Assessment of community organization in designing a dissemination plan for community based participatory research (CBPR) findings to the faith-based community: The cardiovascular health and needs assessment, Washington D.C.

JaWanna Henry, MPH¹; Kendrick Curry, PhD, MDiv²; Allan Johnson, PhD³; Twanda Johnson⁴; Michael McClurkin, BA⁵; Valerie Mitchell, BA⁵; Marlene Peters-Lawrence, RN⁵; Johnetta Saygbe, BS⁵; Alyssa Todaro-Brooks, BS⁵; Gwenyth R. Wallen, PhD, RN⁴; Leah Yingling, BS⁵; Tiffany Powell-Wiley, MD, MPH⁵

¹University of Maryland School of Medicine, ²The Pennsylvania Avenue Baptist Church, Washington, DC, ³Nutritional Sciences, Howard University, Washington, DC ⁴Clinical Center, National Institutes of Health, Bethesda, MD; ⁵National Heart Lung and Blood Institute, National Institutes of Health, Bethesda, MD

In CBPR, early data dissemination is important for increasing community capacity and creating project sustainability, as measured by improved health behaviors and outcomes. Less is known about methods for incorporating community organization, or the community’s information-sharing network, in designing a CBPR data dissemination plan. In partnership with approximately 20 community-based organizations, we are completing a cardiovascular health and needs assessment in high-risk Washington D.C. neighborhoods through the faith-based community (NCT:NCT01927783) as a first step in developing a community-based intervention promoting behavioral change for improved cardiovascular health. Group meetings for faith-based community leaders and members (N=24) are being held from February-March 2015. At these meetings, participants will complete a theory-based Community Organization survey. This survey will assess current levels of empowerment, community capacity, and social capital as potential facilitators of assessment data dissemination. Meeting participants are also presented preliminary findings from the health assessment followed by an in-depth discussion with participants of recommendations for key stakeholders in the broader Washington D.C. community to whom we should present assessment findings. Outcomes for the study are comparisons of empowerment, community capacity, and social capital levels between the study participants’ faith-based organizations. Another outcome is a preliminary dissemination plan informed by community organization measures and findings from the group discussions. Utilizing measures of the core concepts of Community Organization Theory may serve as a paradigm for developing a CBPR-based data dissemination plan. Data dissemination is fundamental for early engagement of key Washington D.C. community organizations in creating a CBPR-based intervention to improve cardiovascular health.

Learning Areas:

Chronic disease management and prevention
Communication and informatics
Planning of health education strategies, interventions, and programs
Program planning
Public health or related research
Social and behavioral sciences

Learning Objectives:

Design a community-based information dissemination plan. Assess the level of community organization within a faith-based community. Demonstrate a process for engaging a community to increase capacity among community members.

Keyword(s): Community-Based Partnership & Collaboration, Health Disparities/Inequities