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### **The Community-based Participatory Action Framework ©**

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CQI's approach is based on the principles of Community-based Participatory Action Research ("CPAR"), which is defined as a collaborative process that equitably involves all partners in the research process and recognizes the unique strengths that each brings. CPAR begins with a research topic of importance to the community with the aim of combining knowledge and action for social change to improve community health and eliminate health disparities. (Minkler, Blackwell, Thompson & Tamir, 2003).

CPAR recognizes the community to be a unit of identity, and that a sense of community is cultivated by identification and emotional connection with other members (Israel, Schultz, Parker, Becker, Allen & Guzman, 2003). A key characteristic of CPAR is the commitment to focus on and augment existing strengths and assets in a community.

A key feature of CPAR is that "the community" drives the research agenda (Israel et al, 2003). The involvement of the community in all phases of the research is necessary to ensure that professionals do not misconstrue or render meaningless information collected due to their lack "lived experience" or because they are not a member of that socio-cultural group. (AHRQ, 2004). The participatory process thus assumes the legitimacy of consumer expertise produced outside of the scientific community, and looks to build on that expertise. (Gaventa, 1993).

Community-based research methodologies equitably involve all stakeholders in the research process and recognize the unique strengths that each brings. Essential to community-based research is the active re-allotment of power between all involved members and constituents in the research process (Strand, Marullo, Cutforth, Stoeker, Donohue, 2003a). CPAR emphasizes reciprocal transfer of knowledge, skills and capacity throughout the process, imparting community members with tangible and practical benefits as a result of their engagement and participation (Springett, 2003). Thus, CPAR strengthens co-learning and capacity building among all partners.

In essence, the purpose of community-based research is not simply to develop knowledge within a discipline, but to create knowledge that "contributes to making a concrete and constructive difference in the world" (Sclove, 1997, p. 542). This approach promotes innovation and improves quality:

By being involved, participants can see the value of the information they are collecting. Involvement also ensures that the indicators are meaningful to all concerned. . . . However, the benefits of such an approach go beyond ownership and clarity. Involving a range of people in each stage often generates innovative ways of measuring process, impact, and outcomes. (Minkler & Wallerstein, 2003).

Involvement of community members establishes the critical link between research and action or practice because community members buy in to a process that involves them from the beginning and they are in a better position to apply findings to actual practice and disseminate those findings (Israel et al, 2003). CPAR is more easily translated into practice since community-defined research is relevant to the local conditions, with consumers taking an equal role (Israel et al, 2003). Consumers not only buy in to it, but can explain it to their peers.

CPAR aims for long-term and sustainable outcomes (Israel et al, 2003). CPAR disseminates findings and knowledge gained to all partners and involves all partners in this process (Israel et al, 2003). CPAR aims to achieve this with a heightened sensitivity toward presenting the information gained in language that is understandable and respectful to all partners involved. CPAR is dedicated to engaging in projects that can be sustained over time from one funding source to the next, as well as heartily acting in a way that translates findings to improved outcomes.

Despite skepticism from more traditional or conventional scientific communities, community-based participatory research has the necessary rigor and is valid and reliable (AHRQ, 2004, Simpson & House, 2002). A review of the research on the quality of community-based participatory action research reveals the high quality of these studies in the rigor of the design, increased participation rates, increased external validity, reduced attrition rates, and increased individual and community capacity (AHRQ, 2004).

The CPAR philosophy is critical for mental health transformation, where even the best research findings usually are not to be translated into routine practice for 15-20 years, especially with regard to “minority communities and other disadvantaged populations” (AHRQ, 2004, Institute of Medicine, 2001). A major reason for this disparity is that the community is not engaged in applying these efforts. The community has much expertise in understanding these issues, but little access to research design and implementation, let alone researchers who develop projects based on the expressed concerns of community stakeholders.

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