Community Based Participatory Research

Increasing health disparities, especially chronic diseases such as diabetes and heart disease, have prompted increased attention to alternative methods to conduct research within at risk populations. One method that is getting particular attention is community based participatory research (CBPR).

With community based participatory research the research project is developed collaboratively with community partners as opposed to recruiting community participants into a pre-defined research project.

The key principles of CBPR are that it:

- Recognizes community as a unit of identity
- Builds on strengths and resources within the community
- Facilitates collaborative partnerships in all phases of the research
- Integrates knowledge and action for mutual benefit of all partners
- Promotes a co-learning and empowering process that attends to social inequalities
- Involves a cyclical and iterative process
- Addresses health from both positive and ecological perspectives
- Disseminates findings and knowledge gained to all partners

Background

Native Americans have a higher incidence of chronic diseases such as obesity and heart disease of any ethnic group. They are 1.6 times as likely to be obese than non-hispanic caucasians.

California has the largest Native American population and more tribes than any other state. Many community members live in low-income urban areas with limited access to supermarkets that provide a range of healthy food options, or on rancherias and reservations far from major shopping. Developing effective interventions to reduce dietary and associated health disparities can have a significant impact within this community.

Community Projects

Meetings were held with three communities to develop a research project that will address one of the food environment/access issues. Each community developed a research project that met the unique needs of their community.

Many Native American communities in rural areas participate in the federal Food Distribution Program on Indian Reservations (FDPIR). The FDPIR allows eligible Native American members to receive monthly distributions of a bundle of commodities consisting of dry goods, meat, and fresh fruit and vegetables. The total number of servings of fruit and vegetables available to FDPIR participants is equivalent to just over one serving each a day. For those who live on “tailgate” sites far from the distribution centers, the delivery trucks have limited refrigerated space to transport fresh produce. Monthly allocations of fresh produce consist of a sack of potatoes, onions, apples, oranges, and carrots.

Two communities will be conducting a market basket study on the cost and availability of healthy foods in supermarkets based on two-week menus developed by the community members according to their preferences for healthy foods. One community will be comparing those prices to the cost of locally sourcing foods through hunting, gathering, and gardening. The other community will be conducting a consumer survey of shopping behaviors and family resources to better assist community members in accessing healthy foods. The final community is researching policy options to improve the delivery of fresh produce through the FDPIR.