

Developing the infrastructure for community based participatory research through coalition building in a suburban environment



Shedding light on invisible populations

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Background

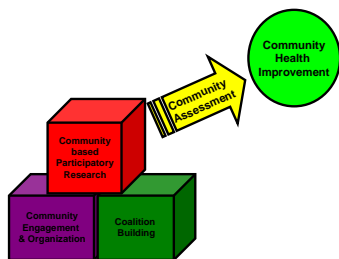
Residential segregation has been established as one of the many causes of the disparities in health between whites and blacks (Acevedo-Garcia et al.). Minority communities in the residentially segregated suburb of Suffolk County, NY have continued to experience a disproportionate burden of poor health outcomes (Erase Racism). Although Suffolk County is perceived as one of the most affluent suburbs in the nation, it faces unique public health challenges. The Center for Public Health and Health Policy Research (CPHPR) developed the Suffolk County Minority Health Action Coalition (SMHAC) through a community driven process that informs decision making, produces evidence based initiatives to address health inequities and improve minority health outcomes in the region.

CPHPR and SMHAC utilized a multifaceted approach:

- Engaged communities to address identified concerns
- Developed culturally appropriate solutions to improve minority health outcomes in our region
- Produced evidence-based public health initiatives



Conceptual Framework



Methods

- Formed a planning committee



- Selected key stakeholders and trusted agents within minority and medically underserved communities were invited to participate in mini-summits on minority health.
- Participants were asked a series of thought provoking questions; the answers to the questions were prioritized, translated and disseminated through conference proceedings.
- Developed a flexible framework that would set boundaries while allowing participants to provide content and direction

Community Engagement and Organization

- Mini-summits on minority health were unique community forums designed to assess and elucidate minority health concerns in the county.

Mini-summit I – July 25, 2007 Race, Class and Public Health

- Identified areas of concerns, develop goals and recommend strategies to achieve the goals
- Recommended pooling resources into a community based research network designed to examine and address the existing health inequities in our region.

Mini-summit II – October 10, 2007 Introduction to CBPR

- Explored and applied the concepts of community based participatory research (CBPR) as an evidence-based approach to addressing and improving minority health in Suffolk County
- Recommended training in CBPR

Methods

Coalition building

Mini-summit III – February 28, 2008 SMHAC Ribbon Cutting Ceremony



- Formally developed the Suffolk County Minority Health Action Coalition (SMHAC) with seed funding from the Long Island Community Foundation
- SMHAC's mission:
 - Empower communities to become agents of social change
 - Inform local, state, and national entities about needs of minority communities in the county
 - Build local infrastructure for CBPR
 - Develop culturally appropriate strategies to incorporate evidence based research into effective programs and policies

Community Based Participatory Research

Community Alliance for Research Empowering Social change (CARES)



- Recruit and train action-oriented community members on evidence based research methods
- Engage community members and SBU faculty members to participate in pilot community based participatory research projects
- Evaluate, translate, and disseminate research findings in a culturally appropriate forum
- Enhance the existing SBU research infrastructure for community based participatory research
- Project activities conducted in the Suffolk County community, involving community members in all phases of the project

Results

- This community partnered approach has increased awareness about health inequities that exist in our region and shed light on the needs of invisible populations, including undocumented residents, the working poor, medically underserved, and Native Americans.
- SMHAC has 5 active committees based on the identified needs from Mini-summit I: Cultural competency, Data Collection, East End, Insurance and the Executive Committee.
- A paradigm shift within the region increasing the use of community forums and community engagement to address health concerns.

Discussion

- Community forums and coalition building activated collective action and served as the catalyst for community-based participatory research in our region.

Conclusion

- There are no "cookbook" solutions to engaging community members; each community is unique in needs and resources.



*"Health Disparities is a fight that can be won if our most oppressed communities can be fully engaged as partners in identifying, exploring and taking action to address the social and health problems **they**- not we as outsiders- care most deeply about."*

-Minkler, 2000