

LGBTQ TA CENTER

Newsletter

Summer 2017 Newsletter

Dear grantees,

In this newsletter, we're focusing on the Community-Based Participatory Research (CBPR) approach. Through the California Reducing Disparities Project (CRDP) initiative and the Statewide Evaluation (SWE), the Office of Health Equity is using the CBPR approach for **evaluating the effectiveness, community responsiveness, and language and cultural appropriateness of the Implementation Pilot Projects (IPP)**. The CBPR approach is to be infused not only into the evaluation of the program's effectiveness in multiple domains, but also in the program's service design. What does this mean for the IPPs in operationalizing the concept? What are the IPPs proposing in response to the requirements of the CRDP when it comes to program evaluation?

Below, we've provided information about CBPR, details about how the grantees are using a CBPR approach, and CBPR resources. For more Equity News, Funding Opportunities, and Searchable Resources, visit the [LGBTQ TA Center](#) website, where new items are posted on an ongoing basis.

Community-Based Participatory Research

What is CBPR?



The SWE used the definition Israel and colleagues developed in 2001 as a foundation for their evaluation approach. CBPR is defined as **focusing on social, structural, and physical environmental inequities through active involvement of community members, organizational representatives, and researchers in all aspects of the research (*evaluation research*) process.** In this case multiple partners, stakeholders, and beneficiaries contribute their expertise to enhance understanding of what is taking place in their community, and how to integrate the learning gained with action which will subsequently benefit the community involved (1).

Eight Key Characteristics of the CBPR Approach

1. Recognizing the community as a unit of identity
2. Building on the strengths and resources of the community
3. Promoting co-learning among research partners
4. Achieving a balance between research and action that mutually benefits both science and the community
5. Emphasizing the relevance of community-defined problems
6. Employing a cyclical and iterative process to develop and maintain community/research partnerships
7. Disseminating knowledge gained from the CBPR project to and by all involved partners
8. Requiring long-term commitment on the part of all partners (2)

Why CBPR?

Numerous authors have identified strengths and advantages in using the CBPR approach:

- It allows for the innovative adaptation of existing resources (3).
- It can be used to explore local knowledge and perceptions (1, 3).
- It empowers people by considering them agents who can investigate their own situations (3-5).
- Community input makes the project credible, enhancing its usefulness by aligning it with what the community perceives as social and health goals (1-3).
- It joins research participants who have varied skills, knowledge, and expertise to address complex problems in complex situations (1).
- It provides resources for the involved communities (1).
- Through its collaborative nature, it provides a forum that can bridge across cultural differences among the participants (1).

- It helps dismantle the lack of trust communities may exhibit in relation to research (1, 5).

LGBTQ IPP Spotlights

How are the LGBTQ IPPs implementing CBPR?

Various strategies are being used by community agency IPPs in the LGBTQ hub to involve community representatives to obtain information about their community, identify their needs, expectations, best ways to increase/engage community participants, and what unique characteristics they may have that can inform whether their program services and activities are appropriate and relevant. The IPPs proposed a community defined evidence practices (CDEP) to address disparities in accessing preventative mental health services. The CDEP evolved through practice, and guidance from community members and participants.

In responding to the CRDP requirement, many are convening an advisory group who will provide recommendations and feedback on program activities such as effective outreach strategies, curriculum, and how to best ask questions. The advisory board will provide a perspective about what may be happening and suggest ways to understand certain results.

- San Joaquin Pride Center - Youth Stakeholder group/Evaluation Steering Committee
- LGBTQ Connection - Youth Led Participatory Evaluation, Youth Leadership Team
- Gay & Lesbian Center of Bakersfield - Program Advisory Committee
- Openhouse - Community Ambassadors/Community Council
- API Wellness Center - Planning team and peer leaders
- Gender Spectrum - CDEP Advisory Committee, partnering with other organizations, youth in the GS Advisory Council
- Gender Health Center - Community Advisory Board

Others are convening town hall meetings over the course of the program period to engage in soliciting community feedback (e.g., LGBTQ Connection, G&LCB, OH). Still others directly link a member or members of the Board of Directors to the CDEP program evaluation working group (e.g., SJPC - Program Committee represented in the Stakeholder Group/Evaluation).

References

1. Israel BA, Schulz AJ, Parker EA, Becker AB. Community-based participatory research: policy recommendations for promoting a partnership approach in health research. *Educ Health.* 2001;14:182-197. [PubMed](#)
2. Israel BA, Schulz AJ, Parker EA, Becker AB, Allen AJ, III, Guzman JR. Critical issues in developing and following community-based participatory research principles. In: Minkler M, Wallerstein N, editors. *Community-based Participatory Research for Health.* San Francisco: Jossey-Bass; 2003. pp. 53-76.
3. Stevens PE, Hall JM. Participatory action research for sustaining individual and community change: a model of HIV prevention education. *AIDS Educ Prev.* 1998;10:387-402. [PubMed](#)
4. Breda KI. Professional nurses in unions: working together pays off. *J Prof Nurs.* 1997;13:99-109. [PubMed](#)
5. Webb C. Partners in research. *Nurs Times.* 1990;86:40-44. [PubMed](#)

CBPR Resources



Community Tool Box: Community-based Participatory Research

Learn about community-based participatory research: what it is, why it can be effective, who might use it, and how to set up and conduct it. The Community Tool Box is a free, online resource from the Work Group for Community Health and Development at the University of Kansas for those working to build healthier communities and bring about social change. It offers thousands of pages of tips and tools for taking action in communities.

Community-Based Research with LGBTQ Communities

This brief from Rainbow Health Ontario provides an overview of CBPR; describes CBPR in the context of research on LGBTQ communities; describes benefits and challenges of using CBPR with LGBTQ communities; and provides strategies for implementation.

Research Methods
Because LGBTQ health matters



Rainbow Health Ontario
Santé arc-en-ciel Ontario

COMMUNITY-BASED RESEARCH WITH LGBTQ COMMUNITIES

Since the 1970s, lesbian, gay, bisexual, and trans (LGBTQ) people have become increasingly aware about the kinds of research they agree to support with their participation. Increasingly, they are demanding greater involvement in research that pertains to them and their health. Community-based research (CBR) is done in partnership with LGBTQ communities themselves. CBR begins with a research topic of relevance to the LGBTQ community and the research is often carried out in community settings. CBR uses LGBTQ community members as experts in their own right, whose knowledge is vital to the success of the research. In CBR projects, LGBTQ community members may serve on research teams, help design the study from the ground up, interview participants, analyze data, write reports, and disseminate findings, as well as provide advice and oversight. CBR aims at solving "real world" problems in ways that are meaningful and empowering for LGBTQ communities (1).

WHY USE CBR?
CBR has four significant advantages to offer the researcher:

1. CBR can enhance LGBTQ community capacity for greater advocacy efforts.
2. CBR can increase the relevance and validity of LGBTQ research studies by elevating the status of LGBTQ community knowledge to that accorded to academic knowledge.
3. CBR can enhance theoretical understanding of LGBTQ issues by incorporating lived experience into all aspects of study design.
4. CBR can facilitate action-oriented change, enhance LGBTQ health and improve the quality of life in LGBTQ communities by building very trusting relationships.

THE CONTEXT OF CBR RESEARCH WITH LGBTQ COMMUNITIES

- Community Campus Partnerships for Health (ccph) argues that CBR has emerged at a time when there is increasing recognition that the complex problems facing communities cannot be solved using traditional approaches to research.
- LGBTQ communities have good reasons to be suspicious of research. Although homosexuality was removed from the Diagnostic and Statistical Manual of Mental Disorders (DSM) in 1973, a mental illness called "gay hysteria/homosexuality" remained in the DSM until 1986, allowing psychiatrists to treat people's discomfort with their same sex attractions, rather than focusing on the cause of that discomfort.
- Many non-CBR research studies have targeted LGBTQ communities. Laud Humphrey's 1970 study of men who sought sex in public restrooms, for example, did not obtain informed consent. Humphrey used men's license plates to trace their home address and interviewed them without revealing the nature of his research (2). More recently, a 2006 study reported that in terms of their sexual partners, bisexual men were indistinguishable from gay men, leading them to speculate that male bisexuality was not

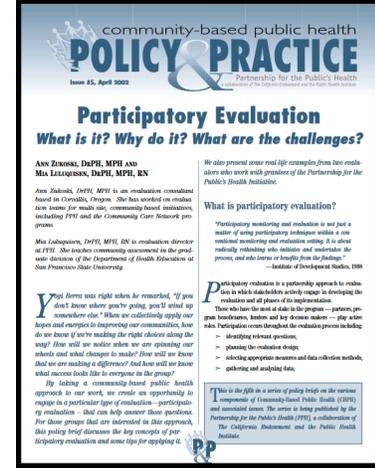
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www.RainbowHealthOntario.ca

Guidelines for Conducting Health Research WITH LGBTQ+ Individuals and Communities in New Mexico

The New Mexico LGBTQ+ Health Collaborative developed these guidelines to promote community - partnered research, innovative interventions, and better healthcare for LGBTQ+ persons and communities. The helpful background information and recommendations focus on CBPR with LGBTQ+ communities, and are not specific to New Mexico. The guidelines were developed using a community-participatory approach, and incorporate direct quotes from community participants.

Participatory Evaluation: What is it? Why do it? What are the challenges?

The Partnership for the Public's Health in California created this issue brief on participatory evaluation in policy and practice. It discusses the key concepts of participatory evaluation, compares participatory to traditional evaluation, and provides tips for implementing participatory evaluation. Real-life examples of efforts in Los Angeles and Shasta Counties are highlighted.



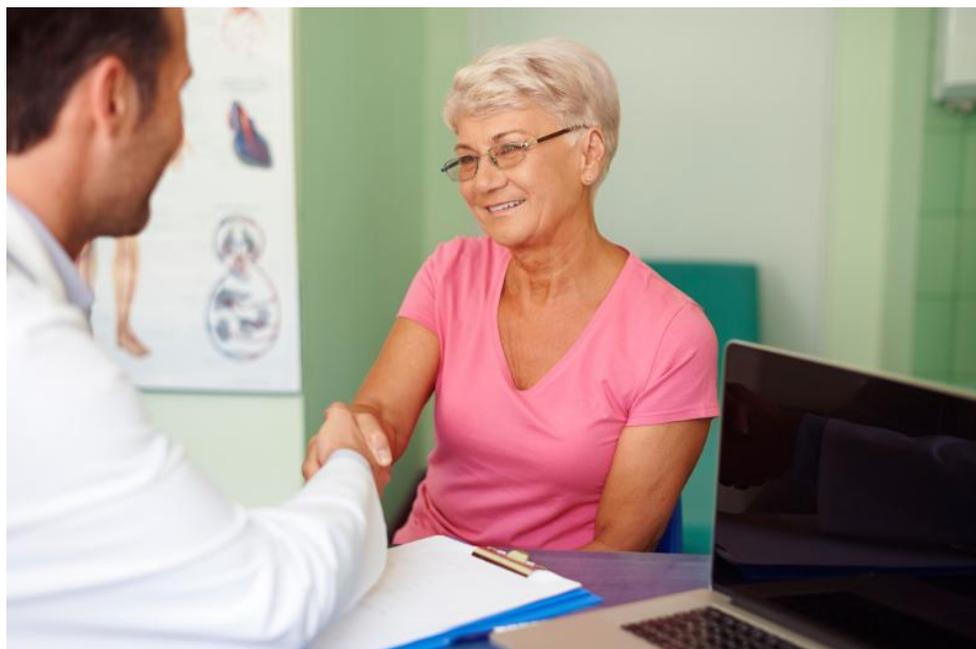
Developing and Sustaining CBPR Partnerships: A Skill-Building Curriculum

The Examining Community-Institutional Partnerships for Prevention Research Group at University of Washington created this evidence-based curriculum as a tool for using or planning to use a CBPR approach to improving health. It provides detailed information and strategies to build capacity for effective CBPR partnerships.

More LGBTQ News and Resources

News - Trans Veterans Reap Positive Benefits from Military Service

With an estimated 134,000 transgender veterans in the US, this article highlights testimonials and statistics from two research studies, "Transgender Military Service in the United States," and "Prior Military Service, Identity Stigma, and Mental Health Among Transgender Older Adults." Reports indicate transgender people serve in the military at higher rates than cisgender people (15% vs 9%), and while they experience depression at higher rates than cisgender veterans, military service appears to have positive, long-term effects on mental health and quality of life.



Resource - How to Collect Data About LGBT Communities

In the U.S., there remains a persistent lack of routine data collection on sexual orientation and gender identity, including the disparities that affect the LGBTQ-leaving the challenges facing LGBT communities largely unmapped. Collecting more and better data about sexual orientation and gender identity, or SOGI, is essential to meet the needs of LGBT people and their families across the United States. This article from American Progress offers suggestions for tested SOGI question designs, data collection in research efforts, administrative and programmatic data collection, and how to address gender identity and expression.

[Resource - Talking, Gawking, or Getting It Done: Provider Trainings to Increase Cultural and Clinical Competence for Transgender and Gender-Nonconforming Patients and Clients](#)

This article presents a set of preliminary policy recommendations regarding cultural competency trainings for health care providers to improve service delivery to transgender and gender-nonconforming clients. The authors propose policy recommendations to guide curriculum developers and trainers in developing content and structure and to facilitate implementation of lessons learned in trainings at an agency- or organization-wide level.



Contact the LGBTQ TA Center:

<http://lgbtq-ta-center.org/contact-us/>
1-877-568-4227

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