As an early step in developing the collaboration, SPHC conducted the Community Interview Project (CIP) to capture the perspectives of Seattle inner-city communities about challenging issues in community-researcher partnerships and to understand what residents of these communities viewed as strengths and weaknesses of such partnerships. This article describes CIP's data collection methods, findings, and the implications of these findings.

CIP DATA COLLECTION

In February through June 1996, we gathered data through in-person interviews with key community residents and professionals from Central and Southeast Seattle, two of the most ethnically diverse neighborhoods in the city. According to US Census data, people from more than 22 different ethnic groups resided in these areas in 1990. We attempted to recruit a sample that reflected this diversity. (See Table.) We started with an initial list of 25 key informants based on recommendations of staff from other community-oriented projects in the public health department. Through snowball sampling, we recruited and interviewed participants until the answers to the interview questions became redundant. We completed the interviews with a total of 85 adult respondents representing the major ethnic and professional groups in the two neighborhoods.

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The 85 people surveyed came from 16 different ethnic and "racial" groups. They included community residents, staff members of community agencies and grassroots organizations, community activists, and researchers. Approximately half had previous experience in research projects as either investigators or participants. Using an open-ended, semi-structured guide, we conducted interviews at workplaces, homes, community centers, and cafés. Each interview lasted 30 to 90 minutes.

Questions addressed participants' definitions of community; the community(ies) with which they self-identified; what individuals and/or organizations they felt would best represent their communities in working with SPHC; what roles community members should play in research projects; and their recommendations on how community members and researchers could work together.

After the first few interviews, we developed codes based on main themes to guide the analysis. We reviewed the coding scheme to assure its validity in capturing the information provided by the respondents. We also assessed the degree of agreement between investigators in the interpretation of the information coded.

The final analysis consisted of identifying and describing the range of ideas and opinions offered by the respondents. We categorized these views according to four major issues of concern pertaining to community-

Table. Ethnic profile of Community Interview Project respondents

Self-reported ethnic background	Number of respondents
African American and African	32
European American	29
Latina(o)	4
Asian and Pacific Islander (Cambodian, Chinese, Filipino, Hmong, Korean, Laotian, Samoan, Thai, Vietnamese)	15
American Indian	2
Middle Eastern	2
Caribbean	1
Total	85

research collaboration: (a) the definition of community; (b) the recruitment of individuals and/or organizations to represent these communities; (c) the role of community members in research collaborations; and (d) ensuring community involvement.

FINDINGS AND IMPLICATIONS

Definition of community. *Findings.* The respondents typically defined a community as a group of people with existing relationships who share a common interest. For the majority of the respondents, the common interest consisted of living in the same geographic area or sharing a similar ethnic or cultural background. Many also noted the importance of relationships in making community a reality; they felt that the concept of community became meaningless if its members did not relate to, and interact socially with, one another. Several respondents recommended that community-research partnerships not overlook this notion of existing relationships, especially when dealing with low-income and minority communities, because doing so could lead to inappropriate definitions and stereotyping.

Implications. These findings suggest that successful collaboration requires that both researchers and community participants recognize the nuances and subtleties of the communities in which they work. In research partnerships, researchers and community members frequently have different working definitions of a given community. Each group tends to define the community according to its own needs. To work effectively with populations from different cultures and experiences, researchers, who themselves are frequently not community members, must acquire a sound understanding of the people involved and the respective communities from which they come.[12]

Community representation. *Findings.* Many respondents saw the question of who best represents a community as a complex problem that defies easy answers. Respondents often mentioned local organizations such as religious institutions, neighborhood groups, women's organizations, and PTAs as important representatives of communities because their memberships are directly from the community. These organizations were recognized for having a broad understanding of the true needs and concerns of their respective communities.

At the same time, however, respondents often perceived these organizations to be most concerned about their own agendas, which may take precedence over the needs of the community as a whole. A few respondents added that, in some circumstances, formal community agencies are resistant to new ideas and become unwanted gatekeepers. Some respondents noted that people who work in certain job categories, such as program managers and outreach workers, tend to be more in touch with community concerns than others.

Another source of representation is grassroots people, or activists without organizational links, acknowledged by many respondents for their ability to understand the true needs of their communities. Respondents felt that, unlike agency people, activists were not constrained by agency agendas. As one respondent put it, "It's absolutely essential to have the grassroots people represented. Often, agency people have a certain way of doing business and they're turf-protecting, whereas the community members really know what they need and want in their community." Several respondents added that community activists are often not invited to participate in research projects because, in advocating strongly for their communities, they may challenge traditional research practices. Although many respondents stressed the importance of including individual activists as community representatives, some expressed concern that activists often lacked the big picture of the community that is necessary for development.

Another suggestion was that representation should be tailored to the specific nature of a project on the theory that different projects may call for different types of representation.

Above all, respondents recommended that researchers maintain close ties in the communities with

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which they intend to work by cultivating diversity among community representatives and by ensuring that the different voices of community members are heard in the collaboration.

Implications. Appropriate representation of community members is a critical aspect of community-researcher collaboration. Community representatives facilitate communication between communities and researchers and support wider community participation and empowerment. The degree to which these individuals represent community perspectives depends on how well integrated they are into their own communities. Attributes that researchers may view as evidence that an individual represents a community might differ from those accepted by community members. A further complication is that community residents often feel that community representation is tokenized by researchers who seek only to fulfill grant requirements.[10]

The role of community members. *Findings.* Respondents emphasized that contributions from community members are essential to the success of community-research partnerships. A typical remark was, "If you don't include people that you're working with from the get-go, you're likely to end up on the wrong track. You just get disconnected from reality."

All respondents agreed that community input in collaborative research is essential, but they differed about the appropriate level of community participation. The majority described the role of community members as advisory—advising researchers on community issues and concerns. Others advocated a stronger role, with community members as decision-makers in all project activities. A smaller group felt that it was possible for community members to assume a dual role in which they advise in some areas and play a decision-making role in others.

Those who suggested an advisory role for community representatives were confident that, in such a capacity, community members would be instrumental in identifying priority issues, suggesting appropriate projects to address community concerns, and providing feedback on ongoing activities. Several proponents of this model also added that, when community members play an advisory role, they have the opportunity to formally maintain a voice in the partnership.

Respondents who suggested a decision-making role for the community stressed that the community must be an *equal* partner in collaborative efforts. They felt that, when this is the case, a sense of ownership develops that may further enhance community participation and culti-

vate community trust. Some respondents indicated that advocating a decision-making role for community members is a way to avoid tokenism and to promote power sharing among institutions, researchers, and communities. Said one, "If you really want [the partnership]to be useful then you equalize power. And if you really want to equalize power, then you bring [community] people in on a decision-making peer basis. An advisory status without power is a token."

Implications. The desire of community participants to have a greater role in collaborative projects comports with a basic principle of community-based health promotion: that people should have control over the forces affecting their well-being.[13] This implies that a desired outcome of research collaborations is the empowerment of community members with additional skills to become more effective advocates for their communities. In practice, however, researchers and community groups seem to struggle for power and control of research projects.[13] Researchers, often viewed as experts because of their level of education and formal training, tend to hold control over the financial and decision-making aspects of projects. In addition, they are often the link between the funding agency and the project. To achieve the goal that communities be empowered to improve their social environments, researchers must work jointly with community members to define the role of community participants in research projects.[3–5]

Ensuring community involvement. *Findings.* CIP respondents recommended mechanisms through which community involvement in community-research partnerships could be sustained, including providing direct and concrete benefits to communities and creating tangible roles for community members.

Most respondents suggested that community members should be actively involved on project boards. They visualized such boards as diverse with regard to ethnicity, profession, religion, age, social and economic status, and sexual preference. They particularly favored boards on which technical and grassroots community people work together to share expertise and recognize the knowledge and experience all have to offer. Several respondents recognized that the process of running such a board can be difficult because it requires members to make a strong commitment to cooperation and patience, but that it is a worthwhile way to promote community participation.

Some respondents recommended that communities receive concrete benefits in return for their involvement in research partnerships. They felt that if the outcomes of

research partnerships do not include tangible benefits for the community, then the partnership is not advantageous to that community. Some examples of benefits include the delivery of relevant health and social services; sustainability of worthy, community-initiated programs; and sharing study results with communities in a culturally appropriate fashion. Specific services mentioned in exchange for community participation were food, child care, and transportation.

The respondents saw researchers as the major beneficiaries of most collaborative research projects. They were perceived as being motivated by opportunities for publications and funding.[10] Respondents considered it respectful and fair to compensate community people for their time and effort. As previously mentioned, some respondents indicated that, in past collaborative projects, community involvement had amounted to tokenism, used mainly to fulfill requirements for getting funding. Because of this, many community members are suspicious of researchers' intentions. To reinforce the value of community participation, respondents suggested that community participants assume tangible roles in partnerships. They specifically recommended that community participants be involved in integral parts of projects, assuming positions of responsibility according to their expertise and experience.

Implications. Projects lacking mechanisms for involving community members are likely to be less successful than those in which community representatives are active participants. Community members are stakeholders in the well-being of their communities.[11] In genuinely collaborative research projects, this right and responsibility is explicitly recognized by research institutions. When there is imbalance in power and control over projects, often it is the community's interests that are ignored. This may lead to alienation and the withdrawal of community participants. If the project requires community resources to achieve specific goals, the project may fail.

Race, ethnicity, and culture. *Findings.* Although we did not directly ask questions about issues related to race, ethnicity, or culture, these issues emerged from many of the interviews. Specific concerns included racial imbalance among research staff and lack of cultural appropriateness of research projects.

Many respondents said that collaborative research projects, particularly those in ethnic minority neighborhoods, are dominated by white people. Often these researchers do not relate to the communities they are working in. The respondents stressed that research proj-

ects need to recruit and involve minority communities, especially communities of color. Hiring people of color was seen as an important step in increasing the cultural competence of research teams and also as a means to provide training and opportunities for skill-building for members of communities of color. In the words of one respondent, "If we're talking about ethnic communities, then it's imperative that they have to be on staff....[T]his would enhance [researchers'] ability to better serve the population they're supposed to be serving." As another key concern relating to ethnicity and culture, respondents mentioned that researchers must understand the cultural context of communities in which collaborative projects are conducted. Respondents recommended that researchers cultivate a sensitivity to cultural differences in communities, and that they conduct themselves in a culturally competent manner.

Implications. Many respondents expressed concerns regarding issues relating to race, ethnicity, and culture. They observed that the research field is dominated by white people working in communities of color. They strongly emphasized recruiting and training people of color to achieve racial balance and to increase the cultural competence of research teams, particularly those working with minority communities.

CONCLUSIONS

Our findings showed that community residents and staff members of community-based agencies in the Central and Southeast neighborhoods of Seattle favored research partnership models that recognize communities' views and strengths. However, many were skeptical about whether researchers would willingly share power and the control of projects with community partners in order to achieve true and equal partnerships.

Because many of these interviews were conducted with respondents who were affiliated with government or community agencies, it is possible that the study sample was not representative of the general population in these two neighborhoods. Nevertheless, the similarity between the issues raised by the respondents and those reported in the literature[7,14] is evidence that the information we collected reflects the experience of minority and low-income populations. In addition, although our respondents came from 16 different ethnic groups, they expressed common experiences and opinions. This supports the generalizability of our findings.

It is possible that respondents may not have been totally candid because the interviewers were health

department staff. However, the large number of responses criticizing researchers and research institutions suggests that this was not the case.

The findings are consistent with other suggestions that successful community-research partnerships require a paradigm shift from traditional practices.[15] Vega notes that public health interventions in different kinds of communities have failed because of inappropriate cultural assumptions and culturally insensitive study designs.[8] "Business as usual" in research partnerships has proven ineffective in building positive and lasting relationships between researchers and communities, particularly communities of color.[16]

Some practitioners of community-based research have suggested that researchers develop mutually beneficial collaborations with stronger roles and responsibilities for community partners.[10,11] Others argue that community-research partnerships are essential in improving relationships between academia and communities.[12,16] Such partnerships could constitute an important tool to address relevant community health concerns.[17]

As a result of the CIP, SPHC has created a community board to initiate a local model of community-researcher collaboration. Based on recommendations from the interviews, this community board includes community residents and activists as well as health professionals. The board has developed principles that promote culturally appropriate research practices that respect community interests. The process has not always been smooth; however, difficult issues are openly discussed and usually resolved in a collaborative manner.

It is encouraging that community members who reported negative experiences with previous research projects remained interested in participating in SPHC projects. Our experience suggests that this is a reflection of their dedication to the well-being of their communities. Their openness to participation challenges researchers to improve collaborative relationships with community partners.

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