



Community - Academic Partnerships: Learning Even More During COVID-19

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Community-based organizations (CBOs) in public health have long-standing reputations serving marginalized communities by mobilizing resources

in areas where health care access is otherwise unavailable. These

agencies are responsive to the needs of a

community. They can develop genuine, reciprocated

relationships with community members, which helps foster trust and legitimacy.

CBOs can help develop more effective and sustainable health policies/interventions that are relevant and tailored to community context.

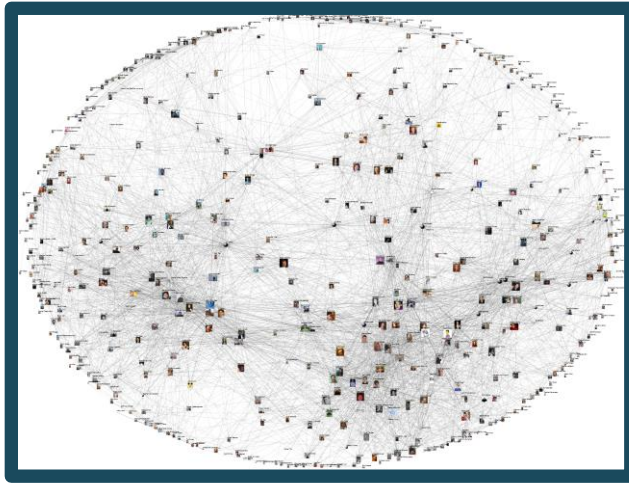


Figure 1 Image by Marc Smith. CC 2.0.

“The current project observes a community academic partnership by eliciting detail on motivating factors, challenges, successes and reflections on goals of the collaboration.

While we recognize the benefits and potential of CBOs to address health inequities, there are challenges in their organizational capacity to continue implementing and sustaining positive health outcomes in underserved settings. So far, there are limited empirical studies that can provide best practices or strategies to strengthen CBOs involved in public health.

Highlights

Relationship-building can be difficult when the collaboration is between community leaders and academic researchers with consideration to power differentials.

Integrating community-based participatory principles into partnerships has strong potential to demonstrate a sustainable network.

The project explores the collaboration process of a Community-Academic Partnership (CAP) focused on public health equity efforts in Flint, Michigan. The CAP members are made up of 27 public health agency leaders, community members, and academic researchers at a local, state and national level. All members have some credibility in health equity efforts as demonstrated in their expertise, community engagement, or role.

Methods

We are collecting detail on the facilitating and hindering factors of collaboration; community perspectives on their motivations to participate in the CAP and their perception of how successful the collaboration has been in meeting health equity goals. The research questions guiding this study are: (1) What factors facilitate or hinder the development of CAPs? (2) How does perceived success of the CAP change? (3) What are partners' motivating factors to engage with the CAP?

The project uses quantitative and qualitative methods to understand what makes collaboration more easy or difficult. Data is being collected with a surveys and semi-structured interviews. Additional data on network structure and changes over time are collected through social network analysis techniques.

Each of these components have been designed to contribute to the following gaps found in the CAP literature:

- **Experiences of community stakeholder participation in CAPs.** This area is particularly important to understand in order to develop strategies that are culturally responsive and relevant to community context. The project is conducting qualitative interviews and quantitative surveys with community partners to understand their experiences, challenges, successes, motivations, and expectations from the collaboration.
- **Knowledge on relationships between partners.** This gap refers to the knowledge between community partners and with academic partners. Further, many partnership assessments in CAPs don't usually discuss network ties. However, network ties can give us insight into how partnerships evolve and lead to improved outcomes. The social network

HOW DID A COMMUNITY PSYCHOLOGY PERSPECTIVE INFORM YOUR WORK?

The project aligns with the foundational values of Community Psychology, which prioritize social justice, community strengths and multidisciplinary approaches to health equity efforts. The impact of this research builds on systems-level, ecological perspectives grounded in Community Psychology, emphasizing how networks of CAPs within larger systems of marginalized communities can function collaboratively to better understand and resolve health disparities. Findings will ultimately contribute community and academic perceptions of collaborative efforts in CAPs to highlight how community-based efforts are dynamic processes, intertwined with contexts related to community, resources, interpersonal connections, power, and equity.

data being collected will contribute knowledge on network structure and relationship ties exchanged between partners in CAPs over time. This may provide evidence to support the assertion that CAPs improve social networks and collaboration between those involved in the partnership.

- ***Motivation of community partners and their perception of CAP success.*** There is evidence to show that community members who are more motivated, often see more benefits to CAP, which tend to result in higher levels of collaboration. We are using surveys and qualitative interviews to identify which factors are motivating community and academic partners to participate in a CAP, along with the extent to which they perceive the CAP as successful.
- ***External factors in fluctuating environments surrounding CAPs.*** Decisions made in response a fluctuating environment can alter network ties that either strengthen or constrain CAPs in the future. The current study will use observations and qualitative interviews to explore how a fluctuating environment related to COVID-19 has influenced partnerships over time. Observations are documenting ongoing CAP efforts to respond to partner needs. Examples of these observations include description of webinars, documenting email communication efforts, and disseminating health information.

What Does This Mean For?

Research and Evaluation: This project expands the CAP process and documents the experiences of community practitioners in CAPs. The data can be used to either reframe strategies being used or create new strategies that are more relevant and useful within a given community context.

Practice: Findings can demonstrate the success of collaboration strategies that are collective and community driven toward health equity goals in an underserved region.

Social Action: Instead of dissolving in the face of COVID-19 lockdowns, CAP leaders and partners mobilized to respond to community needs in appropriate, safe ways. These experiences can guide future collective efforts in social action between community and academic partners.

Original Citation: This is a component of a dissertation project in progress. Ideas are fully credited to the author.

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