AGENDA

I. Overview and Components of Community Based Participatory Research (CBPR)

II. Comparison: CBPR - Evidence-Based Research (EBR)

III. LAC-DMH CBPR PROJECTS: AFRICAN, AFRICAN AMERICAN, CARIBBEAN COMMUNITY

UNDERLYING CONSIDERATIONS

“...it is essential that our Nation continues on the road to eliminating racial and ethnic disparities ... in mental health services.” (Satcher, 2001)

“Untreated mental illness and inadequately treated mental illness ... are especially prevalent among African Americans.” (Snowden, 2012)

“. . . we should encourage stigma reduction efforts in African American populations.” (Snowden, 2012)
WHAT IS CBPR?

DEFINITION

An **innovative** research approach that collects community-level data for the purpose of improving community health, mental health, reducing disparities.

A **collaborative** research paradigm that incorporates community members/leaders in the research process, dissemination and use of results.

OVERVIEW: COMMUNITY-BASED PARTICIPATORY RESEARCH (CBPR)

KEY COMPONENTS OF CBPR

- Inclusive Partnership
- Real-world View/Setting
- Action-Research Paradigm
- Community Engagement
- Social Justice Intention

“the community psychology perspective...cultural relativity, diversity and ecology: the fit between persons and the environment.”

(Rappaport, 1977)

RELEVANCE OF CBPR FOR AFRICAN-AMERICAN, AFRICAN AND CARIBBEAN (AAAC) IMMIGRANT POPULATIONS

ACKNOWLEDGES IMPACT OF RACISM, DISCRIMINATION, MICROAGRESSIONS, TRAUMA

ADDRESSES DISPARITIES IN AWARENESS, AVAILABILITY, ACCESS, ENGAGEMENT, CULTURAL COMPETENCY

RECOGNIZES COMMUNITY STRENGTHS, LEADERS, VALUES AND PRIORITIES/PERSPECTIVES

AVOIDS PATHOLOGIZING COMMUNITIES AND ‘BLAMING THE VICTIM’
## COMPARISON: COMMUNITY BASED PARTICIPATORY RESEARCH (CBPR) VS EVIDENCE-BASED RESEARCH (EBR)

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### DISSEMINATION OF RESULTS
- Community Level: Multiple Formats vs. Journals/Conferences Limited Formats
- Locally-Driven: Lower Cost vs. Institutionally Driven: Higher Cost
- Immediate Impact: Local Relevance – "Micro" vs. Delayed Impact: Broad(ER) Relevance – "Macro"
LAC-DMH CBPR PROJECT
AFRICAN-AMERICAN, AFRICAN, CARIBBEAN COMMUNITIES (AAAC)
UNDERLYING CONSIDERATIONS

LAC-DMH Strategic Plan – 2010
“Eliminate disparities in mental health services especially due to race, ethnicity and culture.”

Increasing Diversity in AAAC Community
Foreign-born from Africa: Nigeria, Ethiopia, Ghana, Somalia
Foreign-born from Caribbean: Jamaica, Trinidad-Tobago, Haiti

Strengths and Needs of AAAC Community in Los Angeles County

Stakeholder and Advocate Recommendations

1. “COMMUNITY VOICES” 2009-2011

GOALS:
Identify existing needs and community resources for AAAC’s
Identify and Engage AAAC Community leaders, advocates
Facilitate network of AAAC leaders, advocates, providers

TASKS:
Conduct CBPR involving AAAC communities
Analysis, Interpretation, Final Report of data
Community level dissemination of CBPR results and report

OUTCOMES:
II. “LIFE LINKS” (2012)

GOALS:
Create culture-specific resource manual for AAAC communities (particularly) in South Los Angeles

TASKS:
Conduct ‘Review and Comment’ of “Community Voices” by community leaders and advisers
Identify outreach priorities from data and community input
Develop and design culturally-appropriate, accessible, portable resource manual

OUTCOMES:
Life Links A Resource Listing for Residents of South Los Angeles County

III. AAA MENTAL HEALTH OUTREACH BROCHURES (2014-2016)

GOALS:
Convert CBPR data/information into culturally-relevant mental health outreach and promotion brochures

TASKS:
Develop and design multiple versions of mental health brochures (Content, Images, Format) for AAAC target groups
Conduct ‘Review and Comment’ with community leaders and stakeholders

OUTCOMES:
5 Mental Health Promotion Brochures
Specific Language editions: Amharic, Somali, English
Specific Multi-Ethnic Orientation: African, Caribbean, African-American, Ethiopian, Somali
REFERENCES


De los Nuñez, D., Hacker, K., DiGiacomo, A., & Hicks, L.S., (2012). A systematic review of community-based participatory research to enhance clinical trials in racial and ethnic minority groups. Health Services Research, 47


REFERENCES


