# *Journal of Higher Education Outreach & Engagement*

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# Table of Contents

*Lorilee R. Sandmann*
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## Reflective Essays

*Anna Wasescha*
*Middlesex Community College CT*

To mark the 30th anniversary of Campus Compact, leaders from across the network came together in the summer of 2015 to reaffirm a shared commitment to the public purposes of higher education. Campus Compact's 30th Anniversary Action Statement of Presidents and Chancellors is the product of that collective endeavor. In signing the Action Statement, institutional leaders commit to deepening engagement work that maximizes impact for students and communities by building effective partnerships, preparing students for lives of citizenship, embracing place-based responsibilities, and challenging inequality. They also make a specific commitment to developing a campus civic action plan that makes public how they will implement the principles articulated in the document. As chair of the board of Connecticut Campus Compact, Anna Wasescha was an active participant in shaping the Action Statement; in this President's Essay, she shares her vision for why a compact still matters from the perspective of a community college president.

## Research Articles

*Elizabeth Gagnon*
*Montfort Hospital Research Institute*

*Tracey O'Sullivan and Daniel E. Lane*
*University of Ottawa*

*Nicole Paré*
*City of Québec*

Disasters happen worldwide, and it is necessary to engage emergency management agencies, health and social services, and community-based organizations in collaborative management activities to enhance community resilience. Community-based participatory research (CBPR) has been widely accepted in public health research

as an approach to develop partnerships between academic researchers and community stakeholders and to promote innovative solutions to complex social issues. Little is known, however, about how CBPR partnerships function and contribute to successful outcomes. In this article, the authors present a case study of a CBPR partnership formed with the community of Québec City, Canada, under the Enhancing Resilience and Capacity for Health (EnRiCH) Project, to improve emergency preparedness and adaptive capacity among high-risk populations. This qualitative study presents participants' perspectives on how the partnership functioned and the outcomes of this collaboration. Findings are discussed in relation to contextual and group dynamics, as well as system and capacity outcomes.

*Heather J. Williamson*
*Northern Arizona University*

*Belinda-Rose Young*
*Florida Prevention Research Center*

*Nichole Murray, Donna L. Burton, Bruce Lubotsky Levin, and Oliver Tom Massey*
*University of South Florida*

*Julie A. Baldwin*
*Northern Arizona University*

Community–university partnerships are frequently used to enhance translational research efforts while benefiting the community. However, challenges remain in evaluating such efforts. This article discusses the utility of applying the contextual and interactive model of community–university collaboration to a translational research education program, the Institute for Translational Research in Adolescent Behavioral Health, to guide programmatic efforts and future evaluations. Institute stakeholders from academia and the community completed in-depth interviews querying their expectations and experiences in this collaboration. Key quotes and themes were extracted and analyzed based on the constructs within the 3 phases of the model. The findings note specific themes for future evaluations. Overall, the contextual and interactive model of community–university collaboration proved a useful framework to guide the process evaluation of the Institute. Findings suggest possible strategies for the successful development, evaluation, and sustainability of community–university partnerships.

*Debra L. Schutte*
*Wayne State University*

*Emilie Dykstra Goris*
*Hope College*

*Jamie L. Rivard*
*Michigan State University*

*CoSAGE Community Research Advisement Committee*
*CoSAGE*

*Brian C. Schutte*
*Michigan State University*

The Community-based Cooperative for Studies Across GEnerations (CoSAGE) is a rural community–academic partnership with the long-term goal of developing community- and individual-level interventions to promote community well-being. The purpose of this study was to conduct a community needs assessment to solicit perceptions of the characteristics of the community, health-related resources, health-related barriers, and high-impact health problems and environmental factors. Key informant interviews ($N = 30$) were conducted with community leaders representing schools, businesses, churches, health care providers, and government. Thematic analysis was used to identify common themes across respondents. Church, family, and schools emerged as central community resources. Age-related hearing impairment was endorsed as the highest impact health condition, and lack of jobs was the highest impact environmental factor. These results provide insights into the health-related resources and needs of rural communities. Findings will be utilized to develop and prioritize a community-driven research agenda.

*José A. Santiago*
*Sam Houston State University*

*Jihyun Lee*
*San Francisco State University*

*Emily A. Roper*
*Sam Houston State University*

Contact theory *(Allport, 1954)* served as the framework to investigate undergraduate kinesiology students' attitudes toward children with disabilities after a service-learning (SL) experience. Fifty-one undergraduate kinesiology students enrolled in an adapted physical education (APE) course served as the experimental group, and 31 undergraduate kinesiology students enrolled in an introductory

kinesiology course served as the control group. The Attitudes Toward Disabled Persons Scale–Form A *(Yuker, Block, & Younng, 1970)* was administered at three different times: before, during, and after the SL. A mixed-design ANOVA revealed that there were no statistically significant main or interaction effects for gender, group, and time on the attitude scores of kinesiology students toward children with disabilities. The results suggest that the quantity and quality of contact time with children with disabilities may be important to consider when designing and structuring SL experiences in APE courses.

## Projects with Promise

*Robin S. Everhart*
*Virginia Commonwealth University*

Students participating in service-learning classes experience many benefits, including cognitive development, personal growth, and civic engagement. Student development of empathy is an understudied area, especially with respect to how students develop empathy through interactions in their service-learning placements. This article describes a project designed to pilot teaching tools (e.g., self-assessment, reflective writing) related to empathy development in 12 undergraduate students. This study examined changes in level of student empathy across the semester, critical incidents linked to such changes, factors that enhanced or challenged empathy development, and student metacognition related to empathy. Findings suggest that certain experiences, such as observing the emotional experiences of others or being given more responsibility at a community site, might prompt changes in level of empathy for service-learning students. Strategies for integrating findings from this pilot project into other service-learning courses and future directions for empathy research are also described.

## Dissertation Overviews

*Casey D. Mull*
*University of Georgia*

Unique individuals serve in critical roles in the planning and implementation, institutionalization, and support of service-learning and community engagement within higher education institutions. These individuals, identified as boundary spanners, operate at the nexus of the higher education institution and the selected community. This dissertation focused on development and use of an instrument that

measured a previously developed qualitative model. Results indicated that personal characteristics do not significantly influence boundary-spanning activities; in fact, organizational characteristics were more significant than previously thought. The individual, organizational, and societal implications of these findings, as well as directions for future research, are discussed.

## Book Reviews

**From the Editor…**

# Anniversaries—Time for Reflection and Renewal

Both the *Journal of Higher Education Outreach and Engagement* and Campus Compact are commemorating milestone anniversaries this year. Celebrating such anniversaries provides an opportunity to be reflective as well as prospective. In 1985, the year that Campus Compact was founded, a U.S. first-class stamp cost 22 cents, Microsoft released Windows 1.0, and new Soviet leader Mikhail Gorbachev met with President Ronald Reagan in a conference that laid the foundation for arms control agreements. When the *Journal of Public Service and Outreach* (later to become the *Journal of Higher Education Outreach and Engagement*) appeared in 1996, a first-class stamp cost 32 cents, Microsoft had released Windows 95, Boris Yeltsin became the first democratically elected Russian head of state, and President Bill Clinton won his bid for reelection.

This *Journal* launched its 20th year of publication with a special anniversary issue in March 2016. That issue featured the *JHEOE* articles that had the greatest impact over the past 20 years and provided the opportunity to revisit ideas in those articles in light of today's context as well as offering a prospective frame. Also in March, Campus Compact commemorated its 30 years of "advancing the public purposes of colleges and universities" by holding a special anniversary conference, Accelerating Change: Engagement for Impact; further, its institutional members affirmed a set of commitments and actions to apply the principles articulated in its seminal *Presidents' Declaration on the Civic Responsibility of Higher Education.*

In the opening essay of this issue, "The Meaning of a Compact," Anna Wasescha, president of Middlesex Community College, explores the 30th anniversary of Campus Compact as an opportunity for reflecting, taking stock, and making choices about advancing the public purpose of higher education. She takes us down her personal path and that of the United States and community colleges as a way to share the observations leading to her argument that college and university presidents today need to "change the key" and frame the compelling experiences students have in communities within a framework of civic engagement in a democracy.

Reviewing the other articles in this issue provides additional opportunities for taking stock of our scholarship and practices. The Research Articles and Projects with Promise pieces show striking strength in both the application of community–academic partnerships and community-based research in addressing critical concerns as well as the study of the processes involved in such approaches. Further, it is noteworthy to see the prevalence, creativity, and rigor of such community-engaged scholarly approaches across disciplines and issues. This is quite a change from 20 years ago!

Although we acclaim the attributes of partnerships for community-engaged scholarship and community-based participatory research (CBPR), little is known about how such partnerships actually function and contribute to innovative solutions to complex social issues. In their article, researchers at the University of Ottawa report on the Enhancing Resilience and Capacity for Health Project, designed to improve emergency preparedness and adaptive capacity among high-risk populations. Through this project, they also studied the participants' perceptions of how the university–community partnership functioned during the community-based participatory intervention to improve disaster resilience (asset mapping and the processes that participants used to manage issues related to multisectoral collaboration). Their findings underscore the need for CBPR partnerships to embrace the local context, which shapes both challenges and opportunities for collaboration, by establishing strategic processes for leveraging complementary strengths and dealing with the constraints of time and resources. I also found it exciting to see their findings, consistent with other literature, on the role of conveners and boundary spanners as key vectors of intersectorality that stimulate synergy and innovation between various stakeholders.

A team from the Institute for Translational Research in Adolescent Behavioral Health at the University of South Florida and their community-organization partners tested the application of an interactive and contextual model of collaboration to translational research efforts as a way to promote evidence-based practices. In their study they found considerable overlap of trust and mutual respect and other constructs of the model, demonstrating that it was a core variable of successful partnerships. Research results also affirmed the importance of clear communication, including a shared understanding of scope of the endeavor. Challenges included the extent of the time commitment for all partners and community partner perception of possible disadvan-

tage if results reflect badly on their organization. However, community partners also recognized benefits from the partnership: their agency gained an enhanced reputation in the community as well as a useful product for daily operations.

The combination of grassroots engagement, a CBPR approach, and a needs assessment strategy was particularly powerful and effective for the Community-based Cooperative for Studies Across GEnerations (CoSAGE), an academic partnership with the long-term goal of developing community-level and individual-level interventions to promote community well-being. Through their processes, not only did they elicit the needs assessment that will form a basis for future work, the efforts they report occurred early in the establishment of this community–academic partnership and provided an important trust-building activity, paralleling achievements in the previous article. These early activities supported the ongoing objective of integrating discovery/research, application/translation, teaching, and service. Results from this project are being applied in the development of culturally informed community engagement and a community-driven health research agenda.

In their experimental design investigation of kinesiology students' attitudes toward children with disabilities after a service-learning experience, Santiago, Lee, and Roper found that such experiences did not significantly influence the participants' attitudes toward individuals with disabilities. As a result they caution that instructors cannot assume that service-learning by itself will result in positive attitudinal change toward individuals with disabilities. The authors suggest a need for special attention to the instructional environment: location, duration, frequency, and quality of contact.

The Projects with Promise article in this issue add something new to community–academic partnerships. In work tackling an underexplored area, Robin Everhart shares teaching tools to improve the development of empathy in service-learning students. Service-learning offers a particularly promising opportunity for students to develop empathy, since contact with individuals of different cultural or socioeconomic backgrounds can challenge students to rethink attitudes or beliefs about these differences. Everhart's study focused on specific factors, including specific types of incidents, that tend to increase students' empathy during a service-learning class.

In closing, I'd like to acknowledge the 2 years of service that Dr. Diann O. Jones has provided as one of our managing editors. Her

ability to keep processes on track, along with her dedication and good spirits, will be sorely missed. We also deeply appreciate the diligence of our reviewers, editorial board members, associate editors, and other members of our editorial management team. Thank you all for helping us achieve and celebrate quality scholarship in our anniversary year.

With best regards,
*Lorilee R. Sandmann*
Editor

# Reflective Essays

# *The Meaning of a Compact*

## Anna Wasescha

## Preface

To mark the 30th anniversary of Campus Compact, leaders from across the network came together in the summer of 2015 to reaffirm a shared commitment to the public purposes of higher education. Campus Compact's 30th Anniversary Action Statement of Presidents and Chancellors is the product of that collective endeavor. In signing the Action Statement, institutional leaders commit to deepening engagement work that maximizes impact for students and communities by building effective partnerships, preparing students for lives of citizenship, embracing place-based responsibilities, and challenging inequality. They also make a specific commitment to developing a campus civic action plan that makes public how they will implement the principles articulated in the document. As chair of the board of Connecticut Campus Compact, Anna Wasescha was an active participant in shaping the Action Statement; in this President's Essay, she shares her vision for why a compact still matters from the perspective of a community college president.

## Introduction

Campus Compact's 30th anniversary presents an opportunity to reflect on what it means for American higher education to have a public purpose, to take stock of the path that led us to where we are today, and to make choices about how to strengthen our democracy by prioritizing civic engagement at our colleges and universities. As a community college president, I consider the focus on producing able and enlightened citizens important for many reasons.

I believe my students will shape the future of this country. They are diverse in every way, and many of them are energetic, intelligent, and creative. But their lives are challenging because, for the most part, they and their families are not really secure, at least not financially. When companies close or relocate, these individuals lose their jobs. When technology replaces workers and corporations downsize, students, their families, and their friends and neighbors have to prepare for other lines of work. Many community college students fit the definition that United Way organizations around the country are now using to put a face on this

phenomenon: ALICE. ALICE stands for "Asset Limited, Income Constrained, Employed." These are the working poor.

College has traditionally been a path to the middle class, but the recent long recession coupled with wage stagnation has dimmed the prospects for too many of our graduates. Increasing reliance on loans to finance college has created a 1.3 trillion dollar debt load that lies heavily on the shoulders of students seeking a living wage and a better life for themselves and their families. This situation causes people to lose confidence in institutions they need to trust in order to believe in their country and themselves. A 2015 Gallup poll showed American confidence below the historical average for all but two institutions included in their confidence ratings since 1973. These two exceptions were the military and small businesses. According to Gallup,

> Americans' confidence in most major institutions has been down for many years as the nation has dealt with prolonged wars in Iraq and Afghanistan, a major recession and sluggish economic improvement, and partisan gridlock in Washington. In fact, 2004 was the last year most institutions were at or above their historical average levels of confidence. Perhaps not coincidentally, 2004 was also the last year Americans' satisfaction with the way things are going in the United States averaged better than 40%. Currently, 28% of Americans are satisfied with the state of the nation. *(Jones, 2015, para. 3)*

As confidence in the state of our nation goes, so goes confidence in the public purpose of American higher education. Community college students across the nation, along with students at every other level in the academy, need to believe that college will make a positive difference in their lives, that what they learn in college will prepare them for satisfying careers and an active role in their communities. Employers need to share that belief, as do legislators and thought leaders. The will to believe in this version of the American dream is still strong, but in a democracy, there are many competing wills. The hard work—the work that is never completed—is building unity out of diversity. It is more imperative than ever that leaders of colleges and universities focus on the public purpose of American higher education.

To understand the path that brought us to this critical juncture, it helps me to reflect on my own experiences. In 2009, while I was the provost at a small rural community college in Minnesota, I was

selected to go on a 2-week study tour of colleges and universities in India organized by the U.S.–India Educational Foundation. The community college model was intriguing to the Indian educators we met because it had been successful in providing access to an affordable college education for millions of Americans. In a matter of 50 years or so, it had scaled up across nearly every state and was enrolling thousands upon thousands of citizens who could benefit from higher education in both the liberal arts and occupational training programs. The growing Indian economy has an almost insatiable need for educated workers that the existing system of higher education cannot supply in the numbers required. A system of open access, high quality, low tuition community colleges holds promise for India's burgeoning population.

India is everything I had read about and seen in books and movies. It is ineluctably visual and sensual, full of people, sounds, smells, and colors—a sharp contrast to the snow-covered prairies and far-apart small towns of northwestern Minnesota that were what I had last seen before boarding the plane to Delhi. But the focus of the trip was new to me, and what stood out on the campuses we visited was how prominent political statements were. Posters were everywhere. With a sign that read, "Say NO to Caste-based Reservations," the Youth for Equality group inveighed against the quota system that holds nearly 50% of university seats for protected classes of people. Under a silhouette of Lenin, the left-wing All India Students Association wrote,

> You have given me brotherhood towards the man I do not know. You have given me the added strength of all those living… you showed me how one person's pain could die in the victory of all… you have made me indestructible for I no longer end in myself.

There were posters warning men not to harass women sexually and others emphatic about women's rights in general. One said,

> It is we sinful women who came out raising the banner of truth up against barricades of lies. It is we sinful women now, even if the night gives chase, these eyes shall not be put out. For the wall which has been razed no one can raise it again.

An inscription carved into stone on the front of Arafat Hall at Jamia Millia Islamia says that the university

> feels deep affinity with you [Arafat] because we were also born in struggle during the great national movement launched by Gandhiji in this country against British rule…. The memory of that stirring period in our history still lingers in our mind, and feels close to liberation struggles in all lands.

I came away from India wondering why there were few outward signs of a lingering consciousness about the relationship between our own struggle for democracy and the shape of the system of American higher education that many of us enjoy. Like my contemporaries, I developed my political consciousness during the Vietnam War. My male friends, relatives, and neighbors were subject to the draft. The temporarily lucky ones had deferments to attend college, but ultimately they would also be called up to serve in an unpopular, unwinnable war in a country no one really understood or could locate easily on a map. During the late 1960s and early 1970s, there were political posters everywhere on college campuses. As the frequency and intensity of demonstrations escalated, culminating in 1970 with the shootings of unarmed student protesters, we had become, as Chuck Colson characterized it, "a nation at war with itself" *(Becker, 2007, p. 89).*

Much of what the antiwar protesters had learned about organizing came from the civil rights movement. They were following in the footsteps of visionary and courageous citizens who were willing to put their lives on the line for real democracy, and they in turn were followed by the organizers and citizens who coalesced around women's rights, LGBT rights, and, more recently, the Occupy and Black Lives Matter movements. Somewhere along this arc of American history, the connection between higher education and democracy began to fade from public consciousness.

When I got back to Minnesota, I couldn't help notice the lack of activism at my college. The running conversations there were animated when it came to workforce training programs; cautious about the value of the liberal arts; and barely audible on topics such as political action, student power, community organizing, or the value of courageous conversations about race, gender, poverty, or inequality. This seems anathema to me because community colleges are themselves movements, and generally movements have radical political roots that are still reflected in their organizations

decades after their founding. My ruminations led me to the 1947 report of President Truman's Commission on Higher Education titled *Higher Education for American Democracy*, published, coincidentally, the same year that India gained its independence.

President Truman had many good reasons for appointing the commission. He wanted to press the existing system of higher education into service to the nation by defining its public purpose and then finance its expansion so that it could enroll the millions of Americans who either had been in World War II or had worked to support the war effort. Without a mechanism for educating these individuals and reorienting them to civilian life, he anticipated significant social upheaval and unacceptable levels of unemployment. He named George Zook, the president of the American Council on Education, as chair and appointed educators and others respected for their leadership to positions on the commission. The commission struggled with disagreements about, for example, the propriety of distributing federal aid to private colleges, but they were in accord about the strategic role higher education could play in strengthening democracy. Within a year, they issued a six-volume report that laid the foundation for the system of higher education we have today.

## Renewing the Compact

In 1985, nearly 40 years later, when the presidents of Brown University, Stanford University, and Georgetown University and the president of the Education Commission of the States founded Campus Compact, they were responding to the fundamental charge of the Truman Commission:

> "To preserve our democracy we must improve it." Surely this fact determines one of today's urgent objectives for higher education. In the past our colleges have perhaps taken it for granted that education for democratic living could be left to courses in history and political science. It should become instead a primary aim of all classroom teaching and, more important still, of every phase of campus life. *(President's Commission on Higher Education, 1947, Vol.1, p. 9)*

These presidents knew from direct experience that college students regularly engaged in community service and civic life, but they also understood that this was not the prevailing view of the American public. They rejected the idea that in America, the model

of success was best exemplified by someone like Gordon Gekko ("Greed is good") in the film *Wall Street*, and they set about raising the profile of thousands of college students genuinely, altruistically working to improve the quality of life in their communities. In 1999, addressing similar challenges in a different time, presidents in the Campus Compact drafted the *Presidents' Declaration on the Civic Responsibility of Higher Education (2000)*; in that statement, they wrote:

> Higher education is uniquely positioned to help Americans understand the histories and contours of our present challenges as a diverse democracy. It is also uniquely positioned to help both students and our communities to explore new ways of fulfilling the promise of justice and dignity for all, both in our own democracy and as part of the global community. We know that pluralism is a source of strength and vitality that will enrich our students' education and help them learn both to respect difference and to work together for the common good. *(para. 5)*

Now, in 2016, we presidents in Campus Compact are signing on to the *Campus Compact 30th Anniversary Action Statement of Presidents and Chancellors (2016)* to renew our commitment to the public purpose of higher education in our democracy. Despite all the progress that has been made institutionalizing civic engagement at colleges and universities across the country, the decline in civic participation nationally and the increase in inequality requires a deeper and broader commitment. We pledge to work together to

> build a world in which all students are prepared for lives of engaged citizenship, all campuses are engaged in strong partnerships advancing community goals, and all of higher education is recognized as an essential building block of a just, equitable, and sustainable future. *(Campus Compact, 2016, p. 2)*

These successive iterations of a renewed commitment to the public purpose of higher education championed by Campus Compact are not whispers. But they are competing with the loud voices playing through the speakers of popular American culture. Spliced into the timeline from the 1947 Truman Commission report to the 2016 Campus Compact Action Statement are hundreds of countervailing cultural, social, and political phenomena

that have contributed to diminished public confidence in the role of higher education in our democracy. Four of these stand out for me: the labels we apply to generations of young people—because language is a powerful shaper of perception; the impact of ending the draft; the slogan "It's the economy, stupid"; and the dominance of cable television. On the surface, these may seem like a random group of phenomena, but each one of them is a window into how the public perceives the purpose of American higher education.

## Names as Doors of Perception

First, consider the names we have given to generations of young adults since the end of World War II: Boomers, Hippies, Yuppies, Generation X, Generation Y, Millennials. We settle on these handles and then apply them as a way to simplify our understanding of cohorts of people, especially when they are of traditional college age. The way we understand these groups sets up expectations for what kind of nation they will create when it is their turn to lead. These generational tags are reinforced in all forms of media and then take on life as target markets. The more mass media we consume, the harder it becomes to shake off the biases that these terms reinforce about groups of people who are approximately the same age but may have extraordinarily different life experiences and value systems.

The people the Truman Commission envisioned in college were 1940s Americans pictured in *Life* magazine. The commission was not blind to race, poverty, and rural isolation. In the context of their time, their proposals to end segregated education; enroll women, adults, and part-time students; expand campuses; increase enrollment by the millions; and offer free tuition were radical departures from the status quo. However, it is unlikely that members of the commission would have imagined that the institutions making up the system they were advocating for would become hotbeds of civil unrest, sites of antiwar demonstrations, or places where Old Main would be occupied by protesters and ROTC buildings burned to the ground. Despite all the equal rights and civil rights work that remained to be accomplished, the American people after World War II were united in victory, confident in their government, and secure enough in the present to make significant investments in an even better future for the nation.

These 1940s Americans were the group the journalist Tom Brokaw *(1998)* wrote about in *The Greatest Generation*: World War II veterans, their families, their communities. Robert Putnam

*(2000),* in *Bowling Alone*, explained why they deserved to be called great and why they were so engaged in hard work, citizenship, and volunteerism. This stereotype of the "greatest generation" means different things to different people but, on balance, it suggests that this cohort of Americans added significant value to our society. The terms applied to generations who followed were not as generous. From the boomers of the 1950s to hippies of the 1960s to the current generation of millennials, these people have been portrayed as not caring about success as defined by the "establishment," concerned only about their own ambitions, deluded into believing they were all above average, as having given up on social institutions and norms of behavior and dress or having tethered themselves to a computer. Since the 1960s and 1970s, the lack of confidence in government, in college students, and in higher education institutions, although not universal and not completely justifiable on the basis of data, permeates the culture of our country. We ourselves have a confidence gap, and we need to close it.

## The Draft Closes and College Opens

The Selective Service transitioned to a lottery system in December 1969. Based on date of birth, the lottery distributed the possibility of military service randomly across the population, easing the class divide between those who could afford college and those who could not. Student deferments ended in 1971, and the draft itself ended in 1973. Across this time period, the popular image of college students began to shift. The draft was over, but campus unrest was not. Nearly a decade of antiwar activism on college campuses had created a strong social mechanism for opposition politics that survived. Students channeled their energy into multiple other social justice campaigns around, for example, reproductive rights, equal opportunity, inclusiveness, and LGBT rights. Whereas the Truman Commission had earlier called for area studies as a means of learning about the rest of the world, students in the 1970s demanded that ethnic studies and women's studies be added to the curriculum as one way to empower marginalized groups. When the draft was in place and the war was escalating, there had been one riveting focus. When that tide turned, students had the skills to mobilize around many different causes.

At the same time student power was diffusing, the expansion of higher education, especially at the community college level, created other changes. College was no longer a refuge for men seeking to avoid the Vietnam War. Nor was it any longer an exclusive club for the rich and well-born. Community colleges were designed to

enroll commuters, part-time students, adults, parents. Financial aid at those colleges made enrollment possible for students without the means to pay the tuition out of their own pockets. In addition, because the baby boom generation was ending, enrollments of traditional-age students started naturally to decline, causing many colleges to transition from being highly selective institutions building their reputations by keeping students out to highly responsive institutions devising systems to draw students in.

If a person on the street had been asked, "Who are America's college students?" the answer in the decade after the draft ended would have been vastly different from that given the decade before. They were no longer mostly male, mostly privileged, mostly White. They had become anyone and everyone. The college deferment system was created because "modern nations, to survive in peace or war, must have an adequate number of scientific, professional and specialized personnel in both civilian and military pursuits" *(Frusciano, 1980, p. 22).* These people were the elite, by definition. They were the best and the brightest, and the government could trust them with the safety and security of the entire United States. This is why most Americans accepted the practice of deferring military service for them. Once anyone and everyone could get in, college attendance ceased being a mark of distinction. And in that fade-out, colleges lost a reputation they had enjoyed in the first half of the 20th century, that they were the institutions that produced the people who were indispensable.

## It's the Economy, Stupid

A third paradigm-shifting milestone was the arrival of the slogan "It's the economy, stupid" as a permanent part of the American lexicon. James Carville, Bill Clinton's campaign manager, coined it in 1992, and it quickly became a "that says it all" meme passed from one person to another as a shorthand explanation of how the system really works in this country. Candidate Clinton frequently reminded Americans that "a rising tide lifts all boats" to reinforce the message and aptly, he oversaw an economic turnaround. But presidents are thought leaders, and they can influence the national dialogue in ways that no one else can. The Truman Commission espoused the concept of democracy as more important than anything else: It was a matter of conviction tantamount to a secular religion that motivated innovation, was an engine of social mobility, and was the one thing that had the potential to unify a heterogeneous global society. Roosevelt and then Truman oversaw an extended period in our history when government funding not

only fueled the economy, but also healed a society nearly broken by the Great Depression. By the time President Clinton came to office, however, government had been widely accepted as the problem and capitalism—as reflected in Calvin Coolidge's rendering, "The business of America is business"—was the solution.

In India, the lingering memories of the struggle for democracy are still visible and still inform the national identity. People remember the oppression of living under British rule. In America, any awareness of our colonial experience is hard to detect in the signs and symbols of our popular culture. Our dreams, as we decode them from slogans and mass media depictions, are now more about the acquisition of wealth and power than about "we the people" working "to form a more perfect union." Legislators are representatives of the people and, for public institutions especially, they are the source of significant levels of funding. They have exerted pressure on colleges and universities to respond to what their constituents say they want, which for decades has been career preparation (even the kind one receives in a liberal arts college) and workforce training, all aimed at ensuring economic security.

For community college students, many of whom are economically insecure, this single-minded focus on preparation for work is a life preserver. It resolves a real and immediate need. But the quality of the life that it saves depends on the effective functioning of our democracy. The Truman Commission put it this way:

> Democracy is much more than a set of political processes. It formulates and implements a philosophy of human relations. It is a way of life—a way of thinking, feeling, and acting in regard to the associations of men and of groups, one with another…. The fundamental concept of democracy is a belief in the inherent worth of the individual, in the dignity and value of human life. Based on the assumption that every human being is endowed with certain inalienable rights, among which are life, liberty, and the pursuit of happiness, democracy requires of its adherents a jealous regard, not only for their own rights, but equally for the similar rights of others. *(President's Commission on Higher Education, 1947, Vol. 1, p. 11)*

Yes, there are a lot of loud voices in the room, but college presidents can ground the conversation by returning to first principles, to the

importance of educating students not only for work but also for active engagement as citizens.

## Fair and Balanced on 2000+ Channels

The last on my list of four phenomena that have weakened public confidence in the public purpose of higher education is the effect of cable television on the critical reasoning skills of Americans. Sixty-five million Americans are now subscribers. The average American watches 28 hours of television per week. By age 65, this average American will have been watching television for the equivalent of 9 years full-time and will have seen two million commercials *(Sound Vision Staff Writer, n.d.).*

Viewers can watch whatever channels they wish. If they tune in only to those programs that reflect their values, what they see reinforces their beliefs, no matter how ungrounded in reality those might be. Unlike college, cable television does not force anyone to encounter views that are different from their own, nor does it develop in anyone the skills of analysis or the ability to examine evidence critically. There is no active and collaborative learning, no question-and-answer period between the program and the audience, no dialogue except what goes on within the four corners of the screen. And perhaps worst of all, there is no obligation to be right on facts, clear on sources, or honest in interpretation. Anything goes on cable television.

Early in the 1980s, an FCC chair who had been a campaign staffer for President Reagan, Mark S. Fowler, wrote a report arguing that the "fair and balanced" requirement for a broadcast license was atavistic because cable television had expanded so much that by definition people had access to opposing views. He also thought it was a violation of First Amendment free speech rights. Fowler's position was that "the perception of broadcasters as community trustees should be replaced by a view of broadcasters as marketplace participants" *(Holt, 2011, p. 55).* By 1987, the Federal Communications Commission (FCC), under a new chair, Dennis R. Patrick, ended the provision requiring "fair and balanced" reporting over the airwaves.

Television started out as an industry that was a twin good: It performed a public service and provided entertainment. These are American airwaves over which networks transmit their signals and originally, it seemed only fair that the public get something in exchange. Public television, for example, was part of the grand

bargain, as was the Emergency Broadcast System and the practice of dedicating airtime to the news and to children's programming.

Cable television in its present form is the most effective public education system in America. We may not endorse it as education, but it is instructing nonetheless. It captivates its viewers for more hours in an ordinary week than most college students spend in the classroom and on homework. And in its present form, it plays a role in eroding confidence in major institutions of our democracy. There is a reason Americans have so little confidence in the presidency, the Congress, and the Supreme Court, and it is not driven by deep conversations around seminar tables.

## Changing the Key

In May of 1971, the University of Minnesota, my alma mater, ran a special report in their *Alumni News* titled "Are Americans Losing Faith in Their Colleges?" The article pointed to the fact that Congress and state legislatures, formerly favorable toward investment in higher education, had become increasingly less so. In response to this question, the writers concluded that

> the majority must also rethink and restate—clearly and forcefully—the purpose of our colleges and universities. It has become clear in recent years that too few Americans—both on and off the campus—understand the nature of colleges and universities, how they function, how they are governed, why they must be centers for criticism and controversy, and why they must always be free. *(Are Americans Losing Faith, 1971, p. 33)*

That was 24 years *after* the Truman Commission report "clearly and forcefully" made the case for the public purpose of higher education and the potential for it to reach millions more Americans, thereby ensuring that this nation would maintain its position as the "leader of the free world."

The presidents who founded Campus Compact in 1985 and the presidents who now sustain the organization in 2016 share democratic ideals about the public purpose of American higher education. We have experiences in our daily lives on campus that prove that American college students are engaged in their communities, have great potential for civic engagement, and are optimistic about the future. "Education is the making of the future," as the Truman Commission report *(President's Commission on Higher Education, 1947, Vol. 1, p. 6)* asserted, and those of us leading colleges and universities

believe in the nobility of the work for exactly that reason. We can and do help to shape the narrative about colleges and their students by what we write and say about our institutions and the impact we have on the lives of those who enroll. But we can do better.

The United States may be one of the most enduring democracies in history, but India is far and away the largest democracy in the world. Leaders there see that education is the making of their future, too. Many of the individuals I met in 2009 had studied in America and had taken home with them a positive opinion about American higher education. India is building a strong capitalist economy, but the struggle for democracy is fresh enough in their minds that they are also passionate about sustaining it through their colleges and universities. That was evident at all the campuses I visited.

The lesson that I brought back with me from India is that it is unwise, even perilous, to let time dim the memory of higher education's purpose in a democracy. If we lose sight of this purpose, all that remains in the value proposition is an economic argument. Democracy tempers capitalism with its insistence on equality and inclusion and its focus on the common good. Back at my campus in rural Minnesota, we did not have a center for civic engagement or any kind of program that promoted service-learning in the community. We paid little attention to the relationship between our college and the health of our democracy. While I was in India, the Red River rose 40 feet over flood stage, and hundreds of students, faculty, and staff labored mightily around the clock to fill a portion of the three million sandbags that were needed. There were thanks all around after that event, but there was no overlay of narrative about how mobilizing a college community in an emergency was a powerful experience of democracy in action or how citizens can be inspired to set aside individual needs for the benefit of the community as a whole. That is what presidents can do. They can change the key. When they tell the stories about powerful, shared experiences that affect our college communities, they can place them within the framework of civic engagement in a democracy.

At a recent Campus Compact gathering in Boston, the compelling story that retired General Stanley McChrystal told was that most Americans now believe citizenship means just two things: paying taxes and voting. And only one in three eligible voters does the latter. McChrystal is working on Service Year, a project to engage young adults in a year of meaningful service. It is not the draft, but it has elements of it because its expansion will lead to more and more young Americans' dedicating a year of their lives

to the common good. This experience of giving back, of serving society, unifies fellow citizens. Together with the Peace Corps and VISTA, Teach for America, City Year, and "gap years" of all kinds, this movement has the potential to change our culture, to challenge our stereotypes about upcoming generations of college students.

There are other signs that the civic engagement movement is taking hold. More and more colleges across the country have staffed centers for civic or community engagement, included civic engagement in their strategic plans, and supported faculty professional development opportunities on how to include service-learning in academic courses. Results from the 2015 American Freshman Survey "point to the highest level of civic engagement in the study's 50-year history," according to a recent article in *Inside Higher Ed*.

> Nearly 40 percent of students said that becoming a community leader is a "very important" or "essential" life objective for them. About 60 percent of incoming freshmen rated improving their understanding of other countries and cultures as just as important. Both were all-time highs for the categories. *(New, 2016, para. 15)*

American colleges and universities are unique in the world. They combine preparation for a life of work with broad exposure to the liberal arts. They seek to prepare well-rounded, whole human beings with the capacity to love and to work, to be good family members, neighbors, friends, and citizens. Inside and outside the classroom, faculty and staff guide students in making meaning from their collective memories and reflections, histories, connections to other people around the world struggling for self-rule, and informed points of view about subjects and whole disciplines. College and university presidents themselves are in a unique position. We can frame the purpose of our institution around citizenship as the foundation for all else that follows. That is our enduring compact with our students, our institutions, and our nation.

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## About the Author

**Anna Wasescha** is president of Middlesex Community College CT. Prior to her taking on this role in 2011, she was provost at Minnesota State Community and Technical College in Fergus Falls. In her career in higher education, she has worked in both student and academic affairs, in two and four-year institutions, in both public and private sectors. Community colleges are an expression of core values that have inspired Wasescha throughout her career: equality of opportunity, social justice, and education as liberation. Wasescha has an undergraduate degree in English Literature, a master's degree in higher education, and a doctoral degree in educational policy and administration, all from the University of Minnesota.

# RESEARCH ARTICLES

# Exploring Partnership Functioning Within a Community-Based Participatory Intervention to Improve Disaster Resilience

Elizabeth Gagnon, Tracey O'Sullivan, Daniel E. Lane, and Nicole Paré

## Abstract

Disasters happen worldwide, and it is necessary to engage emergency management agencies, health and social services, and community-based organizations in collaborative management activities to enhance community resilience. Community-based participatory research (CBPR) has been widely accepted in public health research as an approach to develop partnerships between academic researchers and community stakeholders and to promote innovative solutions to complex social issues. Little is known, however, about how CBPR partnerships function and contribute to successful outcomes. In this article, the authors present a case study of a CBPR partnership formed with the community of Québec City, Canada, under the Enhancing Resilience and Capacity for Health (EnRiCH) Project, to improve emergency preparedness and adaptive capacity among high-risk populations. This qualitative study presents participants' perspectives on how the partnership functioned and the outcomes of this collaboration. Findings are discussed in relation to contextual and group dynamics, as well as system and capacity outcomes.

## Introduction

R ecent Canadian disasters, such as the Alberta floods and the Lac-Mégantic, Quebec, train derailment and explosions, as well as Typhoon Haiyan in the Philippines, have shown the potential to widen health disparities in populations by creating a substantial gap in the ability of people to prepare for, respond to, and recover from adversity *(Kailes & Enders, 2007)*. The term high-risk populations refers to people who could be at greater risk of experiencing the negative impacts of natural disasters and chemical, biological, radiological, nuclear, and explosive (CBRNE) events, due to functional limitations influencing their ability to cope *(Enarson & Walsh, 2007; O'Sullivan & Bourgoin, 2010)*. Examples of high-risk groups include individuals affected by acute or chronic physical or mental disabilities, visible minorities, pregnant women, children, elderly people, the homeless, the economically disadvan-

taged, immigrants, refugees, tourists, and those with lower literacy levels or lacking fluency in the local language *(Enarson & Walsh, 2007; Kailes & Enders, 2007)*. These population groups present a diversity of needs, which may include support for core functions such as communication, transportation, functional independence, medical requirements, and supervision *(Kailes & Enders, 2007)*. Careful consideration of these needs is central to creating an all-inclusive approach to emergency management in order to promote disaster resilience *(Kailes & Enders, 2007; O'Sullivan, Toal-Sullivan, Charles, Corneil, & Bourgoin, 2013)*.

Hurricane Katrina, which hit New Orleans in August 2005, is one salient reminder of how natural disasters can significantly impact high-risk populations. Zakour *(2015)* points out that "over 23% of the population of New Orleans affected by Katrina were individuals with a disability" *(p. 2)* and that a disproportionate number of fatalities attributed to the hurricane were among the elderly and individuals with a preexisting disability, such as mobility impairment. These groups were found to have limited access to information, emergency warnings, and adequate shelter *(Zakour, 2015)*. The unique sensory, perceptual, cognitive, and physical challenges facing people with disabilities significantly affect their ability to receive, assimilate, and act on life-saving information. Using the 2004 South Asian tsunami as an example, Sullivan and Häkkinen *(2011)* expand the concept of high-risk populations by including tourists who, while transiting a foreign country, can find themselves situationally impaired due to linguistic and cultural barriers. These examples illustrate the importance of developing preparedness and warning systems for populations with special needs. Sullivan and Häkkinen anticipate that by bringing greater attention to the requirements of high-risk groups, disaster preparedness in the population at large could be improved.

In the United States, the Federal Emergency Management Agency (FEMA) proposes that risk can be mitigated by adopting a "whole-community approach" that engages and empowers all segments of society in order to enhance resilience and adaptive capacity for health *(2011)*. Under this whole-community approach, emergency management does not fall solely within the competence of national governments, but is the shared responsibility of all levels of government, nongovernmental organizations, the private sector, individuals, families, and communities *(FEMA, 2011)*. Similarly, community-based participatory research (CBPR) embodies a partnership approach to research that seeks to engage a wide variety of stakeholders when addressing complex health and social issues,

and to draw upon a range of knowledge and expertise for innovative solutions *(Israel, Schulz, Parker, & Becker, 1998)*. The key value underpinning a partnership approach, as advocated by FEMA and CBPR initiatives, is collaboration. Collaboration creates potential for synergies and innovation, as it enables partners to pool their knowledge, skills, and resources and use them in new ways *(Jones & Barry, 2011)*. It is widely accepted that collaboration enables more effective accomplishment of collective goals than is possible for any single individual, organization, or sector *(Corwin, Corbin, & Mittelmark, 2012; Gray, Mayan, & Lo, 2009)*.

CBPR involves close collaboration between academic and community members to develop and implement culturally centered public health interventions *(Sandoval et al., 2012)*. The CBPR approach has found application in a number of research initiatives aiming more specifically at building disaster resilience. The Communities Advancing Resilience Toolkit (CART) intervention *(Pfefferbaum et al., 2013)* is one good example. CART is a theory-based, evidence-informed intervention that consists of a strategic and highly collaborative planning process for building community resilience to disasters and other adversities. CART provides assessment tools to examine information about community assets and challenges in the context of disaster management, but its application can expand to other concerns such as community violence, suicide, epidemic, or recession. Although the specific adversity that concerns the community can vary, CART efforts share key elements that describe and affect resilience: connection and caring, resources, and transformative potential. These elements interact with each other in a process of skill and relationship building that can create the potential for profound community change.

Many studies have demonstrated great promise in the CBPR approach; however, there is a need for more in-depth understanding of the processes describing potential pathways to outcomes of CBPR interventions and partnerships *(Sandoval et al., 2012; Wallerstein et al., 2008)*. Wallerstein et al. provide a conceptual logic model to map CBPR partnership processes around four interrelated dimensions: (1) context, (2) group dynamics, (3) the intervention and/or research design, and (4) outcomes. This model is based on an extensive literature review summarizing the state of knowledge about CBPR characteristics; it was developed in consultation with a national advisory committee of CBPR experts, community members, and researchers.

The model suggests that the *context* that frames any CBPR partnerships encompasses the following subcomponents: socio-

economic, environmental, and cultural factors; national and local policies and trends; historical contexts of collaboration; the community's capacity for research and creating change; the university's capacity for research; and the perceived seriousness of the health issue at stake. These components combine to provide the specific background, including contextual facilitators and barriers, within which CBPR work operates. *Group dynamics* represent the second overarching dimension of the model and refer to how CBPR practice occurs at the individual, structural, and relational levels. Dynamics at work at the individual level include, inter alia, the varying levels of motivation or readiness to change among partnership members. *Structural dynamics* refers to aspects such as the nature, diversity, and composition of the partnership group, as well as the agreements and resources used to govern and manage the collaborative work over time. At the core of interactive and interpersonal processes are relational dynamics, which contribute to shaping the identity of the partnership and the roles of its community and university members.

*Contextual and group dynamics* factors lead to the intervention, which is the third dimension of Wallerstein et al.'s *(2008)* logic model and the major independent variable leading to CBPR outcomes. CBPR interventions are most often initiated by university members, but their implementation requires ongoing consultation and collaboration with the community to ensure that local needs are met and resources are being used in a culturally sensitive way. CBPR interventions represent opportunities for knowledge exchange and translation related to the issue at stake, strengthening the connection between the university and the community, and fostering collective change. The fourth and last dimension of the logic model is CBPR *outcomes*, which are further divided into intermediate and long-term outcomes. Examples of intermediate outcomes include new or renewed institutional policies and practices in both the university and community contexts, resulting from shared learning and the integration of diverse knowledge. Intermediate outcomes may also take the form of more equitable relationships. In the long run, these changes may contribute to improved health outcomes and a reduction in health inequalities.

The Enhancing Resilience and Capacity for Health (EnRiCH) Project is a research initiative led by researchers at the University of Ottawa that focuses on increasing community resilience and adaptive capacity among high-risk populations *(O'Sullivan, Corneil, Kuziemsky, Lemyre, & McCrann, 2013)*. It was launched as a CBPR project in 2009 with an advisory panel of 18 governmental, non-

governmental, community association, and academic members from across Canada. Between 2010 and 2013, the EnRiCH Project introduced an asset-mapping intervention in five Canadian communities to explore community supports and new partnerships that could contribute to strengthening emergency preparedness and resilience of high-risk populations. Over the course of the project, the advisory panel expanded to include over 40 Canadian and international partners who were committed to working in partnership to establish emergency preparedness processes that are inclusive of persons with functional limitations.

The current research was undertaken as part of the EnRiCH Project and involved a case study highlighting the experience of participants who took part in the asset-mapping intervention in the geographical community of Québec City. The purpose of this article is to explore participants' perceptions of how the university–community partnership functioned during the intervention and the processes that participants used to manage issues related to multisectoral collaboration. The CBPR logic model by Wallerstein et al. *(2008)* provides a framework to discuss the processes most salient in the EnRiCH–Québec City partnership.

## Method

The following section discusses methodological aspects of the study: research design, the EnRiCH–Québec City partnership, the EnRiCH intervention protocol, data sources, study sample, and data analysis.

## Research Design

The EnRiCH asset-mapping intervention in Québec City was conducted between 2011 and 2013. A qualitative case study approach was used to explore and describe the perceived functioning of the partnership and the processes that were used to ensure inclusion of a broad range of expertise to support the collaborative work. The research incorporated a longitudinal design featuring three waves of data collection to assist in understanding the process dynamics of collaboration and the intermediate change outcomes for the partnership.

## The EnRiCH–Québec City Partnership

Throughout 2010 and prior to the asset-mapping intervention, the EnRiCH research team developed entry into the Québec City community by consulting key members of the disability and emer-

gency management networks, as well as other public and private stakeholders, to assess the relevance of implementing this type of intervention. 211 Québec Regions was a key community partner that helped the EnRiCH research team promote the implementation of the intervention through the active recruitment of community stakeholders.

211 Québec Regions is the first French-language 211 service in North America and provides information and referral to a full range of community, social, and government services to connect people with the resources and support they need *(211 Québec Regions, 2013)*. Prior to EnRiCH, 211 was actively seeking out opportunities for collaboration with the Municipality of Québec City with regard to emergency preparedness issues. As in other urban centers, emergency preparedness entities in Québec City have struggled to link high-risk population groups and community associations with disaster management expertise as a way to develop a more integrative approach to assist people with functional limitations before, during, and after disasters. 211 therefore perceived the EnRiCH Project as an opportunity to reach out and connect to key stakeholders within the community, and thereby to improve high-risk populations' preparedness for disasters. The Municipality of Québec City also showed early interest in and commitment to the EnRiCH Project and rapidly seized the opportunity to lead the intervention in Québec City along with 211.

Following a year of consultation and planning, the asset-mapping intervention was designed and launched in the community of Québec City through a university–community partnership, here referred to as the EnRiCH–Québec City partnership. The partnership included representation from municipal and regional emergency management, public health, tri-services (i.e., fire, police, and paramedic), academia, and associations advocating or providing direct care for people living with functional limitations. Throughout the intervention, the role of the EnRiCH research team was to encourage the community to take ownership of the project and develop its own capacity to advance the issue of emergency preparedness and high-risk populations. Trust and open communication between the research team and the community were key for fostering engagement and developing a vision of how the project could collectively evolve to respond to the local context. The methodological framework and technical support for the asset-mapping intervention provided by the EnRICH research team empowered the community members with the tools, skills, and confidence to adapt the project to their specific needs.

# The EnRiCH Intervention Protocol

Participants were recruited upon approval from the University of Ottawa Research Ethics Board using purposeful and snowball sampling, as outlined by Creswell *(2007)*. Each participant signed a consent form before taking part in any of the data collection.

Table 1 presents an overview of the EnRiCH intervention protocol in Québec City, including information about the research intervention events, dates, locations, numbers of participants, and data collection design. The intervention consisted of two distinct components. The first component was an asset/need assessment to determine the strengths, weaknesses, opportunities, and threats (SWOT) of each target community for addressing the issue of emergency preparedness in high-risk populations. It was conducted in the form of a focus group session, using the Structured Interview Matrix (SIM) as a facilitation technique to promote inclusive and equal participation *(O'Sullivan, Corneil, Kuziemsky, & Toal-Sullivan, 2014)*.

The second component of the intervention (see Table 1) was the collaborative asset-mapping exercise, which included three phases: (1) an orientation session as a focus group, (2) a 10-week online collaborative asset-mapping task, and (3) a tabletop exercise as a focus group. During the orientation session, participants were introduced to the CHAMPSS Functional Capabilities Framework *(O'Sullivan et al., 2013)* and instructed in the use of Google Docs as an online collaborative tool to enable the execution of the asset-mapping task. Following the first focus group session, participants worked through remote online collaboration during the 10 subsequent weeks to populate an asset-mapping spreadsheet and determine how the asset database would be used to promote resilience and preparedness in their community. The final phase consisted of a tabletop exercise focus group during which participants were asked to work through a locally relevant disaster scenario to assess and improve the community's capacity to meet the needs of high-risk populations during disasters *(O'Sullivan et al., 2013)*.

At the request of the Québec City participants, it was decided to extend the EnRiCH intervention to include a follow-up phase in order to assess the impact of the partnership work and discuss the sustainability of the collaboration. This involved hosting another focus group session to conduct a cost–benefit analysis to determine whether the benefits of engaging in multisectoral collaboration for emergency preparedness outweigh the costs of time and energy that such involvement may require from participants.

**Table 1. Overview of the EnRiCH Intervention Protocol in Québec City**

| Intervention Events | Event Description | Number of Participants |
|---|---|---|
| **Component 1:** *Asset/Need Assessment* | | |
| **Asset/Need Assessment Session**<br>Date: March 30, 2011<br>Location: Hôtel Pur, Québec City | • Full-day facilitated focus group session using the Structured Interview Matrix (SIM) *(O'Sullivan et al., 2014)*<br>• Asset/need assessment focused on emergency preparedness and the protection of high-risk populations in this community | *n* = 25 |
| **Telephone Interview 1** November 2011 - January 2012 | | *n* = 26 |
| **Component 2:** *Collaborative Asset-Mapping* | | |
| **Phase 1: Orientation Session**<br>Date: March 1, 2012<br>Location: Hôtel Delta, Québec City | • Full-day facilitated focus group session<br>• Presentation of the CHAMPSS Functional Capabilities Framework *(O'Sullivan, Toal-Sullivan, Charles, Corneil, & Bourgoin, 2013)*<br>• Training on the use of the online collaborative asset-mapping tool (Google Docs) | *n* = 22 |
| **Telephone Interview 2** March - April 2012 | | *n* = 18 |
| **Phase 2: Asset-Mapping Task**<br>Date: March - May 2012<br>Location: Online collaboration | • 10-week asynchronous process to develop the asset database remotely through Google Docs<br>• Identify and learn about assets (organizations, programs, services) in the community | N/A |
| **Telephone Interview 3** May 2012 | | *n* = 14 |

| | | |
|---|---|---|
| Phase 3: **Tabletop Exercise Session**<br>Date: May 25, 2012<br>Location Hôtel Delta, Québec City | • Half-day (4.5 hr) facilitated focus group session<br>• Tabletop exercise using a train derailment scenario to test knowledge of emergency planning protocols, risks, hazards, and community assets | *n* = 23 |
| **Telephone Interview 4** June 2012 | | *n* = 13 |
| Phase 4: **Follow-up Session**<br>Date: November 22, 2012<br>Location: Hôtel Delta, Québec City | • Half-day (4.5 hr) facilitated focus group session<br>• Assessment of the EnRiCH intervention through a cost–benefit analysis | *n* = 19 |
| **Telephone Interview 5** November 2012 - January 2013 | | *n* = 16 |

As indicated in Table 1, five telephone interviews were conducted over the course of the EnRiCH intervention; each focus group was followed by an interview to track participants' perceptions of how the collaboration was being developed and organized among partners.

## Data Sources

In this study, we used data gathered from the fourth and fifth set of telephone interviews and the follow-up focus group session. We chose these data sources to reflect as closely as possible the level of development achieved by the EnRiCH–Québec City partnership and to report on core partnership functioning processes and intermediate change outcomes arising from the intervention period.

The investigators of the EnRiCH Project developed a semistructured interview guide that was used to conduct all telephone interviews during the intervention. Some questions followed a ranked 5-point Likert scale (with 5 being the highest), and others were open-ended. Additional probes were incorporated throughout the process to capture emerging dynamics of partnership functioning. Each telephone interview was 30-45 minutes in duration and was audio-recorded with the participant's permission. Sample questions from the interview guide included "Please rate your sense of belonging to this EnRiCH collaborative group in your community using the 1 to 5 rating scale"; "Please describe how this collabora-

tive group has structured itself"; and "In the past month, have there been any major changes in the direction this collaborative group is going?" The first author and an EnRiCH research assistant conducted all of the interviews in French.

The follow-up focus group session was conducted in the form of a cost–benefit analysis. Data were collected using two audio recorders at each discussion table. The time spent on site by the first author permitted nonparticipant observations of real-time events, fostered the development of trusting relationships with the participants, and provided a greater sense of the dynamics qualifying the partnership. Sample questions from the cost–benefit analysis included "What benefits, if any, did you get from your involvement with EnRiCH?" and "What are the costs of getting involved in a project like EnRiCH?" The focus group was conducted in French by an EnRiCH research associate.

## Study Sample

The sample for this study represented the group of participants who attended the follow-up session and those who completed the fourth or the fifth interview (or both). A total of 23 participants were purposefully selected. The sample resulted in a mix of returning participants who had been involved in previous phases of the intervention and new recruits who were identified by the participants as potential contributors having expertise related to the issues being discussed. The new recruits were mostly participants' work colleagues who had been informed about the EnRiCH Project via word of mouth. Table 2 displays participant demographics, including the types and roles of the participating organizations.

**Table 2.** *Participant Demographics*

| Organization Type | Organization Name |
|---|---|
| Independent (n =1) | • Information and Referral Services (211 Québec Regions) |
| Governmental (n = 13) | • Ville de Québec<br>• Agence de la santé et des services sociaux de la Capitale Nationale<br>• Fire department<br>• Office du tourisme de Québec<br>• Service de police de Québec<br>• Ministère de Sécurité Publique du Québec<br>• Ministère des Transports du Québec |

| Parapublic (n = 1) | • Université de Laval |
|---|---|
| NGO (n = 8) | • Regroupement des personnes handicapées de la région 03 (Capitale-Nationale) |
| | • Regroupement des personnes handicapées visuelles |
| | • Mouvement Personne D'Abord du Québec Métropolitain |
| | • Société Canadienne du Cancer |
| | • Centre d'Action Bénévole de Québec |
| | • Croix-Rouge Canadienne, Division du Québec |
| | • Service d'entraide communautaire Rayon de Soleil |
| | • Centre communautaire l'amitié |
| Total = 23 | |

## Data Analysis

Interview and focus group data were divided into two levels of analysis. The first level of analysis was the data from the fourth and fifth set of interviews. Following transcription and accuracy checks, the transcripts were coded by the first author using directed content analysis to create a coding grid incorporating both deductive and inductive codes *(Hsieh & Shannon, 2005)*. An initial examination of the transcripts allowed highlighting of all text referring to dynamics of partnership functioning and their influence on the outcomes of the EnRiCH intervention. The highlighted passages were then coded using a provisional list of deductive codes based on findings from the literature on CBPR and partnership functioning. An inductive coding process was also used to identify emergent themes and develop higher-level pattern codes suggesting thematic relationships between chunks of data *(Miles & Huberman, 1994)*. The second level of analysis was on the data from the follow-up focus group session, supplemented by nonparticipant observations. Coding was performed using the grid developed from the interview transcripts, and additional nodes were added as needed. Preliminary themes were identified and then discussed and revised until consensus was reached.

Data analysis for this study had two primary objectives. The first was to explore the participants' perceptions on how the university–community partnership functioned and what outcomes it had. The second was to provide a secondary analysis and conceptual

model of the dynamics of collaboration influencing the creation of synergy within the EnRiCH–Québec City partnership. The latter topic will be reported in a subsequent article.

# Findings

The findings of this study are presented under the rubrics of five core themes reflecting processes and intermediate change outcomes of the EnRiCH intervention that the participants perceived as key determinants of the ability of the partnership to work toward its purpose.

## Theme 1: Emergency Preparedness Resonated With Local Concerns and Values

Participants attached considerable importance to the issue of emergency preparedness because of its wide-ranging implications for public safety and health. Many surrounding areas of Québec City have faced a growing number and complexity of disasters in recent years, and participants' knowledge of the consequences contributed to a heightened sense of urgency in getting the community ready to respond to the unexpected impacts of threats. As described by one governmental participant:

> In recent years, we've grappled with many catastrophes. We thought we were immune to that sort of thing. So, what happened in the Richelieu region [the floods] was a sort of call to arms. We were confronted with something that never occurred before. All we had before were snowstorms!

Moreover, some participants remarked that the EnRiCH intervention was taking place at a time of growing political attention to public security in Québec City. As indicated by another governmental participant, the culture of public security seemed to be present more than ever before:

> But the culture of public security and the issue public security are ever present now, and that wasn't the case before. The [Québec] Ministry of Health formally announced in May that public security was an important matter and that it intended to draft a ministerial plan to deal with it. It's a first, you know, and it makes the whole concern with public security all the more

legitimate—and it sends a clear message that every institution and organization has to be "prepared."

Authorities' support for the overall goal of enhancing public safety and security in Québec City was perceived as giving credibility and legitimacy to the EnRiCH community-research initiative. This support also elicited strong and sustained participation from public authorities throughout the intervention, increasing the perception that the issue was worth addressing. As stated by one of the governmental participants, the public authorities' commitment was a good indication of the interest and readiness to sustain the collaborative efforts surrounding the issue:

> What's more, the people who run Québec City, well, they are at the table. So, if they are involved, it gives the project a whole lot of credibility.… And, you know, these folks, well, they don't have a lot of time to waste, so if they are investing their time in this, it means they have an interest in seeing the whole thing continue.

## Theme 2: The Collaborative Structure Emerged in Response to Contextual Challenges

The collaboration revealed differences in power between public organizations and community-based NGOs. The differences were attributed to a long history of competition for scarce resources between NGOs, making them often reliant on project funds from the government. Because of this history, a governmental participant attributed some members' collaboration with governmental organizations as part of the EnRiCH Project to self-interest and the desire to receive greater attention from stakeholders that finance their work.

> It's as if there's a battle for grants, and I detect that in my work. Like, they [the community organizations] are out more to prove something. Sure, they are all willing, but I get the impression that because I'm from the City, they are sending a lot of messages. Anyway, there are conflicts, but conflicts we realize that were already around—we could sense them, but they are nothing new.

The current context of scarce resources in the nonprofit sector also influenced NGOs' level of commitment in the collaborative process. There was an observation among participants that the involvement of this sector was decreasing gradually over the course of the EnRiCH intervention. As mentioned below by an independent participant, despite the significant benefits that NGOs could gain from pooling efforts with other community stakeholders, economic circumstances remain a serious barrier to their capacity, particularly in terms of time, to do so:

> It's always the same thing. Community organizations get by with a minimum of resources, so they work at their maximum potential. Every time we try to involve them in something, they just can't muster the time, even if it would pay off for them! It's a huge problem: lack of time, lack of availability. We're always up against that!

To partially address this issue, participants adopted a formal collaborative structure to further delineate the division of responsibilities between public organizations and NGOs and to establish clear expectations for how and when each sector should be involved in the collaborative process without creating undue burden. This structure consisted of three subcommittees, each focused on a subset of objectives for the accomplishment of the partnership's purpose. Partners were appointed to the subcommittee where their expertise could be utilized to maximum advantage and in a timely manner.

In the view of the participants, the role of NGOs was mainly defined under the auspices of support to public health and security officials, through the provision of information about high-risk groups and of expertise on how to tailor contingency plans to meet the needs of this target population. Institutional partners, for their part, provided the partnership with an understanding of the public security and public health infrastructures in Québec City and the support needed for strategic collaborative planning in the field of emergency management. The partnership's structuring process was perceived as an important means for seeking input and engagement from all sectors involved in the collaboration, and for establishing clearer expectations for NGO involvement, given the constraints imposed by resource limitations. As noted by a governmental participant:

I think that once they [the community organizations] are engaged, they'll stick it out. They just need to know exactly what to do. Like: "Here's what we expect from you. It doesn't involve a lot of time." That's because we know they are extremely busy, and that approach helps us see the "added value" of it all. On the other hand, we can't serve everything up on a silver platter… we do want them to help us, too.

## Theme 3: Leadership Opened Access to Community Expertise and Increased Motivation

Participants commonly identified two major organizational entities that were standing out visibly as influential actors in the collaborative process: Québec City's Bureau de la sécurité civile, and 211 Québec Regions. These partners were assigned a lead role given their organizational reputation with respect to emergency preparedness in high-risk populations and their individual and organizational capacity to set up a long-term collaboration.

Given the gatekeeper role that 211 provides, its involvement in the EnRiCH intervention was perceived as a catalyst to the collaborative work. In fact, 211 provided the partnership with a critical entry point to a wealth of local resources and knowledge and served as a vehicle for leveraging the involvement of the nonprofit sector and high-risk population groups toward the improvement of emergency preparedness. This has allowed the collaborative work to gain in scope and viability, as mentioned in the exchange between governmental and NGO participants that follows:

"We have a huge advantage with 211. For us, without 211, the EnRiCH Project…"
"Wouldn't be that important?"
"Not in a million years!"
"211 would be in the making…"
"Exactly! It gives you instant access to 1,500 organizations!"
"Yes, it's an incredible database."
"Mind-boggling."

Having Québec City's Bureau de la sécurité civile exercise leadership, along with 211, helped raise a strong and collective sense of legitimacy with respect to the collaborative work. The Bureau

de la sécurité civile was described as providing the functional operational leadership of the partnership, ensuring that things got done in an effective and efficient manner. Participants generally described this organization in its leadership role in terms of individual attributes that inspired and empowered collective action. Terms such as *passion* and *enthusiasm* were used repeatedly, and these characteristics were perceived as motivating forces to ensure sustained participation, especially from organizations not typically concerned with emergency management activities as mentioned by this NGO participant.

> To be honest, it's refreshing, very refreshing, because you're dealing with people who like their job. I have to admit that public security, that whole subject, well, it's not a big thing in my life; but just seeing someone who's interested in it, well, it's a motivation of sorts, I think.

## Theme 4: Collaboration Revealed Synergies for the Improvement of Emergency Preparedness

The collaboration that took place within the EnRiCH intervention in Québec City yielded a number of significant advancements toward the ultimate goal of enhancing adaptive capacity for disasters in high-risk populations. One of the most prominent outcomes was the merging of the EnRiCH Project and "le projet K," a local initiative overseen by the City of Québec to build the population's capacity to manage crisis situations. One component of le projet K specifically targeted high-risk populations, which consequently gave rise to the idea of combining both initiatives to build on the current context and redefine priorities to make the needs of high-risk populations a major focus in emergency management activities, as one governmental participant highlighted in the follow-up session:

> So you'll understand that when we saw the two [initiatives], we said to ourselves that we'd head in the same direction, meaning we'll be focusing on the resilience of high-risk populations.

As a result of this merger, the EnRiCH–Québec City partnership became known as the "K-EnRiCH table" to mark the beginning of a new and integrated collaboration between researchers, city authorities, 211, social services, and community groups to

improve emergency preparedness among high-risk populations in Québec City. A 3-year action plan was developed and discussed among participants during the follow-up session to provide strategic direction and impetus for the partnership beyond the duration of the EnRiCH intervention. The work plan targeted specific objectives, such as

- assisting NGOs in building their own business continuity of operations plan,

- mapping areas of vulnerability and services according to the CHAMPSS Functional Capability Framework *(O'Sullivan et al., 2013)* to adequately reach out and support high-risk population groups at all phases of a disaster,

- managing spontaneous volunteers in a state of emergency, and

- establishing intersectoral coordination mechanisms between different sectors of expertise.

## Theme 5: The EnRiCH Project Served as a Catalyst for Multisectoral Collaboration

Participants concluded that the collaborative experience was greatly facilitated by the presence of the University of Ottawa research body. Analogies were widely used among participants to describe the role of EnRiCH in convening multistakeholder processes and bringing about changes at the individual, organizational, and community levels. According to one governmental participant, EnRiCH acted as a unifying element in a complex web of institutional and community services concerned about high-risk populations but working in an uncoordinated manner:

> Before EnRiCH, we had a hodgepodge of organizations, either community-based or more formal or institutional, like the City itself—and all were concerned about our high-risk populations. There was good faith all around, but it was disjointed, uncoordinated—every initiative was in a sort of silo. In my mind, the added value of EnRiCH was really how it brought us together. That changes everything.

As a result of its convening power, some participants compared EnRiCH to a short-circuit line that allowed them to bypass admin-

istrative hierarchies and establish links with institutional stake-
holders that were otherwise difficult to reach. EnRiCH provided
them with an opportunity for direct and unmediated dialogue
transcending the usual, and often limiting, institutional structures.
An NGO participant shared,

> The process allowed us to bypass all the hoops the City
> would have us jump through to get things done. In other
> words, we could speak directly with key players instead
> of having to go through a disability-management office.
> That would be nonsense. Security experts have to speak
> directly to the people affected, not to intermediaries.

In the experience of one independent participant, the privileged
access to institutional partners gave a new impulse to involvement
in emergency activities because it enhanced the visibility of exper-
tise and showed willingness to push forward the issue of disaster
preparedness among high-risk groups:

> What you folks have given me is a way to meet these
> people [institutional partners] face to face and so
> get them to know me. Now I can say I'm part of the
> response effort and I'll be involved more and more in
> that effort if some sort of incident hits our region. And
> not just for high-risk populations… I mean for any
> type of unusual event that might happen here. For the
> responders, calling on me to help with all sorts of public
> communication tasks will become a reflex.

The EnRiCH Project was also referred to as a translation platform
that facilitated the communication between very diverse partners
involved in the collaboration. In fact, there was a perception that
EnRiCH enabled the partnership to place itself in a mode of col-
laboration and understanding, regardless of the clash of profes-
sional languages used across sectors, as described here by an NGO
participant:

> It's like a translation tool. We don't speak the same
> languages, so we need a translation mechanism, and
> EnRiCH is exactly that. What I mean is that, for all of us,
> it provided a way to understand each other and create
> ties with each other.… It put us in a cooperative frame
> of mind because its ability to "translate" allowed us to
> communicate.

As the following quote from a parapublic participant's follow-up session suggests, the attention and interest that the issue of emergency preparedness in high-risk populations aroused within the EnRiCH-Québec City partnership has induced some institutions to realign their work agenda with this emerging collective priority:

> Emergency measures are my responsibility, too, but my priorities need realignment. You see, tending to high-risk populations wasn't necessarily a priority for me this year—but now that the opportunity is there, I'm jumping on it!"

Finally, EnRiCH was perceived as providing a launch platform for renewed and sustained collaboration beyond the involvement of the University of Ottawa research team. By the end of the EnRiCH intervention, it became possible to identify which partner had been involved in the project since the start and, consequently, manifested real interest in long-term collaboration on emergency preparedness among high-risk groups. One governmental participant said:

> That meeting was really the missing piece to the puzzle, you know, that defining EnRiCH get-together that concluded with "Now, we're starting our engines!" We know who's involved and who wants to get involved. The folks who are here really want to be here. They haven't had their arms twisted or anything like that.

## Discussion

In this study, we tracked the development and functioning of a university–community partnership to enhance resilience and preparedness for disasters among high-risk populations. The themes that emerged from this study showed contextual dynamics related to the concepts of perceived seriousness of the issue and community readiness, as outlined in the CBPR logic model *(Wallerstein et al., 2008)*. Participants were generally informed and concerned about the potential implications of disasters for the community of Québec City, which helped influence participants' responsiveness and acceptance of the need to engage in collaboration around the issue of emergency preparedness among high-risk populations. The presence of city authorities and the current political attention to public security in Québec City also appeared to fuel the participants' perception of its importance and create a sense

of urgency and readiness to act. This aligns with key principles of change management and the eight-step process outlined by Kotter and Rathgeber *(2006)*, which states that the first and crucial step toward successfully leading change is to develop a motivating sense of urgency among stakeholders. Participants' support for the implementation of the EnRiCH intervention can also be viewed in light of Andrews, Newman, Meadows, Cox, and Bunting's *(2012)* CBPR partnership readiness model, which stipulates that shared values and effective leadership are key dimensions of a community's capacity to mobilize and take action.

The long history of competition for funding in the nonprofit sector also influenced the dynamics of relationships among participants and the way the partnership work was structured. This contextual theme was also found by Henderson, Kendall, Forday, and Cowan *(2013)*, who observed that NGO traditional reliance on government funding was posing a threat to the maintenance of "equitable and collegial relationships" *(p. 387)* between NGOs involved in a multisectoral partnership. Although the relationships between the partners in Québec City remained respectful, the scarcity of resources in the nonprofit sector limited the capacity of some participants to sustain their engagement in the collaborative work. The gradual decrease in the participation rate of NGOs throughout the intervention received special attention from partnership leaders and provided motivation for setting out a structure to govern the partnership in a manner consistent with participants' capacity for collaboration and the objectives of the partnership. This included a reflection on each organization's role within the partnership and the necessity of focusing on meaningful contributions and complementary strengths to minimize the cost of time and other organizational resources invested in collaboration. This finding is consistent with research indicating that sustained involvement does not necessarily imply that each sector of expertise needs to exert an equal influence on the collaborative work. More essential is concern about how well roles are brought in line with particular interests and skills of partners *(Bond & Keys, 1993; Lasker, Weiss, & Miller, 2001)*.

This study touches on the group dynamics dimension of the CBPR logic model and specifically on the relational dynamics associated with leadership and stewardship *(Wallerstein et al., 2008)*. Leadership in the Québec City partnership was described as coming from highly motivated and dedicated individuals whose roles in the community provided linkages to engage the nonprofit sector in partnering with public bodies and strategic planning expertise

to assume responsibility for coordinating the partnership's work. Together, 211 services and Québec City's Bureau de la sécurité civile developed a leadership style that enabled them to work across organizational boundaries and seek input and engagement from diverse stakeholders, including those not typically involved in emergency preparedness activities. This finding is consistent with the notion of *boundary spanners*, people who show understanding and appreciation of interdependencies and create bridges between various groups *(Jones & Barry, 2011; Wallerstein et al., 2008)*. Boundary spanners often find themselves in leadership positions because of their ability to foster a culture of trust and acceptance for stakeholders to engage in positive interactions *(Lasker & Weiss, 2003)*.

The EnRiCH research body was recognized by participants as a crucial intermediary and facilitator of dialogue between different groups and as a catalyst for institutional change with respect to emergency preparedness. This underscores the unique position and capacity of universities to convene multistakeholder meetings and open up neutral spaces for collaborative learning. Wenger-Trayner *(2012)* used the term *conveners* for people or organizations that seize opportunities to create new learning spaces and partnerships across traditional boundaries in order to transform existing practices. This function also echoes Bergdall's *(2003)* notion of a *community outsider*, which helps community systems find solutions and drive their own development. Bergdall described how effective community outsiders "hold up a mirror" *(p. 3)* to enable the community to look realistically at itself and develop interventions adapted to the local context. The mere fact that the outsider comes from a different place and has no stake in the issue produces a different response in the community that can be a catalyst for change. The literature on conveners and community outsiders provides an interesting research avenue to further examine researcher capacity in CBPR, which remains an underexplored area in Wallerstein et al.'s *(2008)* CBPR logic model. The findings of this study contribute to improving knowledge on the university's role and capacity to bring together and engage community members in a process of collaborative inquiry.

The findings of this study also highlight the important advances that have taken place throughout the EnRiCH intervention, which align with the system and capacity outcomes dimension of the CBPR logic model *(Wallerstein et al., 2008)*. A significant step forward was the merging of the EnRiCH Project and Québec City's "Projet K," whereby key partners (i.e., city authorities and 211) entered into formal agreements to create an integrated plan-

ning table that involved NGOs as active partners in emergency preparedness and response *(Gagnon, Paré, Vanasse, O'Sullivan, & Corneil, 2014)*. Nicknamed "K-EnRiCH," the merged entity symbolized the community's commitment to implementing lessons learned from the CBPR intervention and consolidating the relationships between research and community partners. Some participants set new working priorities and mandates in order to capitalize on the momentum created over the EnRiCH intervention. Follow-up conversations with 211 and Québec City's Bureau de la sécurité civile leaders allowed for regular updates on the progress and results achieved by the community beyond the termination of the research funding. The EnRiCH intervention achieved progress in three spheres of action intended to promote an inclusive approach to emergency preparedness in Québec City:

**1. Prepare the community sector.** To assist NGOs in getting their organization and clientele prepared for crisis situations, a workshop was developed and pilot-tested in May 2014 with a core group of 10 organizations, half of which included members who participated in the EnRiCH intervention. The workshop was piloted for content, logistics, accessibility of the venue, and presenters. Following the trial, the workshop was offered to over 30 NGOs who were provided with a guide for developing a business continuity plan adapted specifically to the reality of the community sector. All participating NGOs were invited to fill out a datasheet appended to the guide, which allowed 211 to populate its database with information about the organization and/or the program, the location, the clientele served, and the accessibility of the site for persons with disabilities and reduced mobility. This database enhances 211 and Québec City members' knowledge of community resources and services, and thus increases capacity to coordinate efforts in the event of emergencies.

**2. Reaching out to high-risk people.** Through the relationships established during the EnRiCH intervention, Québec City's Bureau de la sécurité civile leader was invited to visit a community agency advocating for the rights and interests of people living with intellectual disabilities, to distribute and educate the clientele on the 72-hour emergency preparedness guide adapted to the needs of high-risk populations. This created an opportunity to obtain feedback from the grassroots level on how to better adapt and communicate emergency preparedness tools for people with special intellectual needs.

**3. Prepare all citizens.** The promotional tool "Faire face" *(Ville de Québec, 2015)* is an awareness-raising campaign introduced in

2013 by Québec City's Bureau de la sécurité civile to over 300 municipal managers, professionals, and federal employees who could be asked to intervene in a state of emergency. Participants involved in the launching of this campaign and subsequent information sessions learned how to develop a family emergency supply kit and action plan in the event of a disaster, among other things.

These achievements are summarized in Table 3, which is adapted from a presentation given by 211 and the Municipality of Québec City in May 2015 at a meeting of the EnRiCH Collaboration held in Ottawa.

**Table 3.** *Summary of Progress Achieved by K-EnRiCH*

| Sphere of Action | Activities |
|---|---|
| 1. **Prepare the community sector** | • Delivery of a pilot workshop on business continuity planning targeting the nonprofit sector<br><br>• Delivery of the workshop to over 30 community-based organizations<br><br>• Design of a guide for developing a business continuity plan adapted to the nonprofit sector<br><br>• Creation of a database managed by 211 for NGOs to populate with information about their client group's needs |
| 2. **Reaching out to high-risk people** | • On-site visit conducted by a member of the Municipality of Québec City to meet with people living with intellectual disabilities and obtain their input on how to communicate more effectively and adapt emergency preparedness tools (e.g., 72-hour emergency preparedness guide) |
| 3. **Prepare all citizens** | • Development of a promotional tool ("Faire face") to enhance emergency preparedness at the household, organizational, and community levels |

The above examples help to better understand and describe the pathways through which components of collaboration—such as context, leadership style, partnership structure, and intervention—interact to produce context-based local outcomes. In the Québec City partnership case study, the collaborative pathway can be summarized as follows: The EnRiCH Project came at a time when many isolated initiatives were taking place in Québec City in response to a general concern and to the high priority attached

by governmental agencies to the need for enhanced public safety and security (Theme 1). The EnRiCH Project component interacted with local concerns and values to create a timely opportunity for merging existing initiatives (i.e., K-EnRiCH) and strengthening relationships between critical partners (i.e., 211 and City of Québec) through the establishment of formal agreements and action plans to advance emergency preparedness among high-risk populations (Theme 4). In addition to interacting with the local context, the EnRiCH Project was embraced by two community leaders who had a long-term vision of how the Québec City community could benefit from mobilizing diverse stakeholders to discuss the issue of emergency preparedness among high-risk populations (Theme 3). Their respective roles in the community, and particularly their social capital, provided linkages to engage the community sector in the project along with public officials. The progressive withdrawal of community stakeholders throughout the collaboration raised particular concern on the part of Québec City's Bureau de la sécurité civile leader of the partnership, whose passion for and commitment to the collaborative work have triggered an important reflection on how to meaningfully engage community stakeholders in long-term collaboration without draining their resources in time, staff, and money. The idea of structuring the partnership's work around subcommittees emerged as a way to tap into community stakeholders' expertise while respecting their capacity to invest energy in collaboration (Theme 2). The whole collaborative process was facilitated by the convening power and neutral position of the university body, which contributed to the unique gathering of multisectoral stakeholders and the development of local-based solutions (Theme 5).

## Limitations of the Study

Two important limitations of this study should be considered. First, the findings of this study are specific to the case of the EnRiCH–Québec City partnership, which limits the generalizability of the findings to other settings. In this study, we tried to improve the generalizability of research findings by providing thick descriptions of the EnRiCH intervention within which the Québec City partnership was established. Second, the study sample ($N = 23$) was purposefully selected to include the group of participants involved in the last data collection phases of the EnRiCH intervention: the follow-up focus group session, and the fourth and fifth round of telephone interviews. Using this selection, we hoped to draw an up-to-date portrait of the dynamics of collaboration

shaping the EnRiCH–Québec City partnership. This study sample provided a mix of returning participants from previous phases of the EnRiCH intervention and new recruits who were identified as potential contributors to the partnership's work. Consequently, the regular attendees were more likely than new members to offer detailed descriptions of the processes and impact of collaboration within the partnership. The findings may therefore have been weighted toward the experiences of participants with greater knowledge about the partnership's work.

## Conclusion

This article has described the functioning of a university–community partnership in Québec City that was involved in an asset-mapping intervention to improve emergency preparedness and resilience among high-risk populations. The article addresses the lack of empirical evidence about collaborative processes that enable CBPR partnerships to experience high-level functioning. The CBPR logic model by Wallerstein et al. *(2008)* was used as a framework to track the development of the EnRiCH–Québec City partnership from processes to outcomes. This model was useful in identifying and expanding on the key dimensions involved in community–university partnerships. The findings of this study particularly contributed to developing new knowledge on the university's role in initiating collaboration and supporting community development. A unifying element, a short-circuit line, a knowledge translation vehicle, and a platform to launch action are all analogies used by the participants to describe the facilitation roles of the EnRiCH research body throughout the collaborative process. More research on the catalytic functions of researchers in CBPR collaboration could help better determine the extent to which this dimension influences the ability of CBPR research projects to successfully affect outcomes.

The findings of this study also underscore the need for CBPR partnerships to embrace the local context, which shapes both challenges and opportunities for collaboration, by establishing strategic processes for leveraging complementary strengths and dealing with the constraints of time and resources. Findings also suggest that convening and boundary-spanning skills are key vectors of intersectorality that stimulate synergy and innovation between various stakeholders. These lessons can be applied to other community contexts beyond emergency preparedness.

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# *Community–University Partnerships for Research and Practice: Application of an Interactive and Contextual Model of Collaboration*

Heather J. Williamson, Belinda-Rose Young, Nichole Murray, Donna L. Burton, Bruce Lubotsky Levin, Oliver Tom Massey, and Julie A. Baldwin

## Abstract

Community–university partnerships are frequently used to enhance translational research efforts while benefiting the community. However, challenges remain in evaluating such efforts. This article discusses the utility of applying the contextual and interactive model of community–university collaboration to a translational research education program, the Institute for Translational Research in Adolescent Behavioral Health, to guide programmatic efforts and future evaluations. Institute stakeholders from academia and the community completed in-depth interviews querying their expectations and experiences in this collaboration. Key quotes and themes were extracted and analyzed based on the constructs within the 3 phases of the model. The findings note specific themes for future evaluations. Overall, the contextual and interactive model of community–university collaboration proved a useful framework to guide the process evaluation of the Institute. Findings suggest possible strategies for the successful development, evaluation, and sustainability of community–university partnerships.

## Introduction

*C*ommunity–university partnerships are an integral part of research and practice. These collaborative relationships ideally involve a mutually beneficial exchange in which community agency partners provide knowledge concerning vulnerable populations, their most urgent needs, and the best methods for meeting those needs *(Minkler, 2005)*. They also provide invaluable insight into the cultural landscape of the community, including norms, beliefs, behaviors, and attitudes that can significantly affect the community's receptiveness to outside influences *(Harper, Contreras, Bangi, & Pedraza, 2004; Suarez-Balcazar, Harper, & Lewis, 2005)*. University partners, on the other hand, provide the framework, resources, and theoretical knowledge important in creating

intervention strategies as well as assistance with the implementation and evaluation of programs and services *(Ross et al., 2010; Suarez-Balcazar et al., 2005)*. It is important that community–university partnerships be built on a solid foundation of trust and mutual respect to ensure sustainable working relationships that meet the needs of all stakeholders *(Harper et al., 2004; Suarez-Balcazar et al., 2005; Thompson, Story, & Butler, 2003)*.

Community–university partnerships are undertaken utilizing an approach to research called community-based participatory research (CBPR), which the Community Health Scholars Program *(2001)* has defined as "a collaborative approach to research that equitably involves all partners in the research process and recognizes the unique strengths that each brings" *(p. 2)*. The CBPR approach is a promising practice to create relationships between researchers and community practitioners. It promotes, among other goals, the translation of research into practice *(Faridi, Grunbaum, Gray, Franks, & Simoes, 2007; Wallerstein & Duran, 2010)*. Recent systematic literature reviews identified CBPR as an effective method to address health outcomes, including cancer-related issues and health disparities faced by racial and ethnic minorities *(Agency for Healthcare Research and Quality, 2004; De Las Nueces, Hacker, DiGirolamo, & Hicks, 2012; Salimi et al., 2012; Simonds, Wallerstein, Duran, & Villegas, 2013)*.

In addition to potential benefits for translational research and impacting health outcomes, the use of community–university partnerships can also provide a valuable opportunity to enhance the application of scholarly knowledge. The Carnegie Foundation *(2015)* has recognized the importance of community engagement through community–university partnerships for enhancing scholarship, curriculum, teaching, and research. Service-learning is one mechanism for integrating curriculum and learning into the mutually beneficial relationships between the community and academia. The first step to successful service-learning experiences is the establishment of community–university partnerships *(Cashman & Seifer, 2008)*. The creation of community–university partnerships also offers benefits to community agencies including capacity building for research and evaluation, the validation of existing efforts, and program enhancements *(Dugery & Knowles, 2003)*.

A comprehensive evaluation of a service-learning endeavor must go beyond assessing learning objectives and also evaluate the quality of relationships formed between the university and community partners *(Holland, 2001)*. In addition, the mentorship provided in service-learning programs can be a productive means of promoting knowledge translation, but more research is needed to

understand best mechanisms to evaluate such mentoring experiences *(Gagliardi, Webster, Perrier, Bell, & Straus, 2014)*. There is great complexity in evaluating community–university partnership efforts given the intricacies of partnership formation. Among elements contributing to this complexity of evaluation are considerations of the context of the partnerships and the readiness of both partners to engage in research *(Hicks et al., 2012)*. Further, evaluation efforts should focus on intermediate outcomes of the partnership, such as capacity building and relationship formation, as well as long-term outcomes *(Minkler, Blackwell, Thompson, & Tamir, 2003; Sanchez, Carrillo, & Wallerstein, 2011)*.

In behavioral health research and practice, community–university partnerships through service-learning research programs hold promise to promote evidence-based practices (EBPs) by encouraging collaborative translational research efforts. Specifically, the use of community–university partnerships is a recommended strategy to address adolescent substance abuse and co-occurring mental health problems *(Spoth, Schainker, & Hiller-Sturmhoefel, 2011)*. Gaps remain in translating evidence-based practices into treatment settings; however, community–university partnerships can work to address EBP implementation and sustainability *(Bumbarger & Campbell, 2012; Green, 2001)*. Behavioral health practitioners have identified community–university partnerships as a mechanism they would find beneficial for promoting the use of EBPs *(Proctor et al., 2007)*. These partnerships are critical in translating research into practice but can be difficult to successfully establish given the differing priorities and methods of the two types of partners involved *(Spoth, Schainker, et al., 2011)*.

The Institute for Translational Research in Adolescent Behavioral Health (http://www.health.usf.edu/publichealth/itrabh/index.htm) at the University of South Florida (USF), funded by a grant from the National Institute on Drug Abuse, builds on the potential for success of community–university partnerships, utilizes a community-based participatory research approach to address adolescent behavioral health issues, and promotes the implementation and use of EBPs. The Institute's primary aim is to implement a research education program focused on developing innovative research skills among behavioral health researchers and practitioners. The Institute has established community–university partnerships between USF and select community organizations that provide adolescent behavioral health services in the greater Tampa Bay area. Graduate students and community professionals are enrolled for four consecutive semesters as Institute scholars and

complete coursework in translational research and implementation sciences. Institute scholars also simultaneously complete community–based service-learning research projects under the mentorship of community partners and academic mentors.

In order for the Institute to be successful, there is a need to continually evaluate community–university partnerships and the service-learning projects to help sustain those partnerships and ensure they are mutually beneficial to Institute scholars, community partners, academic mentors, and the Institute. Despite the complexity and lack of consensus on best practices for evaluating community–university partnerships, regular evaluation of community–university partnerships still needs to be undertaken to measure success and better understand barriers to success *(Eder, Carter-Edwards, Hurd, Rumala, & Wallerstein, 2013)*. To understand the challenges and opportunities in establishing university–community partnerships, Suarez-Balcazar et al. *(2005)* proposed a contextual and interactive model of community–university collaborations that can be used to frame evaluation efforts.

The purpose of this model is to establish a framework for developing and sustaining community–university partnerships. Table 1 provides a summary of the constructs proposed in the Suarez-Balcazar et al. *(2005)* model, which were used as the code book for this study (see Table 1). The model includes three phases: (1) gaining entry into the community; (2) developing and sustaining the collaboration; and (3) recognizing challenges, benefits, and outcomes. These phases are interrelated and interactive, meaning each factor influences the others *(Suarez-Balcazar et al., 2005)*. Gaining entry into the community is the first active step in establishing relationships and creating a framework for continued collaborations. According to Harper et al. *(2003)*, meeting with community partners is often the first step to beginning this relationship and gaining entry into the community. It is important to introduce all parties and openly communicate the needs and expectations of each. It is also important during this phase to create a framework for this partnership, including the steps necessary to accomplish mutually agreed-upon goals. During this phase, the resources of both the university and community partners can be utilized, with community members providing insight based on knowledge of the community and university partners implementing this knowledge by formulating intervention programs *(Harper et al., 2003; Suarez-Balcazar et al., 2005)*. Community partners can also act as a gateway to the community, aiding university partners in identifying target

populations and gaining access to them. Harper et al. *(2003)* documented this approach as well as its necessity.

**Table 1.** *Code Book*

| Code | Definition |
|---|---|
| Gaining entry into the community | Previous personal experiences with partnerships influence this stage. |
| | Articulate mission, goals, roles, and expectations of the partnership. |
| **The following are key factors for developing and maintaining mutual collaborations** (*This stage is defined as working toward a common goal that mutually benefits both parties*)**:** | |
| Trust and mutual respect | Taking time to get to know one another and having a positive attitude about the collaboration. |
| Adequate communication | Clear communication about project expectations, including benefits for all involved. |
| Respect for diversity | Respecting differences in behavioral practices, preferences, and opinions. |
| Culture of learning | Two-way learning, recognize learning opportunities for all members in the partnership, learning from one another. |
| Respect culture of the setting | Respect and celebrate the culture of the community organizations, acknowledge differences between partners regarding their work setting. |
| Develop action agenda | Research/project decided on collaboratively. |
| **The following are the context of the partnership:** | |
| Potential challenges & threats | Examples:<br>Time commitment<br>Conflict of interest<br>Budget cuts<br>End of funding<br>Power & resource inequality |
| Recognizing benefits & outcomes | Examples:<br>Funding for community organizations & researchers<br>Learning opportunities<br>Capacity & skill building<br>Increased action & ownership |

*Note.* Table from Suarez-Balcazar et al. (2005).

The initial relationship that is established upon entering the community is important in developing and sustaining the interactions between the community and university partners. These interactions are strengthened once trust, communication, and an understanding of the cultural setting are established *(Suarez-Balcazar*

*et al., 2005)*. As in any relationship or partnership, the success of community–university partnerships requires understanding and respect toward the individual roles of all stakeholders and cultural and social norms within the community. Roles, duties, and personnel evolve over the duration of the collaborative projects; these relationships can therefore benefit from quality improvement and evaluation efforts. Evaluation may include assessment of the needs of the parties involved and whether goals are being met. Cherry and Shefner *(2004)* suggested that evaluation may also include assessing changes in the community, capacity building, level of knowledge, and information before and after the collaboration. The roles of each individual member also need to be evaluated, including the establishment of new relationships and the status of existing ones.

Finally, the collaborations need to be evaluated at an institutional level. These evaluations should include the university stakeholders and their resources, their commitment to the collaboration, and their investment in achieving the desired goals and maintaining partnerships. The purpose of this article is to apply the interactive and contextual model of collaboration as a framework to evaluate the potential opportunities and challenges that the Institute experienced in establishing sustainable community–university partnerships. Lessons learned from evaluating the Institute's use of this framework and its constructs will help inform future evaluation efforts of community–university partnerships.

## Methods

In order to evaluate the Institute's efforts in establishing community–university partnerships to complete service-learning translational research projects, a qualitative evaluation was completed that included interviews with Institute scholars, academic mentors, and community partners involved in the Institute's first year of research and training activities. Institute scholars included graduate students and community professionals in the field of adolescent behavioral health enrolled in the Institute's graduate certificate program who completed service-learning translational research projects with community partners. Academic mentors were faculty who oversee the service-learning translational research projects, which are completed in collaboration with the Institute's community partners.

The Institute's executive committee developed interview protocols specific to each group regarding their experience with the Institute. The executive committee consists of the multiple prin-

cipal investigators and programmatic staff with expertise in community-based participatory research, adolescent behavioral health, translational research, and implementation science. The executive committee oversees the operations of the Institute to ensure productive experiences for all Institute stakeholders, including the Institute scholars, academic mentors, and community partners. The purpose of the interviews was to gather the thoughts and opinions of Institute scholars, community partners, and academic mentors about the Institute to guide future Institute activities and inform future evaluation efforts. The interview consisted of open-ended questions regarding Institute scholar, community partner, and academic mentor expectations and experiences. The university's Institutional Review Board approved the protocols and the evaluation plan. We used e-mail and follow-up phone calls to invite participants to complete an interview. All of the community partners ($N = 5$) and academic mentors ($N = 6$) agreed to participate in individual interviews. A majority of the Institute scholars (87%, $n = 13$) completed individual interviews.

An external evaluator supported by a note taker conducted interviews with academic mentors and Institute scholars. Administrative support staff interviewed community partners. The interviews were conducted in person and lasted 30-45 minutes each. Field notes were taken, and summary points were confirmed with each participant at the close of the interview. Interview recordings and field notes were simultaneously reviewed and key quotes transcribed. A review of all documents, including summaries of the interviews, led to consensus on the summary notes and key quotes for each interview. The summary documents from the interviews were shared with the participants for member checking prior to final analysis.

Although the Institute was not developed utilizing the interactive and contextual framework specifically, it was guided by the principles of CBPR that are reflected in the framework *(Suarez-Balcazar et al., 2005)*. Consequently, the framework was selected to examine the evaluation efforts and gain a better understanding of the Institute's community–university partnerships. The data analysis took place in three stages *(Miles, Huberman, & Saldana, 1994)*. The first stage involved data reduction through coding. A codebook was created defining each construct in the model based on review of the article in which the model was proposed and its constructs defined (see Table 1). Two research staff members independently coded the interview data. Stage 2 involved data display, or reviewing the data in a summarized format based on the coded text. In this stage,

the research staff compared coding and interpretations. If there was not initial agreement, staff discussed each comment at length, using the codebook as a basis, until consensus was reached. Finally, in Stage 3, the two research staff members developed conclusions in order to draft findings. The entire research team reviewed draft findings and reached consensus. The findings include a discussion of the constructs from the interactive and contextual model of community–university collaborations and provide recommendations for future evaluation efforts using this model.

## Findings

Findings are organized according to the interactive and contextual model.

## Gaining Entry Into the Community

The Institute service-learning projects were completed with five different community partners (representing five different community agencies), all with varying degrees of relationship to USF prior to partnering with the Institute. Prior existing relationships between the university, community partners, and academic mentors influenced expectations for some members of the service-learning teams; these expectations were reflected in the data regarding *gaining entry into the community*. Both community partners and academic mentors had positive feelings about the collaboration, reflecting the existing relationship. For example, one community partner stated,

> I've worked with the mentor for so many years.… We already had a good relationship with our mentor so we could trust that whatever was going to happen was going to be great.

A majority of the Institute scholars did not have previous working relationships with their academic mentors or the community partner agencies prior to the service-learning experience Two of the scholars were employees of the agencies. From the Institute scholars' perspective, the community partner was a "gateway" to working with a population in which they had research interest. Access to the population of interest was seen as an advantage that the agency brought to the partnership.

> They would give us access to the population, but they would take a backseat approach. (Institute scholar)

Institute scholars discussed the liaison role that either the academic mentor or a fellow Institute scholar took in helping to initially gain entry into the community agency. That is, the liaison became an intermediary. For those whose liaison was a fellow Institute scholar, the Institute scholar was a community professional who worked full-time at the agency the team had selected. The existing relationship facilitated entry into working with the community agency.

> One of the members on the research team worked at the community agency, which made it absolutely wonderful because we had full access to everything because of that. The community partner was more than willing to meet with us anytime we needed to. (Institute scholar)

## Developing and Sustaining Collaborations

After gaining entry into the community, the model proposes six interrelated factors that influence the development and sustainability of the university–community partnership: (1) trust and mutual respect, (2) adequate communication, (3) develop an action agenda, (4) respect for diversity, (5) culture of learning, and (6) respect for culture of the setting. These constructs were helpful in framing the current evaluation, and certain constructs were found to be particularly informative for developing the partnership. Additionally, the analysis ascertained that the proposed interrelatedness of these constructs in the model was not always realized. In order to consider the interrelatedness of key constructs from the model for further evaluation, Table 2 includes a visual representation of constructs that were identified as correlated in this evaluation. The cells marked with an X indicate that portions of coded text fit into more than one construct, demonstrating their interrelatedness as proposed in the model. For example, the construct of trust and mutual respect was found to be interrelated with adequate communication, respect for diversity, respect for culture of setting, and develop an action agenda.

**Trust and mutual respect**. Trust and mutual respect was the construct most reflected in the data and was also interrelated to the largest number of other constructs in the model. The model notes that *trust and mutual respect* is reflected in taking adequate time with the partnering group and having a positive attitude about the collaboration. Taking time was a critical aspect of creating trust

and mutual respect, and Institute scholars wanted more time and contact with the agency.

> I expected to have a lot of contact with the staff at the community agency. And, not just the CEO, but the staff informally. (Institute scholar)

If Institute scholars did spend more time with the community agency, they expressed this as helpful to building the relationship.

> We went to most if not all of the trainings that occurred at the community locations… even at 8 p.m. We went to coalition meetings, trainings, and conferences. And it helped because the community didn't see us as just evaluators because they saw us at conferences and everything else, so they saw us helping out. They recognized our faces. I think it really helped them to see that we weren't just university scholars that were there to get something from them. All the extra stuff that we did was helpful. We were partners with them. (Institute scholar)

> We attended a number of events and a number of community coalition meetings, community trainings, and the organization provided different trainings. So we got a better sense of what the agency was before we decided on our project. So I feel as if our project was a lot more meaningful to the community agency. (Institute scholar)

Finding time to spend on the project was challenging for some community partners because of their already busy schedules. Finding time to get to know their community partner was similarly challenging for Institute scholars, and they felt that having spent more time getting acquainted would have created a better working relationship for the team.

> That was the most challenging. Everyone has different commitment levels, schedules, and strengths and weaknesses. Had we got to know the group better we could have delegated more. There should be a time at the beginning for the group to get together and share about themselves and their strengths because time was a pressure. (Institute scholar)

However, when a commitment to getting to know one another led to efforts to spend enough time, this strengthened the relationship and seemed to foster respect.

> I got to see how it works in a community agency like this. I got to put a face to an agency. I got to see the different personalities from the people I worked with in the community agency. You have to remember that the people who come into work every day, they are waking up just like the rest of us. They are putting on their pants, brushing their teeth, and putting on these programs. But now we're evaluating them. They are people too. They have their own opinions and their own struggles. (Institute scholar)

The community partners felt that a positive characteristic of the Institute scholars was their level of commitment, which was represented in the time they took to attend meetings and make presentations. It was important for the community partners to work side by side to create a team environment. That the Institute scholars took time to work closely with the agency left a positive impression on the agency staff.

> One of my strong impressions was that the staff was very grateful for the university [Institute scholars] working with us. I mean you could really feel that. (Community partner)

Table 2. *Developing and Sustaining Partnerships Constructs Coding Overlap*

|  | Trust and Mutual Respect | Adequate Communication | Respect for Diversity | Culture of Learning | Respect Culture of Setting | Develop Action Agenda |
|---|---|---|---|---|---|---|
| Trust and Mutual Respect |  | X | X |  | X | X |
| Adequate Communication | X |  |  |  |  | X |
| Respect for Diversity | X |  |  |  | X | X |
| Culture of Learning |  |  |  |  |  |  |
| Respect Culture of Setting | X |  | X |  |  |  |
| Develop Action Agenda | X | X | X |  |  |  |

**Adequate communication and develop an action agenda.**
There was a great deal of overlap between trust and mutual respect
and adequate communication, suggesting a strong relationship
between these constructs. In addition, there was also overlap in
coding for adequate communication and develop an action agenda.
*Adequate communication* is defined in the model as clearly commu-
nicating expectations from the partnership, including benefits for
all involved. All interviewees discussed the importance of commu-
nication reflected through sharing resources and information, and
ensuring an adequate frequency of communication. Institute
scholars expected community partners to be involved regularly
and to guide them through the project.

> I expected that they would be vested in the process.
> That they would make themselves available and provide
> resources. (Institute scholar)

> That they [community partner] would help guide the
> research project and provide real-world knowledge.
> (Institute scholar)

The Institute scholars' initial impressions of the university–com-
munity collaboration were influenced by the scope of the initial
communications during a networking session at a national con-
ference. This initial meeting was how Institute scholars identified
the agencies with whom they wanted to be paired. Some Institute
scholars felt they did not receive enough information about com-
munity partners and their expectations.

> We had a speed-dating type thing where we were able
> to talk to each agency for about half an hour and ask
> questions. And that helped. Though, I wasn't yet aware
> what kind of questions that we should be asking. And
> that was something that I learned later on after we were
> involved. (Institute scholar)

Community partners considered the initial meeting beneficial,
but some Institute scholars and academic mentors found that it
lacked an adequate level of communication about research project
expectations. It was important for the academic mentors to know
if they were a good fit with the agency by understanding what their
project goals were. Some academic mentors felt they did not have
enough information to make this determination.

> The speed-dating was helpful in familiarizing everyone with the potential community agency. It would have been helpful to have more clarity about the research projects before deciding whether or not to choose a specific agency. (Academic mentor)

The frequency of communication between community partners and Institute scholars was critical to maintaining excitement about the project, but this aspect was challenging for some participants.

> When we don't see anyone from the community agency it's hard for us to be really excited about the project because we are so detached from the project. I wished we would have had more contact with the community directly. That would have helped with implementation. (Institute scholar)

Frequency of communication seemed to vary considerably across teams. Some teams met frequently, but others had minimal communication with their community partner agency. For some, having an Institute scholar who worked at the agency facilitated communication.

> There was a lot [of communication] because one of them [Institute scholars] worked there. So we communicated as a team. And the one scholar that worked at the agency spoke to the actual community partner about everything. (Academic mentor)

In addition, communication frequency changed depending on the phase of the project.

> Planning went really well. Initially we received great guidance from the community partner. But as the project went along that guidance fell to the wayside. (Institute scholar)

Institute scholars, academic mentors, and community partners wanted clearer communication about expectations and roles and responsibilities of each participant early in the project. One community partner referred to the academic mentor as an "education consultant" and indicated that they did not fully understand the role of the academic mentor. Community partners also wanted

more communication from Institute faculty regarding the scope of the project to ensure feasibility.

> In hindsight, maybe a little bit more directives to the agency. A little more guidelines—maybe what would have been helpful, is that the first day that we met with the interns [Institute scholars], is maybe having a representative from the university with us. To make sure that we are not going down the wrong rabbit trail. (Community partner)

Community partners also discussed the importance of feedback for making the project clearly beneficial to their agencies. Feedback involves communicating results back to the agency. Community partners indicated that feedback helped to build trust in the project and enhanced the feeling of collaboration.

> We got a lot of feedback back on this project from the students. Whether it was in staff meetings, ground level staff meetings the facilitators were involved in, the students would come and talk to them and share their results and findings—share at coalition meetings, board meetings, the results were shared at a lot of different levels so it wasn't like the project was this big secret. (Community partner)

*Develop an action agenda* is defined in the model as mutually agreeing upon the scope of the project. As part of developing the action agenda, it was important for Institute scholars to have the information and resources they needed from the community partner to determine the scope of the project. In addition, coding for trust and mutual respect and respect for diversity also overlapped with develop an action agenda. Spending time together, also part of building trust and mutual respect, was important to developing the agenda and ensuring project success.

> It helped us to make sure that we got what we needed, the community agency got what it needed, and the community overall got something extra. That was very valuable. (Institute scholar)

> The site visit was important as the team was able to find out what projects would be meaningful and relevant to the agency. We were able to assess issues, concerns, and priorities of the agency. (Academic mentor)

> [An] asset of the program was that it was evolving, it was alive, it was things that we worked on together. (Community partner)

**Respect for diversity, culture of learning, and respect for culture of the setting**. Minimal coding was found in our data for the constructs respect for diversity, culture of learning, and respect for culture of the setting. Trust and mutual respect coding overlapped with respect for diversity, again reflecting the critical role of trust and mutual respect in developing community–university partnerships.

*Respect for diversity* is defined as respecting differences in behavioral practices, preferences, and opinions among the partners. The community partners did not discuss anything reflective of this construct. However, one academic mentor noted that she wished her pairing with an agency had been based on her research interest instead of a fit for the agency. One benefit of the service-learning experience was a change in attitude among Institute scholars to include more respect for the preferences of community partners. This was reflected by both the Institute scholars and the academic mentors.

> The Institute taught me a community–academic collaborative approach. Where it's just as important to hear what they have to say, but to allow them to make decisions because often times they know better than we do. So to get out of that ivory-tower thinking and do some real work and have them guide it just as much as us. It's really changed my approach to what I want to do. But at the same time it's solidified previous career goals. (Institute scholar)

> The students from the academic side gained more perspective and appreciation of community input and engagement. (Academic mentor)

*Culture of learning* refers to two-way learning and acknowledging learning opportunities from the partnership. One academic mentor did not anticipate two-way learning from the relationship and felt the primary contribution of the agency was providing knowledge of the community. Institute scholars' approach to learning from the community partners varied from not expecting reciprocal learning to clearly learning and benefiting from the expertise of the community partner.

> Thought they would be just that, a partner. That they would collaborate with us and do just as much research as we would, although we were taking the lead. (Institute scholar)

> [Community partner knowledge] not in research, but they had a lot of knowledge concerning real-world application. (Institute scholar)

Community partners discussed learning in the context of how the Institute and the service-learning project operated. The program was new, and therefore the community partners associated learning with gaining an understanding of the Institute. Community partners appreciated the flexibility in the Institute, which facilitated learning and allowed for adjustments to make the experience more successful. Community partners acknowledged learning about translational research from the experience.

> I think, you know, as much as I have learned about translational research, and I am still learning a lot, because I haven't really thought of it quite in the, the way I have learned it since this project began. Sort of trying to dissect all of the things that go into making an implementation work, taking something that is somewhat abstract and theoretical and turning it into something that can be used by people and implemented to get results. How do you take something that is usually measured in a clinical environment and see how it works in the real world? (Community partner)

*Respect culture of the setting* is defined as acknowledging differences between partners regarding their work settings. Some Institute scholars developed an understanding of community agency culture as a result of the service-learning project, allowing

them to see how the agencies operate in an informal way. Respect culture of the setting was also reflected in the coding of trust and mutual respect and respect for diversity. Scholars who were also full-time employees of an agency noted that the Institute's structure was geared more toward someone who was already acclimated to the university culture (e.g., knowing semester start date).

Community partners appreciated the flexibility because it allowed the program to work well with their agency's day-to-day operations. Some community partners thought that it was very meaningful that the findings could be applied to their immediate needs and met their timeline.

> What I did worked well for us, may not for someone else. (Community partner)

In addition, the community partners noted how important it was for the Institute scholars to come to the agency in person and connect with their staff. One academic mentor noted that the Institute scholars who were from the academic side gained a better perspective and appreciation for working with community partners.

## Recognizing Challenges, Benefits, and Outcomes

Finally, the model notes the importance of acknowledging *potential challenges and threats* to developing the community–university partnership while also noting the *benefits and outcomes* experienced by all partners. These factors are important for considering the sustainability of community–university partnerships.

**Challenges**. The model provides examples of potential challenges and threats to the development of a sustainable community–university partnership. One of the examples was time commitment, given that both Institute scholars and community partners discussed timing as a challenge. The duration of the graduate certificate program was four semesters, with classes offered each academic semester. Classes from January until May were didactic, which allowed Institute scholars to become familiar with translational research. Subsequent to this, the Institute scholars were able to plan their service-learning projects, which began during the early summer months. There was a sense that the timeline was too short and that there were not clear expectations about the time commitment.

The time and commitment. It does state on paper that it is a year commitment, but for us it's going above and beyond. Because the timeline is so short, we didn't start data collection until August or September and we were expecting to be done with that by December and have analysis done. It was tight so we obviously just continued past the conference doing work on this, which is fine. I just didn't anticipate it. (Institute scholar)

[In] hindsight [we] may not have taken it on when we did. I think we were approached just because we are the lead agency, [a] well known organization. The potential for projects was phenomenal… this became another thing on the do list. Although we embraced it, we wanted it, time for us probably wasn't the best. (Community partner)

Another example of a potential challenge was difficulty in managing project logistics. Logistics in this case related to competing priorities, transportation, and scheduling.

There was difficulty and I think that came from a lack of understanding that everyone has a different perspective. There was difficulty with navigating schedules… it's important to be flexible and implement the project to the best of everyone's ability. (Institute scholar)

More opportunities to meet with them [community partners] on campus instead of going all the way out to the agency. But I know that is part of being a researcher, that we have to go out to them. (Institute scholar)

Community partners found they had unexpected expenses associated with the project, and academic mentors noted that the Institute scholars had difficulty making appointments with them and meeting deadlines. One community partner mentioned that they personally took on all the communications regarding the logistics of the project because they did not want to burden other staff. Some Institute scholars wanted more interactions with other staff.

> Planning was great. We planned more than we imple-
> mented. We planned for a lot of interviews, but we
> didn't get anywhere near that. We only did a third of
> what we planned. We found it difficult… finding times
> to meet with the community agency. If they were more
> aware of the project as opposed to just the community
> partner, I think things would have run more smoothly.
> (Institute scholar)

Community partners discussed other challenges, including
concerns about project sustainability. In addition, perceived dif-
ferences in priorities of community partners versus the university
may have challenged the collaboration.

> I think that the hurdle for the university seems to be that
> it really is all about research and making the connection
> to, you know, research is in a bubble, and life isn't, you
> know, makes it really hard for the researchers who are
> leading it to, and although they are bright, to work in
> and to effect change in an organization. So I found that,
> that hurdle still exists. Bench to trench is just really a
> hard hurdle to get over. (Community partner)

> I think for it to be valuable for us it has to impact some-
> thing we are doing, because we are spending time and
> effort—it has to come back and effect change here and
> I am not sure that we are getting there. (Community
> partner)

Finally, entering into research can be daunting for some commu-
nity partners, as the information gained from the research may not
reflect positively on the community agency.

> Research is one of those things for me that is really
> exciting but scares me to death too. You can collect a
> lot of data that demonstrates not what you want. It is
> very important to have a comfortable relationship with
> people. (Community partner)

Participants did not identify other challenges and threats sug-
gested by the model. Issues such as power and resource inequity
and conflicts of interest did not emerge. This may be due to the
nature of the service-learning model, which emphasizes a rec-

ognized collaborative approach to project development from the initiation of the partnership. Similarly, the service-learning model also emphasizes a team-based research initiative that may forestall any potential conflicts of interest. The project's scope is mutually defined, with the needs of researchers and community partners bearing equal weight.

**Benefits and outcomes**. For Institute scholars and community partners, learning opportunities emerged from the collaboration. Institute scholars developed a new appreciation for translational research.

> I feel like translational research is so important. And I feel like that is our biggest problem today. We have so much on paper, in theory, but every community is so different, and you know if only we could give a handbook to everyone then the world's issues would be solved. But it doesn't work that way. So that piece, that gap, is like really what drives behavior at all levels of the system, from individual to political behavior. If that could be fined-tuned, then it would solve the world's problems. (Institute scholar)

Community partners gained information that changed how they went about their day-to-day business. One partner plans to change their staff training as a result of the collaboration.

> When you hear them [needs of staff] from outside looking in, can shed different light on it. (Community partner)

> Impacting the programs the project looked at—learned what was happening with each program being implemented in several places. The team was able to take a deeper dive into the implementation of programs the agency had not previously been able to. They learned what's happening with each program's implementation. (Community partner)

> I love that we are helping the community agency understand implementation science. Providers desperately need to know how to implement and sustain an [evidence-based] practice. (Academic mentor)

> We want to be more evidence-based… fidelity and collecting data. We want to be better at that… now we are going to begin to log the information and share the information amongst each other because there is a way staff view comments about how the intervention worked. I think collectively it is going to grow. Administratively, I see it as we are delivering services in a more data driven world. (Community partner)

Another benefit from the collaboration was an influence on the career trajectories of Institute scholars. Some Institute scholars indicated that the experience made them better job candidates.

> There is a job that I am being considered for that deals with translational research. So this experience makes me a viable candidate. The experiences during my time with the Institute make me stand out. (Institute scholar)

Scholars who were also employed at a community agency integrated the research efforts into their current job to help them further their careers. An agency also hired an Institute scholar to work with them as a result of the project. One community partner saw the Institute as a perk to offer to exceptional employees.

> It gives me something to give someone who works hard here a perk, because we want them to stay here and stay engaged. If you can do things like that I think it is helpful. (Community partner)

Continued collaboration beyond the scope of the project is either already occurring or anticipated to occur based on the experience with the collaboration. Institute scholars and community partners were planning for future copresenting opportunities, and academic mentors developed an interest in working with collaborating agencies in the future.

> I really got to know the organization and I love it now. I would be proud to be on their board. (Academic mentor)

Community partners also discussed having a useful product from the collaboration that validated their current efforts.

It felt very real, and with good fruitful results. (Community partner)

Well at first I wasn't really sure of what to expect so I was letting it play out, to sort of see what would come of it, and honestly at the end, once the data was collected and we sort of got to see what the students had put together I was really pleasantly surprised with the value of what they were collecting. (Community partner)

It validated that we are on the right track. (Community partner)

They looked at things that either we don't have the time to or had not thought to look at. (Community partner)

What is unique about this, okay, is that we had just shared the findings, what the parents had said, we [the community agency] had just completed an assessment and identified our goals for this coming year. They mirrored each other. (Community partner)

I consider what we have done so far, really alive and really making a contribution, making a difference. I value that. I always tell people we are not putting books on shelves, we are doing things. That is [what] I think translational research is, making it meaningful for the issues we are dealing with. (Community partner)

In addition, community partners also saw the community–university partnership as raising the credibility of their organization and helping the community develop confidence in the agency.

Parents have an opinion about getting their kids help. Why did they pick us? When you see the university involved in it, it raises the credibility of who we are. (Community partner)

I think it is good for the families we serve to know we have relationship with the university. That it is not just

"internet therapy," we are not just pulling something off of the internet and doing it, that there is actually depth and breadth. I think that gives people confidence in your ability to make a change in their kids' lives. (Community partner)

## Limitations of Study

This evaluation has its limitations. First, this article represents results from the first year of the project; a more comprehensive application of the model will be established later in the project's life cycle, as future cohorts of Institute scholars, academic mentors, and community partners complete the program. Subsequent data reflecting the implementation model may also have implications for project sustainability. Second, each interview reflects contact with a participant at a single point in time. Follow-up data collected from participants could make the model more explanatory.

## Conclusions and Implications

Framing the Institute's evaluation using the interactive and contextual model developed by Suarez-Balcazar et al. *(2005)* was a useful approach. The model created a mechanism for critical reflection on the benefits and challenges of developing and nurturing community–university partnerships. Discussions of project successes reflected the importance of taking time to establish trust and mutual respect, indicating that this is a critical aspect of this model and thus also a key construct to include in future evaluations. Recent research regarding community–university partnerships also noted that establishing trust has been found to be important for successful projects, and the history between partners can also influence trust *(Hicks et al., 2012; Simonds et al., 2013)*. Considerable overlap was found between trust and mutual respect and other constructs of the model, demonstrating that it is a core variable of successful partnerships.

Considering challenges experienced by Institute participants in light of this model and the reciprocal nature of its constructs will contribute to problem solving and planning for the future. Taking time to establish trust and mutual respect will be critical for the Institute to effectively sustain partnerships with community agencies. In addition, the experiences of Institute scholars, academic mentors, and community partners enabled us to identify additional challenges and benefits from community–university partnerships

for the model developers or model users to consider. One particular challenge in a community–university partnership is acknowledging that community partners may find research daunting because results may reflect badly on their organization. On the other hand, community partners also recognized that the partnership enhanced the reputation of the agency in the community as well as providing it with a useful product for daily operations.

Results suggest this model was useful both to characterize the experiences, organization, and community partnerships encountered in service-learning and to inform the Institute's leadership team of the strengths of the program as well as needed improvements. Although we found the contextual and interactive model of community–university collaborations to be useful in the design and implementation of process evaluations of community–university partnerships, we recommend further evaluation of some specific items in light of the proposed constructs based on this evaluation (see Table 3).

For future evaluations, our findings indicate that when evaluating the gaining entry into the community portion of this model, specific assessment items should inquire about expectations and the context of previous working relationships among partners. To assess the process of developing and sustaining collaborations, evaluating trust and mutual respect is critical, and potential inquiries regarding trust should review the perceived adequacy of time and level of commitment of each partner. Understanding the adequacy of communications will require exploring the willingness of partners to share information and resources, the frequency of communications, the open discussion of expectations, and the continuous feedback process. In evaluating the success of developing the action agenda for a mutually beneficial project, future evaluations should survey adequacy of time spent building respect among partners.

Although the constructs respect for diversity, culture of learning, and respect for culture of the setting were not reflected as frequently as other constructs in the model, participants discussed aspects of each construct, and the information obtained from these discussions can be used in framing future evaluations. When inquiring about respect for diversity, it will be important to discuss attitudinal changes and to understand preferences of all partners. Culture of learning evaluation items should discuss reciprocal learning experiences and understanding knowledge of others. Evaluating respect for culture of the setting items should

involve discussing flexibility and efforts to get to know the partners in their own setting.

Table 3. *Items Recommended for Future Evaluations Utilizing This Model*

| Model Construct | Specific Items for Future Evaluation |
|---|---|
| Gaining entry | Expectations of partners |
| | Context of previous working relationships |
| Developing and Sustaining Collaboration | |
| Trust and mutual respect | Perceived adequacy of time |
| | Perceived adequacy of commitment to the project |
| Adequate communication | Willingness to share information and resources |
| | Frequency of communication |
| | Open dialogue regarding expectations |
| | Providing ongoing feedback |
| Respect for diversity | Understanding preferences of partners |
| | Attitudinal change toward partners |
| Culture of learning | Reciprocal learning experiences |
| | Acknowledging knowledge of partners |
| Respect culture of setting | Level of flexibility |
| | Steps taken to familiarize oneself with the partner's setting |
| Develop action agenda | Time taken to build trust and respect before setting agenda |
| | Mutually beneficial project goals |
| Recognizing Benefits and Challenges | |
| Benefits and outcomes | Career changes |
| | Collaborations occurring outside the scope of the original project |
| | Partnership's influence on credibility in the community |
| Challenges and threats | Logistics management (time, effort, transportation, etc.) |
| | Differing priorities |
| | Fear of involvement in research |
| | Sustainability concerns |

Beyond the model's suggested benefits and outcomes constructs, future evaluations of community–university partnerships should also consider questions about career changes, collaborations occurring outside the scope of the project, and the partnership's influence on credibility in the community. Finally, when

exploring challenges, it will be important to review logistics management, differing priorities, fears regarding research, and sustainability concerns.

Further, since measuring levels of participation and partnership in behavioral health research efforts is a complex endeavor, future evaluations should occur continually throughout the stages of the project *(Khodyakov et al., 2013)*. The Institute could also inquire more into the structure and process of the mentorship experience to identify best practices for knowledge translation in mentoring relationships *(Gagliardi et al., 2014)*.

A recently published framework for evaluating community–university partnerships found that four constructs were critical across all phases of project development: trust, capacity, mutual learning, and power dynamics *(Belone et al., 2014)*. This same team of researchers also produced a matrix of available measures designed as a toolkit for those involved in community–university partnerships to identify potential evaluation instruments *(Sandoval et al., 2011)*. Sandoval et al.'s toolkit includes several evaluation instruments focused on concepts identified in our evaluation as important for community–university collaborations including university capacity, community partner capacity, trust, communication, mutual respect, flexibility, and diversity. The identification of these concepts, coupled with their inclusion in the toolkit, indicates that there are opportunities to focus specifically on these concepts in future evaluations of community–university partnerships. Future research utilizing the interactive and contextual model of collaboration should evaluate the utility and psychometric properties of instruments measuring the capacity of collaborating partners as well as trust, communication, respect, flexibility, and diversity *(Suarez-Balcazar et al., 2005)*.

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# Community Health Needs Assessment in a Rural Setting: Foundation for a Community–Academic Partnership

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## Abstract

The Community-based Cooperative for Studies Across GEnerations (CoSAGE) is a rural community–academic partnership with the long-term goal of developing community- and individual-level interventions to promote community well-being. The purpose of this study was to conduct a community needs assessment to solicit perceptions of the characteristics of the community, health-related resources, health-related barriers, and high-impact health problems and environmental factors. Key informant interviews ($N = 30$) were conducted with community leaders representing schools, businesses, churches, health care providers, and government. Thematic analysis was used to identify common themes across respondents. Church, family, and schools emerged as central community resources. Age-related hearing impairment was endorsed as the highest impact health condition, and lack of jobs was the highest impact environmental factor. These results provide insights into the health-related resources and needs of rural communities. Findings will be utilized to develop and prioritize a community-driven research agenda.

## Introduction

*T*he health of rural-dwelling people is an important area of concern in today's health care system. Nearly 20% of the U.S. population, or roughly 60 million people, reside in rural settings. Rural settings are defined as territories, populations, and housing units located outside urbanized areas, as well as urban clusters with fewer than 2,500 residents *(United States Census Bureau, 2010)*. Rural settings differ from urban settings with regard to both demographic and economic indicators. For example, rural populations tend to be older than urban populations *(Meit et al., 2014)*. Rural settings tend to be characterized by lower income and increased levels of poverty compared to urban settings *(Meit et al., 2014)*. For the first time, rural areas experienced a small decline in population between 2010 and 2012 *(USDA, 2013)*. This population

decline has the potential to exacerbate rural–urban disparities in economic indicators, such as employment rates and poverty levels *(USDA, 2013)*.

Disparities between rural and urban settings are also critical in the area of health. Rural health disparities have long been observed and are widening. For example, Singh and Siahpush *(2013)* recently reported that age-adjusted all-cause mortality rates increased with levels of rurality, increased mortality rates persisted after adjustment for poverty level, and the degree of disparity has increased over time. Four causes of death accounted for 70% of these disparities: heart disease, unintentional injuries, chronic obstructive pulmonary disease (COPD), and lung cancer. Attention to and elimination of these rural–urban health disparities are important goals within Healthy People 2010 and Healthy People 2020 *(U.S. Department of Health and Human Services, 2013)*.

Health-related research and evidence-based health innovations in rural settings are needed in order to achieve these Healthy People goals. However, evidence suggests that rural populations are currently underrepresented in research overall *(Baquet, Commiskey, Mullins, & Mishra, 2006)*, potentially limiting the generalizability of research findings. Recent examples of research designed to identify rural health disparities and their predictors, as a foundation for tailoring interventions, exist in the area of colorectal cancer screening *(Hughes, Watanabe-Galloway, Schnell, & Soliman, 2015)* and prescription opioid misuse *(Rigg & Monnat, 2015)*. Recent examples of interventions tailored to rural settings also exist in the areas of cardiovascular health in rural women *(Hageman, Pullen, Hertzog, & Boeckner, 2014)* and physical activity *(Mitchell et al., 2014)*. A lack of lay voice and community perspective from rural populations in the development and implementation of intervention or other types of research, however, may hamper the ultimate effectiveness and sustainability of community- and individual-level health interventions. Other barriers to dissemination that are particularly relevant to the adoption of health innovations in rural community settings include lack of acceptability of interventions, lack of tailoring programs to individual or community needs, and the imposition of interventions from the outside *(Glasgow & Emmons, 2007)*.

Engaged scholarship through community–academic partnerships provides a venue for meeting this critical need for rural-based health research in a manner that fosters meaningful and mutually beneficial outcomes for communities and institutions of higher education *(Kellogg Commission, 1999)*. The Community-based Cooperative for Studies Across GEnerations (CoSAGE) was

established in 2009 as a research partnership between an academic institution and a rural community. As a broad goal, CoSAGE aims to examine genetic, lifestyle, and environmental factors involved in complex health conditions. The long-term goal of CoSAGE is to develop interventions that are tailored at the community and individual level to decrease the negative impact of chronic health problems and promote both individual and community well-being. The CoSAGE project employs a community-based participatory research (CBPR) approach *(Minkler & Wallerstein, 2008)*. The rationale supporting the CBPR approach includes the desire to identify and prioritize a community-driven research agenda and the intention to link discovery with more rapid translation of knowledge into clinically useful information, taking into account the relationship between the individual and/or community and the surrounding physical and social environment. We contend that this innovative approach to the design, implementation, and translation of health research will yield sustained benefits for the community and academic partners.

The purpose of this article is to report findings from the first phase of the CoSAGE project, a mixed-methods community health needs assessment. The primary goal of the community health needs assessment was to gain insights into the characteristics of the community, as well as the perceived health resources and needs of persons residing in rural settings. Another goal of the community health needs assessment was to engage more broadly with community leaders about the CoSAGE project and plan. We employed four specific research questions: (1) How do community members describe their community? (2) What does the community identify as health-related resources? (3) What does the community identify as barriers to accessing health care? (4) What health conditions and environmental factors are perceived as high impact by the community?

## Materials and Methods

### Design

A cross-sectional, descriptive study design using qualitative and quantitative measures was used to address the research questions among a rural community engaged in a newly formed community-based health research project. The study was approved by the academic partner's Institutional Review Board; procedures to protect human subjects were followed throughout the study.

## CBPR Strategies

Several strategies and processes were developed and utilized to support the overall CBPR approach of this project. A research advisory committee (RAC), made up of 16 community members who reside in the partner community, was established. RAC members were recruited primarily based on their shared interests in health research within their community. Secondary goals included involving partners from all three villages that make up the partner community, partners of both sexes, and as broad an age range as possible. To that end, RAC members were nearly evenly distributed across the three villages. Fifty-three percent of RAC members were female; 50% were retired. Employment sectors represented by RAC members included primary and secondary education, school administration, farming, health care (nurses, analyst for a commission on disability concerns), clergy, telecommunications, public utilities, and engineering. Monthly meetings are held with the RAC in a project space located within the partner community. RAC members were full partners in establishing the vision, mission, and broad goals of CoSAGE. In addition, members participated in all phases of this study, including the identification of key informants, development of the semistructured interview guide, pilot testing of the Community Impact Inventory, interpretation of study results, and dissemination of findings.

## Sample and Setting

The CoSAGE partner community consists of individuals who live in a 90-square-mile area that includes three villages in the Great Lakes region of the U.S. Upper Midwest. The populations of the three villages themselves are small, ranging form 470 to 1,209 residents, and the landscape is characterized by farmland and flat, open countryside. The partner community is designated as a nonmetropolitan area, given that urban communities of 2,100–49,999 people are located within 30–40 miles of the three villages in each direction *(U.S. Department of Agriculture, 2013)*. Primary care providers and small hospitals are located 20-30 miles in any direction from each of the villages. The history of the original settlement of the three villages by German Catholic immigrants and evidence for subsequent high kinship was previously described *(Bonner et al., 2014)*.

Community leaders were recruited from the three villages, representing the school, business, church, health care, and government sectors. Consistent with a needs assessment approach

*(DiCicco-Bloom & Crabtree, 2006)*, purposive sampling and snowball/network sampling were used to identify leaders from each sector from all three villages and to achieve balance by gender and across age groups. The RAC contributed to building the pool of potential participants. In addition, community leaders were asked at the conclusion of the interview if there was anyone else they felt it would be important for the research team to contact.

## Instruments

**Demographics.** Brief demographic data were collected as part of the semistructured interview guide to describe the sample and to help monitor the representativeness of community leaders across the three villages.

**Semistructured interview guide and the Community Impact Inventory.** A semistructured interview guide was developed by the researchers in partnership with the RAC. The interviews began by asking informants to rate the overall quality of life in their community on a 4-level descriptive scale (*excellent, good, fair*, or *poor*) and about how they would describe their community. Follow-up probes were used to elicit the informants' perceptions of the community's health-related strengths and needs, health resources and barriers, and high-impact health problems and environmental factors.

A paper-and-pencil questionnaire, the Community Impact Inventory, was modeled after other rural community health needs assessment surveys *(Beverly, Mcatee, Costello, Chernoff, & Casteel, 2005)* and modified by the investigators in collaboration with the RAC, to measure community leader perceptions of the extent to which a set of 39 health problems and 26 environmental factors had impact on the community. For the purposes of this study, *impact* was not defined as the frequency of a given health problem or exposure. Rather, impact was operationalized by asking participants to consider the extent to which the health problems and environmental factors influenced the overall wellness, quality of life, and resources of their community. The questionnaire was designed using a 4-point Likert scale, with 1 indicating *no perceived impact on the community* and 4 indicating *major perceived impact on the community*. The draft survey was pilot tested by the RAC members, who completed the survey and were asked to provide feedback on the clarity and completeness of the questions, as well as the perceived relevance of the questions to their community.

## Procedures

**Recruitment.** An initial pool of 40 potential participants was mailed an introductory letter describing the parent study and community assessment phase of the project. The letter indicated that potential participants would receive a follow-up phone call inviting them to participate. If potential participants were interested, a face-to-face interview was also scheduled at that time. Some additional follow-up contact also occurred via e-mail communication.

**Data collection**. Data collection occurred at a time and place convenient to the community leader, and interviews were conducted by research team members. Participant responses were recorded through note-taking during the interview. Notes were recorded as completely as possible, using the actual words of the informant. A note-taking strategy is consistent with key informant interview techniques *(Kumar, 1989)*. Note-taking was also selected over audiotaping due to the outsider status of the investigators in the broader community and concerns that audiotaping might negatively influence participants' willingness to freely share responses. Interviews ranged from 60 to 90 minutes in length and were completed over a 12-month period.

**Data analysis**. Data from the semistructured interviews and the Community Impact Inventory were entered through a campus data-entry interface into a secure database. Data were downloaded into an Excel spreadsheet for further analysis.

For the qualitative data, interview transcripts were coded by the authors using thematic analysis as described by Braun and Clarke *(2006)*. The overall analysis involved identifying descriptive categories of the data and common themes within and across these coding categories and was previously described by Goris, Schutte, Rivard, and Schutte *(2015)*. The themes and subthemes generated through this method of analysis were presented to the RAC as a strategy for evaluating the content validity of the analysis. RAC members were asked to consider the following questions in their review of the findings: (1) Do these themes seem accurate, based upon your understanding of the community? (2) Is anything missing; did we leave anything out? (3) Is anything there that does not belong? (4) Are the words we used to label the themes sensitive to the values and feelings of your community? No major concerns were identified by the RAC members. However, they did think it was important to include additional denominations (e.g., Lutheran and Baptist) in the discussion of the role of the church within this predominantly Catholic community.

Data from the Community Impact Inventory were analyzed using SPSS Statistics software, Version 19.0. Descriptive statistics were used to describe the sample and to rank the health and environmental factors by perceived impact.

## Results

**Sample demographics**. Thirty community leaders completed the key informant interviews. Participants exhibited a mean age of 57.5 (*SD* = 12.8) years, ranging from 35 to 86 years of age. Seventy-one percent of the sample was less than 65 years of age. Females made up 57% of the sample. Participants were distributed across the community sectors: church (19%), education (19%), government (10%), health care providers (13%), business (26%), and other (6%). All three villages within the partner community were represented in the interviews, with approximately 27% of the total participants from each village. Six participants (20%) worked or provided services in the partner community but lived elsewhere.

**Community characteristics and resources**. Most informants reported the overall quality of life in their community as good (*n* = 14; 50%) or excellent (*n* = 13; 48%). A single informant (4%) reported overall quality of life as poor. Considerable overlap occurred in themes emerging in response to the questions "How would you describe your community?" and "What are the community strengths and resources?" Four essential themes emerged in response to these questions and reflect characteristics of the people and their relationships with each other: *close-knit, church is central, family is central, and school is central.*

*Close-knit*. Close-knit, defined as being held tightly together through social and cultural ties, emerged as a prominent descriptor of the partner community. Examples of this theme included "Community closeness, not just related, binds [together] to draw off strength"; "Cohesiveness"; and "Close-knit, keep eye out [for each other]." Two subthemes in this category illustrated the community manifestations of their close-knit nature: *everyone helps* and *everyone knows*.

*Everyone helps*. Descriptions of the closeness of the community coincided with descriptions of help, support, and working together to assist other community members in need. Informants noted, "Community is where to be if you need help. You are not alone" and "When you need someone, they are there for you."

*Everyone knows*. Similarly, the closeness of the community manifested in a heightened awareness of other peoples' lives, as

reflected in such statements as "Everyone knows what is going on" and "People are aware of each other's well-being." Community leaders also recognized that this characteristic of the community could be considered both a strength and a challenge. On one hand, other people readily know when another individual needs help. On the other hand, people may hesitate to seek help for fear of a lack of privacy, as illustrated in the following response to a question about barriers to health care: "Possibly the tight knit community because you don't want everyone to know you have a problem. If you go to the doctor, it is public knowledge."

*Church is central*. The church emerged as another prominent characteristic of the partner community, playing an integral role in community life. Responses that illustrate this major theme include "Church is at the heart of the community" and "The church is a very strong backbone [of the community]." Three subthemes further describe the nature of the church's centrality in the community: church as relating point, church as community resource, and faith.

*Church as relating point*. The church provided a central organizing social connection for community members. Members of the community defined their relationships with each other through the church. As one participant described, "The church is the social network." Another participant described the church as "the hub of the community; the common relating point."

*Church as community resource*. In addition to providing a social connection for community members, the church also provided tangible health-related resources that are central to community life. Participants described a variety of resources provided by the church, including meals, organization of volunteers to assist with transportation needs, and a location for social and physical activities.

*Faith*. Faith, defined as strong religious beliefs, emerged as an important strength of the community within the *church is central* theme. Catholicism was identified as the primary, but not exclusive, faith tradition within the partner community, with Baptist and Lutheran churches also present in the villages. The descriptions "faith-based," "Christian," "good values," and "good Christian ethics" further illustrate the subtheme.

*Family is central*. The central nature of the family emerged as a third prominent characteristic of the partner community, also playing a critical role in the life of the community as a whole. Examples of this theme included the following descriptions: "family

oriented," "sense of family," "family bond and family values," and "family tradition." The central role of family was particularly evident in relationship to the needs of older adults within the community as previously described by Goris et al. *(2015)*. The following three subthemes, however, illustrate the specific aspects of family identified as central to the overall community: intergenerational relationships, family responsibility, and relatedness.

*Intergenerational relationships.* An important aspect of the central nature of family in the community was the high value placed on intergenerational ties. Many participant responses referred to the crossing of generations or age groups, for example: "Big supporters of extended families," "Grandparents [are] involved with grandchildren and great grandchildren and community activities," and "There is no generation division as in urban areas." Although this subtheme emerged as a clear strength, other responses suggested that the intergenerational ties can also have less positive outcomes in relation to some behaviors. One participant highlighted this point regarding drinking: "Grandpa drank, dad drinks, considered normal for kids to drink."

*Family responsibility.* The family also provided a variety of health-related resources that were central to the community. Further, this support is considered an important responsibility of the family as illustrated by the following data: "Family's commitment to children"; "It is the family's job to help take relatives to doctors though"; "If they are from [the] area, there is a big family, they care for you or hire help. Always taken care of by family, otherwise [there are] not resources"; and "Family takes care of relatives."

*Relatedness.* The third subtheme related to the centrality of family was identified by a subset of participants and was labeled *relatedness*, or the recognition of the biological connection between families within the partner community. Because many of these individuals are descended from the original community founders, participants recognized that "a lot of families are related to each other," contributing to the close-knit characteristic of the community.

**School is central.** *School is central* is the final prominent theme that emerged as a descriptor and resource of the partner community. This theme relates to the integral role that school plays in community life. Like church and family, the schools also provide important tangible community resources, many of which are directly related to health. For example: "The school's doors are open for community members to walk. Community members walk track at school; it is available to the community"; "Towns support school

activities and utilize rural schools for activities"; and "Schools are the focal point of two communities."

Strong church, family, and school ties were identified as important characteristics of the partner community. These strong interrelationships provided multiple tangible and intangible resources that supported the health and well-being of community members.

**Community barriers to access**. Community leaders were also asked to identify barriers to accessing health care in their communities. Two themes, *rural economy* and *distance to resources*, emerged in response to this question. These factors reflect characteristics of the physical environment and relationships between the partner community and surrounding communities. These two themes were identified as barriers to access for older adults in particular *(Goris et al., 2015)* and as themes relevant to the community at large.

*Rural economy*. The nature of the rural community and economy emerged as a barrier to health care. On one hand, the community was perceived as being "solid, middle class" with "many families doing well." On the other hand, participants recognized that "big industry pieces are lacking," and the "town [is] too small to support a doctor." Lack of local health care providers, especially specialist services, was a recurrent need identified by community leaders.

*Distance to resources*. Distance to resources, a theme reflecting the proximity of the partner community to resources, emerged in relation to access to health care providers and services. Regional health care providers are located 20-30 miles away from the three rural villages. Some community leaders perceived these resources as being in close proximity. Other community leaders, however, saw the physical distance and limited transportation options as a barrier to health care, as shown in the following quotes: "Travel and distance [for] those who don't drive"; "No transportation for older people"; and "[If you are] disabled, such as breaking a hip; [you] have to go out of town for rehab." All themes and subthemes are summarized by relevant research question in Table 1.

**Table 1.** *Summary of Themes According to Research Question*

| Research Question | Theme | Subtheme | Definition |
|---|---|---|---|
| How would you describe your community? What are the community strengths and resources? | Close-knit | | Members of the community are held tightly together through social and cultural ties, reflecting community cohesiveness. |
| | | Everyone helps | Members of the community support and care for each other. |
| | | Everyone knows | Closeness of the community is manifested in a heightened awareness of other peoples' lives. |
| | Church is central | | The church plays an integral role in community life. |
| | | Church as relating point | The church provides health-related resources that are central to the community. |
| | | Faith | Strong religious beliefs are an important strength of the community. |
| | Family is central | | Families play an integral role in community life. |
| | | Intergenerational relationships | Families place a high value on crossing generations or age groups. |
| | | Family responsibility | The family provides health-related resources that are central to the community. |
| | | Relatedness | Families recognize the biological connection between families in the community. |
| | School is central | | Schools play an integral role in community life. |
| What are barriers to accessing health care in your community? | Rural economy | | The rural nature of the community affects the economy and access to health care. |
| | Distance to resources | | The relative proximity to resources affects access to health care. |

**Table 2.** *Health Problems Ranked According to Mean Impact Score*

| Health Problem | N | No Impact N (%) | Minor Impact N (%) | Some Impact N (%) | Major Impact N (%) | M Impact (SD) | Min | Max |
|---|---|---|---|---|---|---|---|---|
| Age-related hearing impairment | 23 | 2 (8.70) | 1 (4.35) | 16 (69.6) | 4 (17.4) | 2.96 (.77) | 1 | 4 |
| Congestive heart failure | 23 | 0 | 7 (30.4) | 11 (47.8) | 5 (21.7) | 2.91 (.73) | 2 | 4 |
| Hypertension | 22 | 2 (9.1) | 3 (13.6) | 12 (54.5) | 5 (22.7) | 2.91 (.87) | 1 | 4 |
| Arthritis | 24 | 0 | 6 (25.0) | 15 (62.5) | 3 (12.5) | 2.88 (.61) | 2 | 4 |
| Heart attack | 25 | 2 (8.0) | 5 (20.0) | 13 (52.0) | 5 (20.0) | 2.84 (.85) | 1 | 4 |
| Cancer (other) | 25 | 1 (4.0) | 6 (24.0) | 15 (60.0 | 3 (12.0) | 2.80 (.71) | 1 | 4 |
| Stroke | 23 | 2 (8.7) | 6 (26.1) | 10 (43.5) | 5 (21.7) | 2.78 (.90) | 1 | 4 |
| Alzehiemer's disease | 27 | 1 (3.7) | 9 (33.3) | 12 (44.4) | 5 (18.5) | 2.78 (.80) | 1 | 4 |
| Cancer (breast) | 26 | 1 (3.8) | 7 (26.9) | 16 (61.5) | 2 (7.7) | 2.73 (.67) | 1 | 4 |
| Cancer (prostate) | 25 | 2 (8.0) | 7 (28.0) | 13 (52.0) | 3 (12.0) | 2.68 (.80) | 1 | 4 |
| Diabetes | 24 | 1 (4.2) | 10 (41.7) | 9 (37.5) | 4 (16.7) | 2.67 (.82) | 1 | 4 |
| Memory Loss | 23 | 3 (13.0) | 7 (30.4) | 9 (39.1) | 4 (17.4) | 2.61 (.94) | 1 | 4 |
| Depression | 24 | 3 (12.5) | 8 (33.3) | 10 (41.7) | 3 (12.5) | 2.54 (.88) | 1 | 4 |
| Mental health | 23 | 3 (13.0) | 7 (30.4) | 11 (47.8) | 2 (8.7) | 2.52 (.85) | 1 | 4 |
| Cancer (lung) | 25 | 2 (8.0) | 10 (40.0) | 11 (44.0) | 2 (8.0) | 2.52 (.77) | 1 | 4 |
| ADHD | 23 | 4 (17.4) | 7 (30.4) | 10 (43.5) | 2 (8.7) | 2.43 (.90) | 1 | 4 |
| Cancer (colon) | 26 | 3 (11.5) | 11 (42.3) | 10 (38.5) | 2 (7.7) | 2.42 (.81) | 1 | 4 |
| Osteoporosis | 24 | 4 (16.7) | 7 (29.2) | 12 (50.0) | 1 (4.2) | 2.42 (.83) | 1 | 4 |

| Condition | N | | | | | Mean (SD) | | |
|---|---|---|---|---|---|---|---|---|
| Dental problems | 23 | 5 (21.7) | 6 (26.1) | 10 (43.5) | 2 (8.7) | 2.39 (.94) | 1 | 4 |
| Cataracts | 23 | 4 (17.4) | 7 (30.4) | 11 (47.8) | 1 (4.3) | 2.39 (.84) | 1 | 4 |
| Emphysema | 23 | 3 (13.0) | 11 (47.8) | 8 (34.8) | 1 (4.3) | 2.30 (.77) | 1 | 4 |
| Glaucoma | 23 | 5 (21.7) | 9 (39.1) | 7 (30.4) | 2 (8.7) | 2.26 (.92) | 1 | 4 |
| Autism | 26 | 3 (11.5) | 15 (57.7) | 7 (26.9) | 1 (3.8) | 2.23 (.71) | 1 | 4 |
| Melanoma | 23 | 7 (30.4) | 5 (21.7) | 10 (43.5) | 1 (4.3) | 2.22 (.95) | 1 | 4 |
| Asthma | 22 | 4 (18.2) | 11 (50.0) | 7 (31.8) | 0 | 2.14 (.71) | 1 | 3 |
| Congenital deafness | 23 | 7 (30.4) | 9 (39.1) | 6 (26.1) | 1 (4.3) | 2.04 (.88) | 1 | 4 |
| Birth defects | 23 | 4 (17.4) | 14 (60.9) | 5 (21.7) | 0 | 2.04 (.64) | 1 | 3 |
| Macular degeneration | 21 | 7 (33.3) | 7 (33.3) | 7 (33.3) | 0 | 2.00 (.84) | 1 | 3 |
| Pregnancy loss | 24 | 6 (25.0) | 14 (58.3) | 4 (16.7) | 0 | 1.92 (.65) | 1 | 4 |
| Irritable bowel syndrome | 22 | 7 (31.8) | 11 (50.0) | 3 (13.6) | 1 (4.5) | 1.91 (.81) | 1 | 4 |
| Diverticulosis | 16 | 6 (37.5) | 6 (37.5) | 4 (25.0) | 0 | 1.88 (.81) | 1 | 3 |
| Multiple sclerosis | 25 | 9 (36.0) | 11 (44.0) | 5 (20.0) | 0 | 1.84 (.75) | 1 | 3 |
| Prematurity | 23 | 7 (30.4) | 13 (56.5) | 3 (13.0) | 0 | 1.83 (.65) | 1 | 3 |
| Cerebral palsy | 23 | 10 (43.5) | 10 (43.5) | 3 (13.0) | 0 | 1.70 (.70) | 1 | 3 |
| Celiac disease | 23 | 10 (43.5) | 11 (47.8) | 2 (8.7) | 0 | 1.65 (.65) | 1 | 3 |
| Epilepsy | 23 | 11 (47.8) | 10 (43.5) | 2 (8.7) | 0 | 1.61 (.66) | 1 | 3 |
| Cleft lip and palate | 23 | 12 (52.2) | 10 (43.5) | 1 (4.3) | 0 | 1.52 (.59) | 1 | 3 |
| Crohn's disease | 22 | 12 (54.5) | 9 (40.9) | 1 (4.5) | 0 | 1.60 (.60) | 1 | 3 |
| Hemochromatitis | 22 | 17 (77.3) | 4 (18.2) | 1 (4.5) | 0 | 1.27 (.55) | 1 | 3 |

*Note.* Some percentages total more or less than 100 due to rounding.

# High-Impact Health Problems and Environmental Factors

Health problems were ranked according to mean impact score; they are summarized in Table 2. Age-related hearing impairment attained the highest mean impact score ($M$ = 2.96, $SD$ = 0.77), and hemochromatosis yielded the lowest mean impact score ($M$ = 1.272, $SD$ = 0.55). Health problems that were endorsed as having some or major impact by more than 60% of the community leaders included age-related hearing impairment (87%), hypertension (77%), arthritis (75%), heart attack (72%), cancer (other) (72%), congestive heart failure (70%), breast cancer (69%), stroke (65%), Alzheimer's disease (63%), and prostate cancer (64%). Community leader perceptions of impact were largely congruent with county vital statistics (see Table 3), with notable exceptions. For example, age-related hearing impairment emerged as the highest impact problem as perceived by community leaders but, as expected, was not evident in the leading causes of death or hospitalizations in the partner community according to county vital statistics.

**Table 3.** *Comparison of Top 10 Health Problems According to Community Leaders (Ranked by Mean Impact Score) and County Health Indices (Ranked by Number of Deaths)*

| Rank | Community Leader Rating by Mean Impact Score | State Health Department County Health Profile, Leading Causes of Death (# deaths, 2010) |
|------|----------------------------------------------|----------------------------------------------------------------------------------------|
| 1 | Age-related hearing impairment | Heart disease (112) |
| 2 | Congestive heart failure | Cancer (109) |
| 3 | Hypertension | Chronic lower respiratory diseases (39) |
| 4 | Arthritis | Unintentional injuries (24) |
| 5 | Heart attack | Alzheimer's disease (23) |
| 6 | Cancer (other) | Stroke (20) |
| 7 | Stroke | Diabetes (15) |
| 8 | Alzheimer's disease | Kidney disease (13) |
| 9 | Cancer (breast) | Intentional self-harm (8) |
| 10 | Cancer (prostate) | Pneumonia/influenza (6)* |

*Note.* * Not included in Community Impact Inventory.

Environmental factors were also rated by key informants and ranked according to mean impact score (Table 4). Lack of jobs attained the highest mean impact score ($M$ = 2.62, $SD$ = 1.02), and unsafe school environment yielded the lowest impact score ($M$ = 1.20, $SD$ = 0.41). Only five environmental factors were endorsed

as having some or major impact by at least 50% of the community leaders, including lack of jobs (54%), exposure to herbicides (54%), unemployment (50%), exposure to fertilizers (50%), and underemployment (50%).

**Table 4.** *Environmental Factors Ranked According to Mean Impact Score*

| Environmental Factor | N | No Impact N (%) | Minor Impact N (%) | Some Impact N (%) | Major Impact N (%) | M Impact (SD) | Min | Max |
|---|---|---|---|---|---|---|---|---|
| Lack of jobs | 23 | 13 (15.4) | 8 (30.8) | 8 (30.8) | 6 (23.1) | 2.62 (1.0) | 1 | 4 |
| Unemployment | 26 | 3 (11.5) | 10 (38.5) | 9 (34.6) | 4 (15.4) | 2.54 (.91) | 1 | 4 |
| Herbicide exposure | 26 | 4 (15.4) | 8 (30.8) | 11 (42.3) | 3 (11.5) | 2.50 (.91) | 1 | 4 |
| Fertilizer exposure | 26 | 6 (23.1) | 7 (26.9) | 9 (34.6) | 4 (15.4) | 2.42 (1.0) | 1 | 4 |
| Underemployment | 26 | 6 (23.0) | 7 (26.9) | 10 (38.5) | 3 (11.5) | 2.38 (.98) | 1 | 4 |
| Lack of respite care for persons with dementia | 22 | 5 (22.7) | 7 (31.8) | 7 (31.8) | 3 (13.6) | 2.36 (1.0) | 1 | 4 |
| Insecticide exposure | 26 | 5 (19.2) | 11 (42.3) | 7 (26.9) | 3 (11.5) | 2.31 (.93) | 1 | 4 |
| Shortage of recreational facilities | 24 | 7 (29.2) | 9 (37.5) | 5 (20.8) | 3 (12.5) | 2.17 (1.0) | 1 | 4 |
| Poor road conditions | 25 | 8 (32.0) | 9 (36.0) | 5 (20.0) | 3 (12.0) | 2.12 (1.0) | 1 | 4 |
| Lack of affordable health care | 25 | 8 (32.0) | 7 (28.0) | 9 (36.0) | 1 (4.0) | 2.12 (.93) | 1 | 4 |
| Poverty | 24 | 6 (25.0) | 11 (45.8) | 6 (25.0) | 1 (4.2) | 2.08 (.83) | 1 | 4 |
| Lack of community information sources | 24 | 9 (37.5) | 7 (29.2) | 6 (25.0) | 2 (8.3) | 2.04 (1.0) | 1 | 4 |
| Lack of cultural activities | 24 | 9 (37.5) | 8 (33.3) | 5 (20.8) | 2 (8.3) | 2.00 (.98) | 1 | 4 |
| Aerial crop spraying exposure | 23 | 9 (39.1) | 10 (43.5) | 4 (17.4) | 0 | 1.78 (.74) | 1 | 3 |
| Odor pollution | 23 | 10 (43.5) | 10 (43.5) | 2 (8.7) | 1 (4.3) | 1.74 (.81) | 1 | 4 |
| Lack of affordable child care | 23 | 12 (52.2) | 7 (30.4) | 4 (17.4) | 0 | 1.65 (.78) | 1 | 3 |

| | N | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| Lack of affordable housing | 24 | 14 (58.3) | 6 (25.0) | 4 (16.7) | 0 | 1.58 (.78) | 1 | 3 |
| Crime | 25 | 12 (48.0) | 12 (48.0) | 1 (4.0) | 0 | 1.56 (.58) | 1 | 3 |
| Illiteracy | 25 | 13 (52.0) | 11 (44.0) | 1 (4.0) | 0 | 1.52 (.59) | 1 | 3 |
| Water pollution | 23 | 16 (69.6) | 3 (13.0) | 4 (17.4) | 0 | 1.48 (.79) | 1 | 3 |
| Noise pollution | 24 | 15 (62.5) | 8 (33.3) | 1 (4.2) | 0 | 1.42 (.58) | 1 | 3 |
| Poor traffic conditions | 23 | 16 (69.6) | 5 (21.7) | 2 (8.7) | 0 | 1.39 (.66) | 1 | 3 |
| Air pollution | 25 | 17 (68.0) | 7 (28.0) | 1 (4.0) | 0 | 1.36 (.57) | 1 | 3 |
| Lack of community green space | 23 | 17 (73.9) | 4 (17.4) | 2 (8.7) | 0 | 1.35 (.65) | 1 | 3 |
| Gang activity | 24 | 19 (79.2) | 5 (20.8) | 0 | 0 | 1.21 (.42) | 1 | 2 |
| Unsafe school environment | 25 | 20 (80.0) | 5 (20.0) | 0 | 0 | 1.20 (.41) | 1 | 2 |

*Note.* Some percentages total more or less than 100 due to rounding.

# Discussion

A mixed-methods approach to a community health needs assessment, as part of a community–academic partnership, provided important insights into the strengths supporting and challenges facing small rural U.S. communities today, especially in relationship to accessibility of health-related resources. Despite residing relatively close to larger cities, community leaders perceived distance from formal providers as a barrier to obtaining health care services for community members. Further, the small economic base within the partner community made it difficult to attract and sustain a formal network of health care providers and services. These findings are consistent with prior research demonstrating disparities in access to health care providers and services in rural areas compared to urban areas *(Bennett, Olatosi, & Probst, 2008)*. These findings also suggest additional opportunities for engaged scholarship at institutions of higher education to develop and deliver innovative care strategies in rural settings, such as student-led health clinics *(Stuhlmiller & Tolchard, 2015)* or lay health educators *(Krukowski et al., 2013)*, with a critical emphasis on community engagement, partnership, and capacity building.

Study findings also provide insights into the social structures that small rural communities use to support the health of their community members in the absence of formal, local health care resources. In this case, community members draw upon their close family, church, and school ties to monitor needs and to provide care, support, and resources, such as transportation and food. Interestingly, findings from this study are consistent with earlier research within this community that examined acculturation as well as the spatial orientation of community resources more than 40 years ago *(Deforth, 1970)* and more than 60 years ago *(Norris, 1950)*. In both cases, church was identified as holding a central position in the community. These prior findings lend validity to the results of this study; further, they suggest that these small villages are characterized by a remarkable social stability over time. The central role of the church in community life is also similar to the prominent role of faith-based organizations as sources of spiritual and social support described for African American communities in both urban and rural settings *(Ford, 2013; Lumpkins, Greiner, Daley, Mabachi, & Neuhaus, 2011)*.

In addition to providing important community-based perceptions of health-related strengths and needs in the rural United States, this community needs assessment provides a foundation for the broad goals of this community–academic partnership that is focused on the role of genes, lifestyle, and environment in common complex diseases. Community leader interviews afforded an important opportunity for trust building and colearning between community and academic partners as it allowed conversation about the project to extend beyond the immediate RAC members to the broader community. The key strengths of the study process were threefold.

First, the health assessment included questions to help build an understanding of the nature of the community, a critical component of engaged scholarship. Specifically, the focus of the community assessment provided an important description of the surface structure of the community; that is, the observable social and behavioral characteristics of the community as well as the community's deep structure such as community perceptions of the social, cultural, psychological, historical, and environmental influences on health behaviors *(Campbell et al., 2007)*. According to Campbell et al., knowledge of a community's surface and deep structure will increase the sensitivity (that is, the effectiveness and sustainability) of eventual health interventions by increasing both the feasibility of implementing the intervention and its overall impact. By inte-

grating qualitative data collection and analysis methods in the assessment strategy for this project, investigators obtained a particularly rich contextual description of the community that will undergird the development, prioritization, and implementation of a community-driven research agenda.

Second, both community assets and needs in relation to health were explored in order to inform subsequent capacity-building activities that leverage existing resources. Third, community leader ratings of the impact of health problems and environmental factors yielded findings that would not have been detected from county-level health statistics alone. For example, community ratings of the impact of health problems were congruent with the top 10 causes of mortality in the partner community, with the exception of age-related hearing impairment and arthritis. Although one would not expect to see these two conditions as causes of mortality, they were nonetheless perceived as relatively high-impact health concerns in the partner community.

CBPR approaches, in particular, have been increasingly used to guide research aimed at examining the interaction between genes, environment (exposures), and human health *(McCarty et al., 2008; O'Fallon & Dearry, 2001, 2002)*, especially in rural settings. Rural settings provide an advantageous platform for the study of complex diseases due to relative environmental homogeneity and a tendency for individuals in rural settings to live in the same environment over extended periods of time *(Igl, Johansson, & Gyllensten, 2010)*. In some cases, studies set in rural settings were initiated with a focus on a particular health problem or selected problems, such as obesity *(Mohatt et al., 2007)* and obesity-related phenotypes *(Bopp et al., 2012)*. In this case and others *(Igl et al., 2010)*, a broad assessment to determine high-impact and high-priority health problems was used, within a CBPR framework, to build subsequent research efforts toward the goal of a community-driven and engaged research agenda *(Wallerstein & Duran, 2006, 2010)*.

The process and findings of the CoSAGE project also hold important implications for community engagement and outreach in higher education in general. This project models the successful initiation of community engagement and scholarship at the investigator level partnered with a community at the grassroots level. The combination of grassroots engagement, a CBPR approach, and a needs assessment strategy was particularly powerful and effective in achieving the Kellogg Commission *(1999)* guiding characteristics of engagement, including responsiveness (i.e., listening to communities) and respect for partners (i.e., jointly defining problems and

solutions). The efforts reported here occurred early in the establishment of this community–academic partnership and provided an important trust-building and community-outreach activity. These early activities support our ongoing objective of achieving another guiding characteristic of engaged scholarship: the integration of discovery research, translation, teaching, and service (*Kellogg Commission, 1999)*. Selected examples of this integration through the CoSAGE platform include supporting dissertation research, facilitating on-campus research experiences for high school students, partnering in the provision of health fairs within the community, and distributing health promotion messages and resources related to hearing health.

In the area of discovery research, the community-level health assessment findings are being used to inform the next steps of the CoSAGE community–academic research partnership. Specifically, data are being used to guide the development of culturally-informed community engagement and recruitment strategies in order to build a research participant biorepository within the partner community. These findings are also playing an integral role in the prioritization of a locally relevant community research agenda focused on promoting hearing wellness and quality of life for persons with dementia and their families.

This study used a mixed-methods approach to a community-level health needs assessment that was designed to solicit perceptions of the characteristics of a rural community, health-related resources, health-related barriers, and high-impact health and environmental factors. Limitations, however, are acknowledged. First, although saturation of themes was reached in qualitative data analysis, the sample size was relatively small ($N = 30$) for the analysis of quantitative data. Therefore, the perceptions of community leaders regarding the high-impact health problems and environmental factors may not reflect the actual health status of the community at large and may not reflect the perceptions of less-integrated community members. To address this limitation, an individual-level needs assessment is under way. Specifically, community members are invited to contribute health data and a biologic sample to a community biorepository, which will provide for an examination of the presence of health problems, exposures, and relevant lifestyle behaviors in order to supplement our community-level assessment. A second limitation of this study is that community leader interviews were documented by hand in the field rather than audio-taped. Although investigators believe this was the best approach for building trust and soliciting information, relevant data units and

themes may have been lost during the handwritten transcriptions. To address this potential limitation, several strategies were used to verify study findings with the RAC (i.e., review of major themes, subthemes, and illustrative quotes; review of manuscripts) in order to establish the credibility of the results. Although this community health needs assessment process was itself conceptualized as a community engagement strategy, several other activities to engage with the partner community were implemented subsequent to this assessment. Strategies included establishing a project office within the partner community, participating in local community events, meeting with local governmental bodies, and establishing relationships with clergy within the partner community.

## Conclusions

Findings from this research suggest that rural communities leverage church, family, and school resources to provide essential and tangible sources of support for community members with health-related needs. In addition, community leaders acknowledged the ongoing barriers to health services that result from physical distance from providers and are exacerbated by challenging economic conditions. Further, community leaders identified a number of high-impact health conditions and environmental factors that extended information available through county-level vital statistics.

This community needs assessment was a critical step in establishing a long-term relationship between community and academic partners. The community assessment represented an opportunity to discuss the CoSAGE project and goals beyond the previously established RAC. As a result, the information gained through this process is contributing to the development of acceptable and feasible strategies for community engagement and participant recruitment in subsequent phases of the project. The determination of high-impact health problems is being used to prioritize the planning and implementation of a community-driven health research agenda. Finally, the development and implementation of future discovery and translational efforts will be built on and will support family, intergenerational, and church connections. The CoSAGE approach, grounded in a community health and engaged scholarship philosophy and process, provides a model for academic–community partnership that our team anticipates will yield valuable outcomes for both partners.

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# Effects of Service-Learning on Kinesiology Students' Attitudes Toward Children With Disabilities

José A. Santiago, Jihyun Lee, and Emily A. Roper

## Abstract

Contact theory *(Allport, 1954)* served as the framework to investigate undergraduate kinesiology students' attitudes toward children with disabilities after a service-learning (SL) experience. Fifty-one undergraduate kinesiology students enrolled in an adapted physical education (APE) course served as the experimental group, and 31 undergraduate kinesiology students enrolled in an introductory kinesiology course served as the control group. The Attitudes Toward Disabled Persons Scale–Form A *(Yuker, Block, & Younng, 1970)* was administered at three different times: before, during, and after the SL. A mixed-design ANOVA revealed that there were no statistically significant main or interaction effects for gender, group, and time on the attitude scores of kinesiology students toward children with disabilities. The results suggest that the quantity and quality of contact time with children with disabilities may be important to consider when designing and structuring SL experiences in APE courses.

## Introduction

*S*ervice-learning (SL) is an instructional method that offers organized service experiences where students can identify needs of the community and reflect on their work to better understand course content while building a sense of civic responsibility *(Bringle & Hatcher, 1995; Miller, 2012)*. A primary goal of all experiential learning methods, including SL, is to promote students' better understanding of content and assist them in applying knowledge and theory to practice through hands-on experiences. An aspect of SL that differentiates it from other experiential learning methods is that students engage in activities that require not only "serving to learn" but also "learning to serve" *(Bringle & Hatcher, 1995; Simon et al., 2013)*.

Many academic areas in higher education have recognized the value and benefits of SL *(Butin, 2006; Miller, 2012)*. SL has been found to increase diversity awareness *(Miller, 2012)*; increase positive attitudes toward P-12 students with disabilities *(Roper & Santiago, 2014)*; enhance preservice teachers' self-efficacy, self-esteem *(Wade, 1995)*, and pedagogical content knowledge *(Meaney, Griffin, & Bohler, 2009)*;

and reduce negative attitudes toward obese individuals *(Rukavina, Li, & Rowell, 2008)*. In addition, studies suggest that SL contributes to undergraduate students' personal and cognitive development and their ability to work well with others and analyze problems, as well as improving students' critical thinking skills, commitment to service, citizenship skills *(Eyler, Giles, Stenson, & Gray, 2001)*, and call to vocation *(Miller, 2012)*.

The use of experiential learning strategies in kinesiology has grown in popularity *(Watson, Crandell, Hueglin, & Eisenman, 2002)*. In particular, courses in adapted physical education (APE) or adapted physical activity (APA) typically use hands-on experiences *(Folsom-Meek, Nearing, Groteluschen, & Krampf, 1999)*. In such courses, undergraduate students learn how to develop, implement, and monitor physical education/physical activity programs for individuals with disabilities.

Studies have examined experiential learning strategies in various APE/APA contexts, including participating in off-campus programs such as the Special Olympics *(Hodge & Jansma, 1999; Rowe & Stutts, 1987; Stewart, 1990)* and on-campus programs such as a university-based APE/APA program *(Folsom-Meek et al., 1999; Hodge & Jansma, 1999; Roper & Santiago, 2014)*. Within this research, a significant amount of attention has focused on the effects of APE/APA practical experiences (e.g., practicums, SL) on undergraduate students' attitudes toward individuals with disabilities *(Folsom-Meek et al., 1999; Hodge & Jansma, 1999; Roper & Santiago, 2014; Rowe & Stutts, 1987; Stewart, 1990)*.

Rowe and Stutts *(1987)* examined the effects of type of practica, experience, and gender on attitudes of undergraduate physical education (PE) majors toward individuals with disabilities. In their study, 175 students participated in one of the following four 12-week (2 days per week, 1 hour per day) practica options: (a) preschool children with disabilities, (b) adults with cerebral palsy, (c) elementary school children with disabilities, and (d) adolescents with intellectual disabilities. Results indicated that the hands-on experience had a positive influence on the participants' attitudes. There were no significant differences across gender and type of practica. Participants who had prior experience with individuals with disabilities showed relatively positive attitudes on both the pre- and post-test.

Using the Attitudes Toward Disabled Persons–Form A *(ATDP-Form A; Yuker et al., 1970)*, Stewart *(1990)* examined the effect of practica type on the attitudes toward individuals with disabilities.

Participants consisted of 48 undergraduate PE majors who were enrolled in an introductory APE course. Physical education majors voluntarily selected one of the four 20-hour practica: (a) Special Olympics, (b) a swimming program for children with disabilities, (c) a swimming program for elderly participants, or (d) a fitness recreational program with an undergraduate student with physical disabilities. Scores were pre- and post-tested across the four different practica experiences, as well as with a control group. With the exception of the swimming program for elderly participants, all of the practicum groups showed positive attitudinal change.

Several studies have focused on attitudes toward teaching individuals with disabilities *(Folsom-Meek et al., 1999; Hodge & Jansma, 1999)* instead of general attitudes. Using the Physical Educator's Attitudes Toward Teaching Individuals with Disabilities–III *(PEATID-III; Rizzo, 1993)*, Folsom-Meek et al. *(1999)* examined the effects of academic major, gender, and prior experience working with individuals with disabilities on the attitudes of undergraduate students. The results revealed that non-PE students and female students had more positive attitudes toward teaching individuals with disabilities than PE students and male students. Furthermore, students who had prior hands-on experience with individuals with disabilities held more positive attitudes than students who did not have prior hands-on experience.

Other studies have compared type of practica on attitudes toward teaching students with disabilities in PE. Hodge and Jansma *(1999)* administered the PEATID-III *(Rizzo, 1993)* to 474 college students from 22 institutions at Week 1, Week 10, and Week 15 during an APE course. The results indicated that group scores were significantly higher in Weeks 10 and 15 compared to the first week. There were no significant differences between males and females.

Hodge, Davis, Woodard, and Sherrill *(2002)* compared the effects of eight sessions of an on-campus or off-campus APE/APA practicum on undergraduate PE students' attitudes and perceived competence toward teaching students with disabilities. PEATID-III *(Rizzo, 1993)* scores were compared at Week 1 and Week 15 across the on-campus and off-campus groups. Results revealed no significant difference between type of practicum on attitude scores toward teaching students with physical disabilities or mental impairment. However, the perceived competence did significantly improve from pretest to posttest. Unlike Hodge and Jansma *(1999)*, this study found that the type of practicum did not influence the PE students' attitudes toward individuals with disabilities.

Based on the previous literature, evidence indicates that the use of experiential learning strategies tends to improve undergraduate students' attitudes toward individuals with disabilities *(Folsom-Meek et al., 1999; Hodge & Jansma, 1999; Rowe & Stutts, 1987; Stewart, 1988, 1990)*. However, several studies suggest that some variables such as type of practica and prior experience might influence the potential for positive attitudinal change *(Rowe & Stutts, 1987; Stewart, 1990)*. The majority of the research has focused on assessing practica experiences rather than SL. Very few studies have used a clearly identified SL approach in the APE/APA field. Roper and Santiago *(2014)* qualitatively examined the attitudes toward individuals with disabilities of kinesiology undergraduate students after participating in a six-session (90 minutes per session) SL experience with P-12 students with disabilities. Results of this study revealed that undergraduate kinesiology students expressed a great deal of anxiety prior to the SL experience, but this anxiety dissipated after they began to work with the P-12 students with disabilities. The undergraduate kinesiology students were also found to hold preconceived attitudes and stereotypical assumptions about individuals with disabilities; many of these attitudes and assumptions were challenged or changed as a result of the SL experience. It was concluded that the attitudes of the undergraduate kinesiology students toward P-12 students with disabilities were positively influenced by the SL experience. Woodruff and Sinelnikov *(2015)* qualitatively examined what undergraduate students found meaningful when teaching and how their perceptions toward individuals with disabilities evolved throughout a 10-week SL experience. The results indicated a three-stage model for explaining how students learn to teach individuals with disabilities: (a) anticipation, (b) familiarization, and (c) commitment. Similar to Roper and Santiago *(2014)*, Woodruff and Sinelnikov indicated that the students experienced anticipation (i.e., uncertainty, fear) early in the SL experience. During the familiarization stage, undergraduate students' interactions with the individuals with disabilities became more meaningful. The researchers stressed the importance of getting to the commitment stage, as this was when the students' most positive attitudinal change occurred.

## Theoretical Framework: Intergroup Contact Theory

Originated by Allport *(1954)*, intergroup contact theory asserts that interpersonal interaction is one of the most effective ways to decrease prejudice between minority and majority populations.

Contact theory was originally used to study attitudes toward racial and ethnic minorities among Caucasian populations but has since been applied to study a variety of minority populations, including lesbian, gay, bisexual, and transgender individuals *(Herek & Capitanio, 1996)*, individuals with AIDS *(Werth & Lord, 1992)*, the elderly *(Drew, 1998)*, and individuals with disabilities *(Slininger, Sherrill, & Jankowski, 2000)*. According to Allport *(1954)*, reduced prejudice will result when four conditions of the contact situation are present: (a) equal status between the groups, (b) common goals, (c) intergroup cooperation, and (d) support of authorities. Allport believes that upon becoming familiar with others and their experiences, stereotypical assumptions and attitudes are expected to decrease.

Researchers have found that those who have contact with individuals with disabilities generally hold more favorable attitudes toward individuals with disabilities than those who do not *(Slininger et al., 2000)*. Several studies have applied contact theory within the APE/APA setting *(Murata, Hodge, & Little, 2000; Tripp, French, & Sherrill, 1995)*. Tripp et al. *(1995)* compared attitudes of students (ages 9-12 years) without disabilities who either had or did not have direct contact with peers with disabilities in their general physical education classes. Using the Peer Attitudes Toward the Handicapped Scale *(Bagley & Green, 1981)*, results revealed that contact with students with disabilities did not significantly affect the attitudes of students without disabilities. Tripp et al. *(1995)* suggested that the number of students in the class may have reduced the strength of contact needed for positive attitudinal change. However, gender and type of disability did significantly influence attitudes. Female students held significantly more positive attitudes than male students. The students' attitudes were also significantly more favorable for individuals with behavioral disabilities than individuals with physical disabilities. Tripp and colleagues posited that due to the physical nature of the course, students with physical disabilities may have slowed down games or required them to be less competitive.

Murata et al. *(2000)* interviewed 12 high school students without disabilities who served as teacher assistants and peer tutors for three high school students with multiple disabilities. Results revealed that students were initially uncertain and concerned about inclusion, but these feelings changed over time due to repeated, positive interactions with students with disabilities. Slininger et al. *(2000)* argued that much of the research using contact theory within APE has failed to address the four conditions that Allport

*(1954)* deemed necessary in order to achieve prejudice reduction. In their study examining children's attitudes toward peers with severe disabilities, they found that despite not being able to create equal-status relationships between the children with and without disabilities, the attitudes of male students did positively change as a result of contact.

Contact is considered important to reduce individual biases and stereotypical attitudes toward minority populations *(Allport, 1954)*. Incorporation of a SL methodology in APE/APA gives undergraduate students opportunities to work directly with individuals with disabilities. These opportunities for intergroup contact have the potential to positively influence kinesiology students' attitudes toward individuals with disabilities. Kinesiology students' biases may potentially serve as barriers, and they may impede the full inclusion of students or clients with disabilities in their future professional practice. Although some research has focused on general attitudes toward individuals with disabilities, the majority of research has narrowly focused on examination of attitudes toward teaching students with disabilities among students in physical education teacher education (PETE), with most employing the theory of reasoned action *(Ajzen & Fishbein, 1980)* as the theoretical framework (e.g., *Folsom-Meek et al., 1999; Hodge & Jansma, 1999; Hodge et al., 2002)*. Several studies have also failed to clearly identify the specific method of experiential learning used (e.g., SL, practicum, clinical placement).

## Purpose of the Study

The purpose of this study was to examine the effects of a SL experience on the attitudes toward children with disabilities among kinesiology undergraduate students. For the purpose of this study, an attitude was defined as "an individual's viewpoint or disposition toward a particular 'object' (a person, a thing, an idea, etc.)" *(Gall, Borg, & Gall, 1996, p. 273)*. The following research questions were examined:

1. How does SL affect undergraduate kinesiology students' attitudes toward children with disabilities?

2. How does SL affect undergraduate kinesiology students' attitudes toward children with disabilities when compared to a control group?

3. Is there a difference in attitudes toward children with disabilities between males and females?

4.  Is there a relationship between prior level of contact and attitudes toward children with disabilities?

# Methods

## Participants

The participants in this study consisted of 82 undergraduate kinesiology majors from a university in the southwestern United States. The experimental participants in the study were 51 undergraduate kinesiology students enrolled in two APE classes with a SL component. Undergraduate kinesiology students ($n$ = 31) enrolled in two Foundations of Kinesiology classes in Fall 2013 who had never taken the APE class served as the control group. The undergraduate kinesiology students participating in this study were selected as a result of availability, representing a convenience sample. The university's Institutional Review Board granted approval for this investigation, and participants completed informed consent procedures in accordance with the university's human subject requirements.

## Adapted Physical Education Service-Learning Experience

The SL component of the APE course was a university campus-based APA program for children with disabilities from a local school district. The undergraduate students in this study were required to assess motor skills of the children, design and implement developmentally appropriate movement tasks, and develop goals and behavior management skills. A total of 79 elementary ($n$ = 51) and secondary ($n$ = 28) children with disabilities participated in the APA program in a university gymnasium once a week, approximately 55 minutes per session, for 6 consecutive weeks (a total of 330 minutes). Of the 79 children, 24 were female and 55 male. According to the school district, there were 26 children with intellectual disabilities, 19 with autism, 15 with developmental delays, eight with multiple disabilities, five with other health impairments, three with traumatic brain injuries, two with cerebral palsy, and one with a learning disability.

For each session, classroom teachers, instructional assistants, and an APE teacher observed the interactions between the children with disabilities and undergraduate students in order to monitor for severe behavior problems or accidents. The course instructor supervising the SL provided feedback to the undergraduate stu-

dents. A variety of age-appropriate equipment (e.g., playground balls of different sizes and colors, poly-spots, and batting tees) was provided to the undergraduate students to support their instructional activities. Multiple activity stations were set up to provide structured activities and to maximize activity time for the children.

Each of the undergraduate students was assigned to one child. The instructional session began with warm-up activities such as stretching body parts and/or a game of tag. The main activity component included a variety of gross motor tasks from fundamental motor skills (e.g., balancing, throwing) to more sport-related skills (e.g., bowling, basketball). Small-group activities such as basketball were utilized for children who enjoyed working with peers and more skilled students. The session ended with parachute play, praise, and a preview of the next session.

In order to accomplish learning objectives of the course, different learning tasks were provided to the undergraduate students during the SL experience. Undergraduate students were asked to assess their assigned child using various assessments and design individualized activities. During the first two sessions of the SL, the children's gross motor skills were assessed, and their present level of performance was identified. Information on the assigned child's age, type of disabilities, preferred activities, methods of communication, and mobility level was collected during this time. Then the undergraduate students developed goals and objectives for their assigned child (e.g., "Sam will be able to pass a soccer ball 10 feet away from a partner four successful times out of five trials upon a verbal prompt") and designed instructional activities for each session for the next 4 weeks. In addition, the undergraduate students were asked to identify any inappropriate behavior exhibited by their assigned child and to develop a behavior management plan. Upon completion of the SL, the students responded to a set of reflection questions regarding their SL experience. The questions focused on their perceptions of what activities and instructions worked or did not work, their feelings and attitudes toward individuals with disabilities after the SL experience, and how they would teach this population differently in the future.

## Instrumentation

**Attitudes Toward Disabled Persons Scale (ATDP)**. The Attitudes Toward Disabled Persons Scale–Form A developed by Yuker et al. *(1970)* was used to measure the participants' attitudes toward individuals with disabilities. It is important to note that the

authors will use person-first language to refer to individuals with disabilities. Person-first language is considered the appropriate manner in which to refer to an individual with a disability and is used in order to promote the idea that one's disability is only one characteristic of a person's identity and not the defining characteristic of an individual.

The ATDP uses a 6-point Likert format, with responses ranging from +3 *(I agree very much)* to -3 *(I disagree very much).* There is no neutral point on the scale. The scale score ranges from 0 to 180. High scores are interpreted to represent acceptance of individuals with disabilities, or a favorable attitude toward individuals with disabilities, and low scores represent an unfavorable attitude toward individuals with disabilities *(Yuker et al., 1970).* Sample items from the ATDP–Form A include "Disabled people are often unfriendly" and "Disabled children should compete with physically normal children." Yuker et al. *(1970)* reported split-half reliability coefficients for the ATDP ranging from 0.75 to 0.85. Construct validity of the ATDP has been established using other measures of attitudes toward individuals with disabilities. ATDP scores have been found to correlate highly with measures of attitudes toward persons with specific disabilities, prejudice, mainstreaming, and acceptance of disability *(Yuker & Block, 1986).*

**Contact with Disabled Persons Scale (CDP).** The participants' contact with individuals with disabilities was assessed using the 20-item CDP developed by Yuker and Hurley *(1987).* The CDP is designed to measure the quantity and quality of a person's prior contact with individuals with disabilities. The scale uses a 5-point Likert format with responses ranging from 1 *(Never)* to 5 *(Very often).* The scale scores range from "20, indicating a complete lack of contact, to 100, indicating maximum contact" *(Yuker & Hurley, 1987, p. 149).* Sample items from the CDP scale include "How often have you had a long talk with a person who is physically disabled?" and "How often have you eaten a meal with a person who has a physical disability?" Hunt and Hunt *(2000)* reported Cronbach's alpha of .91 for the CDP scale.

## Procedures

Following the standard procedures established by Yuker et al. *(1970),* the ATDP-Form A was administered to the participants at three different times: (a) 2 weeks before the SL, (b) during the SL, and (c) 2 weeks after the SL. The CDP was administered only once before the SL experience, along with a demographic form and a

series of questions regarding participants' previous experiences with individuals with disabilities (see Table 1). Both the experimental and control groups completed the scale at the same time.

**Table 1.** *Demographic Information*

| | Experimental (*n* = 51) | Control (*n* = 31) |
|---|---|---|
| Age | M = 22.3, SD = 2.3 | M = 20.0, SD = 2.3 |
| Gender | | |
| Male | 32 | 10 |
| Female | 19 | 21 |
| Race /Ethnicity | | |
| Black/African American | 17 | 8 |
| White | 25 | 16 |
| Hispanic/Latino | 9 | 6 |
| Classfication | | |
| Freshman | 1 | 6 |
| Sophomore | 1 | 15 |
| Junior | 19 | 7 |
| Senior | 30 | 3 |
| Major | | |
| PETE | 13 | 4 |
| General | 23 | 8 |
| Exercise Science | 5 | 8 |
| Athletic Training | 7 | 3 |
| Other | 3 | 8 |
| How many courses have you taken that (outside of kinesiology) dealt specifically with individuals with disabilities? (number of hours) | M = .3, SD = 1.8 | M = .64, SD = 1.4 |
| Have you had any experience in teaching individuals with disabilities? | Yes = 16, No = 35 | Yes = 9, No = 22 |
| Do you have any family members with a disability? | Yes = 17, No = 34 | Yes = 16, No = 15 |
| Do you have any close personal friends with a disability? | Yes = 17, No = 34 | Yes = 12, No = 19 |
| Do you have a disability? | Yes = 0, No = 51 | Yes = 1, No = 30 |
| How competent do you feel teaching an individual with disabilities? | | |
| Not at all | 4 | 5 |
| A little | 7 | 7 |
| Somewhat competent | 22 | 9 |
| Very competent | 9 | 7 |
| Extremely competent | 9 | 3 |

## Data Analysis

All ATDP and CDP responses were manually entered into SPSS Version 22.0 for statistical analysis. Descriptive statistics were used to describe the group within the sample. The internal consistency of the items of both scales was assessed by calculating Cronbach's alpha (α). An α of 0.70–0.80 was deemed acceptable. Pearson product-moment correlation coefficient (PPM) was calculated to determine the relationship between the ATDP and CDP scales. A 2 × 2 × 3 mixed-design ANOVA was performed to determine the effects of SL on the attitudes of kinesiology students toward children with disabilities. The alpha *p* value was set at .05 as the acceptable level of significance.

## Results

The internal consistency of the items resulted in a Cronbach's alpha ranging from 0.76 to 0.82 for the ATDP scale and 0.91 for the CDP scale. With Cronbach's alpha values exceeding 0.70, both scales were considered acceptable for comparing the experimental and control groups. These results are consistent with previous studies by Yuker et al. *(1970)* and Yuker and Block *(1986)*.

Table 2 presents the means and standard deviations of attitudinal scores before, during, and after SL by gender and group. Descriptive data revealed that males in the experimental group scored slightly higher than females during and after the SL experience. In the experimental group, females' scores slightly increased during and slightly declined after the SL experience. In the control group, males' scores slightly increased from the first to the second time of scale administration and slightly declined from the second to the third time. Data also revealed that females in the control group slightly increased their attitude scores from the first to the third time of ATDP administration.

The CDP scores ranged from 25 to 80 (*M* = 44.8, *SD* = 13.3). For the experimental group, the mean CDP score was 45, with a standard deviation of 13.1 and a range from 25 to 76. The mean CDP score for the control group was 44.5, with a standard deviation of 13.8 and a range from 28 to 80. An independent *t*-test revealed no significant differences on CDP scores between the experimental and control groups, $t(80) = .13$, $p > .05$. The PPM correlation coefficient between CDP and ATDP was -0.13, indicating that as contact scores on the CDP scale increase, attitudes toward children with disabilities may decline.

**Table 2.** *Means and Standard Deviations of Attitudinal Scores for Before, During, and After SL by Gender and Group*

|  | Experimental | | Control | | Total | |
|---|---|---|---|---|---|---|
|  | *M* | *SD* | *M* | *SD* | *M* | *SD* |
| Male |  |  |  |  |  |  |
| Before SL | 109.8 | 17.9 | 114.9 | 16.8 | 111.0 | 17.6 |
| During SL | 110.6 | 21.6 | 115.0 | 26.3 | 111.5 | 22.4 |
| After SL | 114.2 | 17.9 | 109.06 | 26.9 | 113.1 | 20.1 |
| Female |  |  |  |  |  |  |
| Before SL | 104.0 | 15.0 | 104.2 | 16.1 | 104.1 | 15.4 |
| During SL | 106.9 | 18.3 | 106.1 | 16.6 | 106.5 | 17.2 |
| After SL | 105.3 | 17.6 | 109.0 | 15.3 | 107.2 | 16.3 |

A $2 \times 2 \times 3$ mixed-design ANOVA was calculated to examine the effects of gender (female, male), group (experimental, control), and time (before, during, and after) on the attitude scores of kinesiology students toward children with disabilities. The ANOVA results revealed no significant main effects or interactions. The main effects for gender ($F[1, 77] = 3.20, p > .05$), group ($F[1, 77] = .28, p > .05$), and time ($F[2, 154] = .46, p > .05$) were not significant. The time by group interaction ($F[2, 154] = .18, p > .05$) and time by gender interaction ($F[2, 154] = .31, p > .05$) were not significant. Finally, the time by gender by group interaction ($F[2,154] = 1.36, p > .05$) was not significant.

## Discussion

This study examined the effects of a SL experience on the attitudes of undergraduate kinesiology students toward children with disabilities. The influence of prior contact with individuals with disabilities on undergraduate kinesiology students' attitudes was also explored. In contrast to Roper and Santiago *(2014)* and Woodruff and Sinelnikov *(2015)*, the results of the present study demonstrated that the SL experience did not significantly influence the participants' attitudes toward individuals with disabilities. The lack of significant difference between the experimental and control groups may be attributed to several factors.

Contact between individuals with and individuals without disabilities has been found to favorably influence attitudes toward individuals with disabilities; attitudes are further enhanced when the contact is of equal status, intimate rather than casual, interactive and pleasant, and focused on common goals *(Allport, 1954)*. Although contact theory was used to design the SL experience, each condition may not have been adequately accomplished. Sherrill

*(1993)* defined equal status as "a mutually satisfying association in which both individuals contribute in equal amounts, building on each other's strength" *(p. 38)*. Previous research in SL has found that equal status between students with and without disabilities is helpful in producing positive attitude change *(Burns, Storey, & Certo, 1999)*. In this study, each kinesiology student was assigned one child with a disability. The primary role of each kinesiology student was to teach and assist her or his assigned child while the children with disabilities were passive recipients of instruction. It is possible that these roles may not have been effective in meeting the criteria for equal status. As Sherrill *(1993)* suggested, "a partnership in which one individual gives and the other receives assistance may not have the same effect as partnerships in which giving and taking are reciprocal" *(p. 38)*. Creating equal status between the kinesiology students and the children with disabilities may be difficult given that the primary responsibility of the kinesiology students was to deliver instruction. Further examination of ways to structure learning environments for achieving equal status relationships is needed. Research also suggests that contact between individuals with and without disabilities must be of sufficient frequency, duration, and closeness in order to facilitate positive attitudinal change *(Brewer & Brown, 1998)*. The SL experience consisted of 330 minutes of contact time (once a week for 6 consecutive weeks, approximately 55 minutes per session). Although the scores on the ATDP did not decline, it is possible that the duration and frequency of contact time during the SL experience may not have been enough to improve the attitudes of the kinesiology students. Previous research has not established a specific amount of contact time needed to produce positive attitudinal change. Folsom-Meek, Groteluschen, and Nearing *(1996)* found that 54% of their participants' attitude scores improved significantly when 10 hours or more of practicum experience was provided. Similarly, Hodge and Jansma *(1999)* reported that PE majors' attitude scores toward teaching individuals with disabilities were significantly higher at Weeks 10 and 15 compared to Week 1 of their practicum. Such findings indicate that a minimum amount of contact may be necessary to achieve favorable attitudes.

Prior contact with individuals with disabilities has been found to be a predictor of attitudes toward individuals with disabilities *(Au & Man, 2006; Hunt & Hunt, 2000; Yuker & Hurley, 1987)*. The CDP mean score of the experimental group in this study was lower than that of rehabilitation majors *(Hunt & Hunt, 2000)* and graduate students *(Yuker & Hurley, 1987)* in previous studies. In addition, 31%

of the participants in the experimental group expressed that they had experience teaching individuals with disabilities, 33% had family members with a disability, and 33% had a close personal friend with a disability. Such findings show that the majority of the participants in the experimental group lacked prior contact with individuals with disabilities, potentially influencing their attitudes toward the children with disabilities.

Research has also found that meaningful and pleasant interactions between individuals with and without disabilities do not occur voluntarily *(Sherrill, Heikinaro-Johansson, & Slininger, 1994)*. The present study found a negative correlation ($r = -0.13$) between the ATDP and CDP scores, suggesting that previous contact with individuals with disabilities may not have been of quality or value, increasing the potential for stereotypical and preconceived beliefs. If the participants had negative attitudes toward individuals with disabilities prior to the SL experience, the potential of meaningful and pleasant social interactions may have been hindered.

Gender of the undergraduate kinesiology students in the present study did not show a statistically significant difference in change of attitudes toward children with disabilities. Consistent with Tripp *(1988)*, males in this study showed slightly higher attitude scores than females on the ATDP. Yuker and Block *(1986)* reported ATDP-Form A median scores of 118.7 for male and 122.4 for female subjects. In this study, male participants' median scores ranged from 102 to 113, whereas female participants' median scores ranged from 102 to 109, representing slightly lower median scores than the normative data *(Yuker & Block, 1986)*. This finding is contradictory to previous research that has consistently found females to hold more positive attitudes toward individuals with disabilities *(Hutzler, 2003; Yuker & Block, 1986)*.

It is important to address the limitations of the present study. As the participants were obtained through a convenience sample, generalizability of the findings is uncertain. In addition, ATDP scores represent self-reported attitudes that may reflect the influence of social desirability. Furthermore, although it has been widely used to study attitudes toward individuals with disabilities *(Sherrill, 1993)*, the ATDP scale is a unidimensional measure of attitudes and may fail to capture other important attitudinal components (e.g., behavioral, affective, or cognitive). Testing effects are also a limitation due to the repeated measures design and could explain the slight increase in ATDP scores on each administration.

# Implications

Negative attitudes toward individuals with disabilities are considered barriers for full inclusion *(Shapiro, 1999)*. APE instructors should continue to explore how SL methodology impacts students' attitudes toward individuals with disabilities. Although the attitudes of the students in the present study did not significantly shift in a positive direction, it is important to note that they did not shift in a negative direction. The use of SL methodology is critical in the preparation of future undergraduate kinesiology students who will work with individuals with disabilities in different settings. However, instructors using SL methodology to improve attitudes toward individuals with disabilities should carefully consider how the instructional environment is designed and organized. Instructors cannot assume that SL, without careful consideration of the instructional environment, will result in positive attitudinal change toward individuals with disabilities. To ensure that attitudes are positively impacted, special attention to the location, duration and frequency, and quality of contact is needed. Future research using SL methodology should assess the specific conditions in which contact occurs.

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# PROJECTS WITH PROMISE

# Teaching Tools to Improve the Development of Empathy in Service-Learning Students

Robin S. Everhart

## Abstract

Students participating in service-learning classes experience many benefits, including cognitive development, personal growth, and civic engagement. Student development of empathy is an understudied area, especially with respect to how students develop empathy through interactions in their service-learning placements. This article describes a project designed to pilot teaching tools (e.g., self-assessment, reflective writing) related to empathy development in 12 undergraduate students. This study examined changes in level of student empathy across the semester, critical incidents linked to such changes, factors that enhanced or challenged empathy development, and student metacognition related to empathy. Findings suggest that certain experiences, such as observing the emotional experiences of others or being given more responsibility at a community site, might prompt changes in level of empathy for service-learning students. Strategies for integrating findings from this pilot project into other service-learning courses and future directions for empathy research are also described.

## Introduction

$S$ ervice-learning classes as formal course offerings are becoming available in increasing numbers at universities across the country. The benefits of service-learning classes on student outcomes are well-documented, especially when compared to outcomes for students who have not taken a service-learning course. For instance, service-learning has been found to have a positive effect on personal insight and cognitive development *(Yorio & Ye, 2012)*. Further, two studies found that service-learning students had a greater understanding of complex social issues than non-service-learning students *(Batchelder & Root, 1994; Hirschinger-Blank & Markowitz, 2006)*. Results of a meta-analysis indicated that students in service-learning courses experienced greater application of knowledge and skills across settings than students not enrolled in a service-learning course *(Novak, Markey, & Allen, 2007)*. Together, these studies demonstrate the strong impact of this unique pedagogical approach on enhancing student outcomes through service-learning experiences.

One area within service-learning research that has not gained much attention is the impact of service-learning on the development of empathy within students and, specifically, the process by which students develop empathy through service-learning. Empathy is defined as "the ability to walk in another's shoes, to escape one's own responses and reactions so as to grasp another's" *(Wiggins & McTighe, 2005, p. 98)*. A recent meta-analysis from 72 samples of American college students found that empathy is declining in students, especially since 2000 *(Konrath, O'Brien, & Hsing, 2011)*. Fundamental to the process of developing empathy is being able to cognitively grasp how another person may be affected by a situation and understand that there may be other perspectives to any situation *(Galinksy & Moskowitz, 2000; Wilson, 2011)*. An emotional connection typically occurs in which an individual feels compassion for another and becomes motivated to understand that person and situation in a new way, often with the desire to help *(Galinksy & Moskowitz, 2000)*.

Service-learning courses provide an ideal platform for students to develop empathy as they allow students to participate in an organized service activity that meets identified community needs *(Bringle & Hatcher, 1996)*. Students experience social issues firsthand and often recognize another person's need or level of despair for the first time *(Goleman, 1995)*. The reflection component of service-learning then provides students with an opportunity to process those interactions and gain a deeper understanding of their experiences with individuals and organizations in the community. Students often begin working in a service-learning setting believing that they understand what it is like to work with someone from a different upbringing or socioeconomic background. When students develop relationships with the individuals they are working with, their preconceived beliefs are often challenged, and cognitive dissonance occurs; students may resolve this conflict in beliefs by rethinking their attitudes and views about the individuals they are serving *(Wilson, 2011)*. Through this process, students develop empathy; they move toward viewing others as more similar to themselves and improve their ability to place themselves in the position of others.

To date, research on empathy development in service-learning classes is sparse. Collectively, studies have considered empathy development within the context of development in other learning and personal outcomes *(Mofidi, Strauss, Pitner, & Sandler, 2003; Rosenkranz, 2012)*. Teaching tools related to developing empathy in service-learning courses, including the use of reflections spe-

cifically focused on student changes in empathy, may prove useful in promoting growth in student empathy. This article provides an overview of a pilot project designed to increase undergraduate student empathy in service-learning. Further, analysis of student journals provided a means of beginning to unpack how students may develop empathy through critical incidents (i.e., experiences that triggered empathy development) and whether student metacognition related to empathy occurred. This research provided insight into how students develop empathy and how service-learning instructors can best ensure their students experience the greatest potential in their development of empathy across the semester.

# Setting the Context

## Virginia Commonwealth University

Virginia Commonwealth University (VCU) is located on an urban campus in Richmond, Virginia, and has an annual enrollment of almost 24,000 undergraduate and 5,500 graduate students. VCU employs more than 3,000 faculty members and consists of 13 schools and one college. VCU's campus is located on approximately 144 acres in downtown Richmond, which is an ideal setting for community-based service in the Richmond area. The Richmond area is diverse in terms of both race/ethnic background and socioeconomic status. For instance, 51% of individuals living in Richmond are African American/Black (39% White, 6% Latino), and 25% of families live below poverty threshold *(U.S. Census Bureau, 2012)*.

VCU is categorized as a Carnegie Doctoral/Research University– Extensive by the Carnegie Foundation for the Advancement of Teaching, which puts it in the ranks of the top research universities in the nation. In 2011, the Carnegie Foundation elevated VCU to "Very High Research Activity" status. VCU was just reclassified as a "Community Engagement" institution in 2015, making it one of only 40 universities in the country to hold both the "Community Engagement" and "Very High Research Activity" Carnegie distinctions and one of only 28 public universities in the country with academic medical centers to achieve both distinctions. As a major university in an urban environment, VCU is especially committed to research and service activities that connect the university with the Richmond community, as evidenced by VCU's strategic plan, *Quest for Distinction (http://www.quest.vcu.edu/media/quest/pdf/the-plan_full.pdf). Quest for Distinction* outlined a set of goals aimed

at improving partnerships between VCU and community-based organizations and focused on becoming a national model for community engagement and regional impact.

## Service-Learning at VCU

Service-learning courses at VCU are housed within the Division of Community Engagement. Service-learning at VCU is a course-based, credit-bearing educational experience in which students participate in an organized service activity that meets community-identified needs. This collaborative teaching and learning strategy is designed to promote and encourage course content, personal growth, and civic engagement (see *http://www.servicelearning.vcu.edu*). VCU service-learning courses are audited prior to receiving the *SRV LRN* designation, a designation that appears next to the course title in the university's course schedule and on students' transcripts. During 2013-2014, VCU offered 117 distinct service-learning courses across 233 different class sections. Annually, more than 3,600 VCU students complete at least one service-learning course.

## Human Services Fieldwork

The Department of Psychology at VCU offers a service-learning course titled Human Services Fieldwork, which is available to junior and senior students majoring in psychology. The objective of this service-learning course is to promote student understanding of a multisystemic ecological model of individual and community development. Students participate in weekly didactics and complete 8 hours of service per week in a community agency or organization serving populations at risk for negative psychological or health-related outcomes. Prior to enrolling in the course, students meet with the instructor to ensure a match between student interest and placement site. There are typically up to eight placement opportunities available to students each semester, including sites serving children (e.g., after-school programs, child care centers, tutoring programs, centers for children with developmental disabilities) and adults (e.g., adult day care centers, community health clinics, agencies providing substance abuse services, organizations for victims of sexual or domestic violence). Students complete reflective writings and written assignments, participate in group-based discussions, keep a log of service hours, and complete required readings across the semester. Topics in the course include understanding behavior using a risk and resilience framework, conceptual models that pro-

mote individual and community development, professional ethics, and processes related to personal growth and civic engagement. The project described in this article stemmed from the author's observations during 2 years of teaching this service-learning class. The author found that the course did not support student awareness and understanding specifically related to their development of empathy through their service-learning experiences.

## Review of the Literature

As noted, a handful of studies have evaluated empathy as a student outcome in service-learning courses. In one study, dental students reported increased empathy for the needs and situations of patients after providing dental services in community-based settings (e.g., community health center, nursing home; *Mofidi et al., 2003)*. In a marriage and family class, students participated in either a service-learning project or a book discussion project; students completing the service-learning assignment were more likely to express empathy in their reflective writing than those students that participated in the book discussion project *(Wilson, 2011)*. In another study that incorporated service-learning into an undergraduate nursing course, students described developing empathy for the daily struggles facing families by working with individuals who were different from themselves *(Hunt, 2007)*. In a lifespan development course *(Lundy, 2007)*, students who chose to complete a service-learning project demonstrated a significant increase in emotional empathy, as measured by the Emotional Empathetic Tendency Scale *(Mehrabian & Epstein, 1972)*, compared to students who chose other project options (e.g., interview project, research paper). Finally, feelings of empathy were reported in a group of baccalaureate nursing students who worked at a camp for children with diabetes *(Vogt, Chavez, & Schaffner, 2011)*. In their reflective writings, these students described a feeling of empathy with the temporary adoption of the lifestyle of children with diabetes. Thus, these studies suggest that students who complete a service-learning course or project are likely to experience enhanced empathy for others.

Lacking from these studies, however, is an understanding of how coming face-to-face with another person's situation in a service-learning setting can evoke changes in empathy. Few service-learning courses focus specifically on student level of empathy and how it changes throughout the semester, as well as experiences that may challenge or promote changes in empathy. The project described here was aimed at piloting teaching tools related to

empathy development in a service-learning course for undergraduates and ultimately determining the key components related to empathy development that can be integrated into other service-learning courses across the nation.

## Project Details

This pilot project was conducted within a service-learning course offered through the Department of Psychology at VCU and taught by the author, a licensed clinical psychologist with expertise in conducting community-based research with families from diverse backgrounds. The project described here was piloted with 12 students. Nine of the 12 students were senior psychology majors; the remaining three students were junior psychology majors. Two students were African American, 10 were Caucasian, and three students were male. Students were placed in one of eight community settings: elementary schools in the City of Richmond (five students across three elementary schools), school for students with autism and developmental disabilities (one student), substance abuse treatment center (one student), free community clinic providing medical services (one student), child care center (one student), community center providing after-school care for children (one student), agency providing psychological services to community members (one student), and an organization for victims of domestic or sexual violence (one student). At each site, students completed activities that fulfilled the identified needs of each organization. Each student volunteered 8 hours a week for approximately 100 hours of service across the semester.

Three students had limited direct contact with individuals at their placement sites. At the organization for victims of sexual and/or domestic violence, the student completed a training program and was on call for area hospitals if a victim needed services; she was never paged to provide support for a victim. The student at the free medical clinic assisted with medical chart reviews, administrative tasks, and some shadowing of nurse practitioners with patients. The student at the psychological services agency watched taped therapy sessions, observed therapist phone calls with patients, and entered patient data from assessments. The remaining nine students interacted directly with the children at their schools or centers, or with patients at the substance abuse clinic.

## Empathy Components of the Course

During this pilot study, two requirements that focused on enhancing student empathy were integrated into the existing Human Services Fieldwork course. These components are described in detail below.

**Empathy self-assessment.** During the second week of class, students were asked to complete an initial self-assessment of their level of empathy. For this assignment, students were first asked to read an article by Wilson *(2011)* that outlined three levels of engagement related to the expression of empathy (shock, normalization, and engagement). This "stage theory of engagement" was developed by Rockquemore and Shaffer *(2000)* to describe cognitive changes that occur in college students throughout a semester. Wilson *(2011)* posited that although empathy is a less well-known aspect of learning that relates to personal and social development, it should be considered a crucial aspect of learning in service-learning classes. More well-known types of learning include explanation, interpretation, and application *(Wiggins & McTighe, 2005)*. Empathy is important for the achievement of understanding because it involves personal meaning-making and being able to make sense of different pieces of knowledge; this understanding can then be applied to new situations *(Wilson, 2011)*.

After reading the article by Wilson *(2011)*, students were asked to determine their current level of empathy (shock, normalization, engagement). In the stage theory of engagement, which Wilson *(2011)* applied to empathy development, *shock* is described as being dismayed by the social and economic circumstances of the individuals they were serving. The next stage, *normalization*, is described as beginning to see an individual's circumstances as normal, identifying commonalities with others, and beginning to break down an "us" versus "them" viewpoint. The third stage, *engagement*, is when students begin to recognize why things are the way they are for individuals at their placement, and they begin to attribute problems to systemic issues instead of blaming the individual.

In addition to identifying their current level of empathy, students were asked to describe (a) why they identified with that level of empathy; (b) how their placement could contribute to their development of empathy, including which interactions would be useful; (c) what changes they expected to see in their level of empathy throughout the semester and why; and (d) how they would determine whether their level of empathy had developed during the semester. Students were asked to answer these ques-

tions in their self-assessment of empathy in a four-page, double-spaced paper. This paper was then discussed in class and used as a reference point for future discussions of empathy throughout the semester. At the end of the semester, students were asked again to indicate their current level of empathy with space provided for optional comments.

**Empathy focus in reflective writing.** In each semester of Human Services Fieldwork, students are asked to complete nine reflective writings that are typically one page (single-spaced) in length and follow the well-known "What? So what? Now what?" heuristic of service-learning reflective writing *(Driscoll, 2007)*. For this pilot project, students were asked to add an "Empathy what?" section to reflections assigned after they had completed their self-assessment. Thus, this component was added to eight reflections for each student. Instructions for this component of each reflection were as follows: "This section should include one to two solid paragraphs that describe how your empathy is evolving and/or being challenged in your placement. You may wish to build off your empathy self-assessment." Students were encouraged to share aspects of their reflective writing during class discussions.

## Impact of the Project

## Methodology

Institutional Review Board approval was obtained for this study. Data to evaluate the potential promise of these teaching tools related to empathy development were obtained from student self-assessments of empathy and reflective writings that included the "Empathy what?" section. From the self-assessments, level of empathy at the beginning and end of the semester were extracted. Representative statements for students at each level were also identified.

Reflections were read and coded independently by two doctoral students with no affiliation to the service-learning course or service-learning in general at VCU. Coders were also blind to any information about students (e.g., sex, race/ethnicity, undergraduate year) or placement sites. Identifying information, including dates, was deleted from reflections. Coding occurred after the end of spring semester. Coders determined how many times across the reflective writings students experienced an increase in their level of empathy. Increases were noted when the student either explicitly stated that his or her empathy increased or the coders noted such a

change implicitly through the student's comments in the reflection. Coders also documented critical incidents or events that occurred in reflections when a change in empathy occurred. Critical incidents were grouped by categories, and number of students experiencing such incidents was calculated. Coders also noted themes across reflections related to factors that promoted or challenged students' development of empathy. Finally, coders noted whether students became more aware of their own empathy development either by explicitly saying that they were more self-aware of their own empathy or by stating that they had experienced a change in empathy.

## Initial Findings

**Self-assessment.** Initial and final assessment of empathy level for each of the 12 participating students can be found in Table 1, as well as the type of placement for each student and whether students interacted directly with individuals in their placement.

At the beginning of the semester, one student described being in the shock stage of empathy.

> I thought I had a pretty good idea of what I was getting into, but I was wrong. I expected a bit of chaos and some differences in social interactions when working with the students, but it's far more intense than I could've ever imagined. Right now I find myself very anxious when I approach the children; I'm not comfortable around them. I believe once I spend more time around them and have a better understanding of them, I'll be able to interact with them more easily.

Another student described being in between shock and normalization. This student stated:

> Starting my placement has been kind of a slow process and it's now picking up with more consistent hours so I'm starting to develop deeper relationships with those at the school. With my relationships developing more, I feel like I am transitioning into normalization, however I still have not had too much exposure to the kids yet. I still fall back into the shock stage when hearing some of the stories about the kids who attend the school. The first day or two I definitely was in shock because the

environment of the school was so different from that I grew up in.

**Table 1.** *Assessment of Student Empathy Across Semester*

| Student | Setting | Direct contact with individuals at site | Beginning/ end of semester stage | Percent (#)* of reflections describing an increase in empathy | Self- awareness of own empathy |
| --- | --- | --- | --- | --- | --- |
| Student 1 | Elementary School | Yes | Shock/ Normalization | 62.5% (5/8) | Yes |
| Student 2 | Elementary School | Yes | Normalization/ Engagement | 50% (4/8) | Yes |
| Student 3 | Elementary School | Yes | Engagement/ Engagement | 75% (6/8) | Yes |
| Student 4 | Elementary School | Yes | Normalization/ Engagement | 57% (3/7) | Yes |
| Student 5 | Elementary School | Yes | In between shock & nor- malization/ Engagement | 100% (6/6) | Yes |
| Student 6 | School for autism & developmental disabilities | Yes | Engagement/ Engagement | 100% (8/8) | Yes |
| Student 7 | Substance abuse treatment center | Yes | Engagement/ Engagement | 88% (7/8) | Yes |
| Student 8 | Free community medical clinic | Limited | Engagement/ Engagement | 25% (2/8) | Yes |
| Student 9 | Community center for after- school care | Yes | Normalization/ Engagement | 25% (4/7) | Yes |
| Student 10 | Psychological services agency | Limited | Normalization/ Engagement | 88% (7/8) | Yes |
| Student 11 | Organization for victims of sexual & domestic violence | Limited | Normalization/ Engagement | 37.5% (3/8) | Yes |
| Student 12 | Child care center | Yes | Normalization/ Normalization | 75% (6/8) | Yes |

*Note.* *Three students did not turn in required reflections and therefore have a total number of reflections less than 8.

Six students described initially being in the normalization stage. One student shared:

> I would define myself as someone who falls on the normalization end of the scale. I find that I tend to attempt to make others feel as though they are not that different because of their situation and that we are all equal, regardless of our past.

Another student added,

> I feel that I am already past the stage of shock. Early on in life, I have already encountered various situations where I have been forced to encounter the harsher realities of life and I have been privileged to meet so many people from so many different backgrounds with different stories and personalities. Because I am in the normalization stage, I feel as though I have begun to adapt to the service context because I am starting to see adverse situations in life as normal and frequent. I am no longer shocked or amazed at some of the people and scenarios they have been through because I understand that the community has a vast amount of needs and troubles.

Four students also described being in the engagement stage. One student commented, "I identify with the engagement level of empathy, and I credit that mostly to my diverse background. My experiences have taught me about my own privilege and the privilege of others." Another student described,

> My current level of empathy is engagement because I've come to terms with how things are in the clinic setting. While I am saddened by some of the living conditions the patients are subjected to it no longer shocks me and I have no problem interacting with them in a personable way. I think that this comes from going to such a diverse school and parents encouraging me to look beyond what someone looks like on the outside to get to know them.

In their rating at the end of the semester, 10 students indicated that their level of empathy was in the engagement stage, and two students indicated that their level of empathy was in the normalization stage. Most notably, seven of the 12 students described a change in level of empathy such that they moved to a higher stage

of engagement by the end of the semester. One student who moved from normalization to engagement stated,

> At the end of the semester, I would say my level of empathy was definitely engagement. I became so close with the students I had worked with and leaving them was very hard. Interning at my site was an eye opening experience like no other.

Four students described starting the semester in the highest level of empathy, engagement, and consequently ending the semester at that level. Interestingly, two of these students noted that they might have overestimated their level of empathy at the beginning of the semester. One student stated, "At the beginning of the semester I said I would have been in the engagement stage but I think that was a broad overstatement on my part."

**Reflections: Increases in empathy**. The percentage of reflections in which students experienced an increase in level of empathy can be found in Table 1. All students described some movement in empathy in their reflective writings across the semester. Documented changes in empathy ranged from 25% of reflections to 100% of reflections, indicating a wide range in number of reflections describing an increase in empathy. The average percentage of reflections describing an increase in empathy across all students was 65.3%. Interestingly, even if students did not experience a change in level of empathy from the beginning to the end of the semester (five students), they still described increases in empathy in their reflections. This suggests that even among those students who believed they started the semester with well-developed empathy, experiences at their service-learning site continued to impact their development of empathy. It is also important to note that students who had limited contact with individuals at their placement sites also described increases in their level of empathy throughout their reflections. For two of these students, the percentage of reflections describing such increases was on the lower end (25% and 37.5%). It should be noted, however, that another student with limited contact indicated a change in level of empathy in 88% of reflections, and a student with direct contact indicated a change in only 25% of reflections.

**Reflections: Critical incidents tied to empathy changes.** In evaluating whether a student's reflection described an increase in empathy, coders also highlighted critical incidents that may have prompted such increases. These incidents were then grouped by

themes to highlight areas for class discussions or course content in future service-learning courses integrating a focus on empathy development. Critical incidents were grouped around five themes: (1) observing emotional experiences of others, (2) being given more responsibility at site, (3) learning more about the people being served, (4) having a personal connection with others, and (5) experiencing challenges to previous thoughts about a situation. Each is described briefly in turn, with the number of students describing each incident also noted.

***1. Observing emotional experiences of others.*** Six students described observing some sort of emotional expression in others at their placement site and indicated that this experience was linked to a change in their level of empathy. Emotional experiences included observing teachers' frustration as they managed behavioral issues in children and watching a teacher's reaction after a student overturned a desk in the classroom. Students described developing empathy for the teachers in these situations, which was unexpected for many students as they expected to feel more empathy for the children with whom they directly worked. Other experiences were child focused, including seeing a child crying at school because of a disagreement with peers and watching an embarrassed student run away from the school after an issue between the student's parent and staff at the school. Another student described observing a client's frustration with the group facilitator at the substance abuse treatment center and developing empathy for the facilitator after watching how the situation was handled.

***2. Being given more responsibility at site.*** Six students also described critical incidents related to more responsibilities at their placement. For instance, students noted being asked by supervisors to take the lead in activities with children (e.g., reading, leading a craft), check on children in other classes, make supply kits for families in shelters, and lead a group session. Students described that when they were given these increased responsibilities, they developed more confidence in themselves and in their interactions with individuals at their placements.

***3. Learning more about individuals.*** Six students also described critical incidents being linked to times when they were able to learn more personal information about someone they were working with at their placement site. For instance, students working with children in the elementary schools learned more about children living in shelters, arguments they had with their parents, and other occurrences in their home lives. Students also noted learning more about teachers' backgrounds and personal lives. The student working in

the free medical clinic described developing empathy for patients after learning more about their personal lives.

*4. Having a personal connection with others.* Four students described having a personal connection with another person at their site, either by having had that experience themselves or by sharing in an experience with other people at their site. For instance, one student described how, after a client the student was actively interacting with at the site passed away, the student developed greater empathy for the other clients and facilitators as they all grieved for the shared loss of the client. Another student described hearing about the passing of a teacher's father and having a greater sense of empathy for the teacher as the student had experienced a similar loss. The student noted that she could imagine what it was like for the teacher to come to work each day and set aside her grief to give her all for the children at the center. At a different placement, another student described noting a change in empathy after watching a young student being scolded by a teacher and the young student not understanding why he was in trouble. The service-learning student described remembering that feeling as a young child when he would not understand why he was in trouble with his parents. Finally, a student with limited direct contact at her site described developing empathy for a client at the psychological center who was the same age she was. Although the student never met the client, she could imagine the social and personal issues the client may have been struggling with in addition to having an anxiety disorder.

*5. Experiencing challenges to previous thoughts about a situation.* Three students described experiencing a change in empathy that could be linked to a previous belief or notion being challenged. For instance, one student described challenges to her beliefs regarding what constituted an anxiety disorder in that she had underestimated what it was like to have an anxiety disorder. Another student described not being fully aware of the range of challenges that public school teachers experience on a day-to-day basis with young children. A student helping with food distribution at his agency described listening to the discussions between community members and noticing their clothing. He described how he had not been prepared for the idea that community members would not care what they looked like, since their primary focus was receiving a meal that day.

**Reflections: Factors that promoted or challenged development of empathy.** In addition to coding student reflections for critical incidents tied to empathy development, coders also identified

themes across reflections that highlighted factors that may promote or challenge empathy development. These themes can be found in Table 2. Briefly, students noted that getting to know an individual over time, becoming more aware of who that individual was as a person, taking time to think about what a person's life might be like, and gaining more confidence in their ability to do good work at their site contributed to improved empathy. For those students with limited direct contact, an additional consistent theme was their being surprised at their ability to develop empathy for individuals at their site in light of limited contact with them. However, students did note that this limited contact might also be a challenge to developing empathy, and several wondered how much more their empathy might have developed had they had more direct contact.

**Table 2.** *Factors in Student Reflections That Promoted or Challenged Development of Empathy*

| Factors tied to promoting empathy development | Factors that challenged empathy development |
|---|---|
| • Getting to know individuals over time | • Feeling like one should be building empathy in a certain scenario even when they may not be |
| • Gaining more confidence in ability to do the work well | • Focusing more on sympathy versus empathy in initial interactions |
| • More hands-on experiences and direct interactions with people | • Harder to develop empathy when no direct contact |
| • Stop and think about what the implications of that person's life would be for the student | • Difficult to understand the perspective of others or the situations that people may be in |
| • Surprised to experience increases even when not directly involved with individuals at site | • Situations in which students did not believe teachers were working hard |
| • Knowing more about a person makes it easier to increase level of empathy, even when this is indirect | • Situations in which students questioned why an individual was at a particular site (e.g., food distribution, anxiety clinic) |

Other factors that made it more challenging for students to develop empathy included struggling to understand the perspective of others or relate to those from different backgrounds (e.g., lower socioeconomic status). Students also had difficulty developing empathy if they believed the individual, such as a teacher, was not truly invested in their work that day or if the student was

unsure why a community member was seeking services at their site. These sorts of interactions often caused students to "disconnect" from the person to some degree. Several students also struggled with moving from sympathy to empathy and with feeling they should be developing empathy when they could not on a particular day. These students noted that they tried to put themselves in the other person's shoes but often found themselves "feeling badly" for the person instead. Once the student was able to better understand the person's circumstances over time and take a step back from the situation, they were better able to develop empathy.

**Reflections: Increase in metacognition related to empathy development.** In addition to determining key factors related to empathy development, this study also evaluated whether student metacognition related to empathy occurred as a result of integrating these teaching tools. As seen in Table 1, all 12 students recognized an increase in their awareness of level of empathy. One student stated,

> Being required to take inventory and be mindful of these changes has contributed to me in turn being more empathetic because I am hyperaware of them. I have acquired a more healthy form of empathy over the course of the semester and have developed knowledge of how to be empathetic.

## Discussion of Implications

Analysis of student self-assessments and reflective writings suggested that students experienced positive changes in their level of empathy across the semester. Moreover, students developed metacognition related to empathy in that they were aware that their empathy was changing and could identify certain factors that promoted or challenged such change. Although this work is in the preliminary stages, these pilot data suggest that integrating teaching tools related specifically to empathy has the potential to enhance empathy development in service-learning students. All 12 students in this project experienced improvements in their level of empathy at some point in the semester, as demonstrated by the percentage of reflections describing an increase in empathy. It is noteworthy that this change appears to occur even in students having limited direct contact with individuals in their placements. Class discussions may have served to increase empathy among those students with limited direct contact. Given that only 12 students participated in this pilot

study, replication is needed to determine whether these findings hold in larger samples of service-learning students. Implications of this study and recommendations for teaching, therefore, are based on a limited pilot sample with a need for replication and should be interpreted within this context.

## Key Factors Influencing Empathy Development

This pilot project contributes to the existing literature on empathy development in service-learning by outlining important facets of students' interactions and experiences in their place-ment settings that may contribute to growth in level of empathy. Using a qualitative approach in evaluating student reflections, it was possible to isolate critical incidents that may have encouraged empathy development among students. Although students were at a number of different placements, there was overlap in type of inci-dents across placements, suggesting that a focus on these categories of critical incidents may have widespread applicability for other service-learning courses.

Findings suggested that students were more likely to expe-rience a change in empathy when they were able to observe the emotional experiences of others and see how a person reacted to a particular, emotionally salient event. Students commented on being able to put themselves in the shoes of the other person (e.g., teacher, student, facilitator) and imagine how he or she was feeling at that time. These experiences were observational in that students were not directly involved in these incidents; nonetheless, observing others' emotions and how the situation was resolved led to an increase in empathy for students. Additionally, students expe-rienced a change in empathy when they were given more responsi-bility at their placement sites. For several students, this was a sign that their presence was appreciated and that they were doing a good job. In essence, students may have internalized their site supervi-sor's confidence in them; this confidence may have enabled them to become more invested in their work with others and may have allowed them to develop deeper connections with the individuals at their sites. Increased responsibility also offered them new expe-riences, which gave them the chance to further develop their level of empathy.

In a third category, students experienced increases in empathy when they learned more about an individual's background and personal life. This aspect of developing empathy is consistent with previous research that has highlighted the importance of better

understanding an individual's circumstances in order to break down an "us" versus "them" viewpoint *(Vogt et al., 2011; Wilson, 2011)*. Students noted that it often took time to get to know certain people at their placement, suggesting that students who have limited contact with individuals may not benefit as much from this category in enhancing their empathy. Interestingly, for students in this pilot project, learning more about individuals was just as commonly linked to empathy development as observing the emotional experiences of others and being given more responsibility at their site. It may be that instructors can work to improve empathy in students with limited direct contact or fewer hours in their placement by integrating vicarious experiences into their classroom that allow students to observe the emotional experiences of individuals (e.g., role play, video clips) and reflect on those observations. Instructors may also consider encouraging students to take the initiative to ask for more responsibilities in their placement or to speak up if their supervisor is asking for a volunteer to assist with other duties.

Findings from this project also suggest that a shared personal connection between the student and individuals at their placement site contributes to increased levels of empathy. For several students, these connections had a basis in events that occurred when they were younger (e.g., being reprimanded by parents) or memories of grieving after a family member passed away. Such personal connections seemed to increase the students' ability to put themselves in an individual's shoes and understand what that person may have been experiencing at the time. This may be one aspect of empathy development that instructors could consider priming students to pay attention to in their interactions with others. Depending on the circumstance, students may benefit from initiating a discussion about that shared experience when it is brought to their attention.

Changes in empathy were also noted when an interaction with an individual challenged a student's thoughts about a situation. As previously highlighted, theory suggests that empathy develops from experiencing cognitive dissonance and being able to resolve that dissonance by rethinking one's beliefs and attitudes about a particular situation *(Wilson, 2011)*. In this pilot study, "challenges to previous thoughts" was the least commonly described critical incident. Although this area is clearly important in empathy building, it may be that instructors can introduce other themes related to critical incidents in their discussions of empathy and not solely focus on the aspect of cognitive dissonance.

# Factors Promoting and Challenging Empathy Development

In addition to providing five salient areas for instructors to focus on when discussing empathy development, findings from this pilot project also suggest several factors that could be used to increase the likelihood that students will develop empathy (outlined in Table 2). Instructors may be able to use this list in initial discussions of empathy development, perhaps even before students begin work at their placements. This could serve as a "lessons learned" introduction to empathy and enable students just beginning their service-learning course to think about how these factors may help or hinder their empathy development. For instance, students may recognize that getting to know an individual well at their site may contribute to building empathy but that they may need to be patient, as it may take time to establish a relationship. With this knowledge, students may begin their placement knowing that they would benefit from taking the initiative to start conversations with individuals, including supervisors, coworkers, and the individuals being served. If students find it hard to make such connections, they could brainstorm as a class or in small groups to form strategies for developing such relationships.

Further, students should be reminded that, consistent with one of the critical incidents (gaining more responsibility), seizing opportunities to take on new experiences might contribute to empathy development. Such new experiences may serve to increase the student's confidence that they are doing good work at their site and that their service is valued; this confidence may allow them to become more invested in their work and in learning about the people with whom they are interacting. If students are struggling to feel confident in themselves and how they are valued at their sites, instructors may need to spend time helping the students unpack reasons for the difficulty and generate strategies for increasing their self-confidence. Students may also benefit from hearing others share incidents of feeling insecure at their sites and learning how they overcame such obstacles.

Instructors could also use the list of factors that challenged empathy development as starting points for small group discussions on how to overcome such issues, or even as targeted questions in reflective writing. For instance, instructors could ask, "How could you move from feeling sympathy for someone to feeling more empathic?" or "What might prevent you from understanding the perspective of another person at your placement?" In courses with less of a focus on empathy, students may benefit from such a

list of "lessons learned" to reference throughout the semester as needed. This list may raise awareness in allowing students to think at a deeper level about how their service-learning experience is contributing to their personal development.

Additionally, service-learning instructors are encouraged to share information about empathy development in face-to-face conversations with their community partners at students' placement sites. In strong service-learning partnerships, instructors and community partners have relationships with each other that are essential for the success of service-learning. Communication, personal connections, and collaborative planning are often cited as determinants of effective relationships between instructors and community partners *(Sandy & Holland, 2006)*. Discussions around student empathy may be an additional way to build the relationship between instructors and partners; these discussions would ultimately benefit both students and the individuals that are served at their placement sites. For instance, instructors could discuss with community partners the idea that students may develop empathy at their sites when they are given additional responsibilities. With additional responsibilities, students may feel more confident in their work at the site, which may prompt them to develop deeper relationships with the individuals they are serving. Further, partners could help students develop empathy by giving students opportunities to learn more about an individual's background and personal life. If the student is more likely to work with groups of individuals, the partner could perhaps carve out time for that student to work individually with someone at the site over the course of several weeks. The list of five categories of critical incidents and information from Table 2 may be a useful resource for instructors to share with their community partners. Together, instructors and community partners could discuss and tailor these suggestions to ensure that students are able to increase their level of empathy for individuals at that particular community site.

## Limitations and Next Steps

Although the integration of these two specific teaching tools, a self-assessment on empathy and targeted reflections, demonstrated considerable promise in enhancing student empathy, the current project had some limitations. First and foremost, this pilot study was limited by its size (12 students), and findings cannot be generalized. This study needs to be replicated with larger samples in order to verify the themes and critical incidents that emerged from this pilot sample. The author plans to compile data from

multiple semesters of integrating these teaching tools to determine additional themes regarding empathy development that may arise from student self-assessments and reflections and verify that themes generated from this sample of students are consistent across semesters. Additional data points would also allow the author to determine whether any specific critical incidents lead to greater empathy development than others. With this limited sample, it was not possible to tie specific experiences to movement from one particular level of empathy to another. Such findings would be useful for service-learning classes that are not empathy focused by supporting inclusion of such experiences. Instructors could then ensure that students experience that particular incident through class discussions, role play activities, or short video clips. Further, it was not possible to compare empathy development between this group of 12 students and students in a service-learning course that lacked these teaching tools. Thus, it is not possible to determine how much these teaching tools contributed to empathy development in students above and beyond that already gained from a service-learning course. Next steps for this project include comparing student reflections between this section and another section of the Psychology Department's service-learning course that does not include empathy-focused teaching tools.

Additionally, next steps include further determining how to enhance empathy development in students with limited direct contact. Findings are encouraging in that students with limited direct contact (three students) were still able to experience growth in empathy during the semester. Given the small subset of students with limited direct contact, it was not possible to determine whether these students actually experienced less growth in empathy than students with direct contact. Student comments suggest, however, that these students did feel they had to work harder to develop empathy in that it often took more time to get to know an individual's background or that they needed to focus more on developing empathy for supervisors and coworkers. Next steps for this line of research include conducting focus groups with students with both direct and limited direct contact to determine how empathy may develop differently in the respective groups.

As this project moves into the next phase, the author plans to add a final self-assessment paper in which students are asked to describe their level of empathy at the end of the semester and why they believe they achieved that level. In the current pilot study, there was not a formal end-of-semester assignment related to empathy; students were asked to indicate their level of empathy and provide

comments if they so desired. In particular, it would be interesting to learn from those students who overestimated their level of empathy at the beginning of the semester and determine when and how they realized they might have overestimated their level of empathy. Doing so may elicit additional themes related to empathy building that could be integrated into a service-learning course. It would also be interesting to explore other aspects of student reflections and determine how students believe a higher level of empathy will affect their personal and professional lives as they move forward. Further, given that levels of empathy have been declining among college students *(Konrath et al., 2011)*, it would also be interesting to learn students' thoughts on the societal implications for increasing empathy and how other students could be encouraged to continue their empathy development.

Improvements to the course based on findings from this pilot project also include distributing the list of factors identified in Table 2 to students at the beginning of the semester in conjunction with initial discussions of empathy. This list will also be distributed at the end of the semester to determine whether students believed these factors were relevant for their placements, as well as whether they have additional thoughts on factors that promote or challenge empathy development. Additionally, a focus group will be conducted with students taking this course over the next academic year to determine the acceptability of these teaching tools and to expand on critical incidents that could be tied to empathy development.

## Considerations for Other Service-Learning Courses

Components of this pilot project have promise for other instructors teaching service-learning courses and aiming to improve student empathy. It is suggested that instructors incorporate an initial self-assessment of empathy into the course, as well as a component of reflective writing that is focused specifically on empathy. An "Empathy what?" section was added to eight reflections in this pilot project; instructors may choose to decrease that number if they are just beginning to adapt their class to include a focus on empathy. These two tools, self-assessment and component of reflective writing, will likely increase student metacognition related to empathy development as well as improve student empathy overall. The list of factors promoting and challenging empathy development in Table 2, as well as the themes related to critical incidents, can also serve as points of discussion throughout the course. These

themes included (1) observing emotional experiences of others, (2) being given more responsibility at site, (3) learning more about the people being served, (4) having a personal connection with others, and (5) experiencing challenges to previous thoughts about a situation. Class or small group discussions could be tailored to focus on one or two of these critical incident categories as instructors recognize correspondences between these themes and student reflections. Depending on the focus of the course and/or placement settings, different levels of emphasis may be attached to various themes in class discussions.

The current project was piloted in a smaller classroom setting with 12 undergraduate students. For larger classes, instructors may choose to use smaller group discussions that focus specifically on the key components of building empathy that were generated from this project. These smaller groups could be maintained throughout the semester to build a sense of openness in discussing empathy among students. Findings from this project also suggest that these teaching tools are useful for students with limited direct contact hours. Small group discussions that pair a student who has limited contact with a student who has direct contact may further elicit growth in students who have limited contact. Also, priming students with limited contact to pay attention to particular aspects of their experiences (e.g., shared personal connection, challenge previous belief) may help to enhance their experience by making them more likely to recognize these opportunities and seize upon this potential for empathy development.

For classes that are not empathy-focused, the author suggests that instructors spend some part of a class discussion focused on the importance of empathy in service-learning. Empathy is an abstract concept for many students, and bringing this aspect of service-learning to their attention may prompt awareness of empathy to some degree. If instructors are able, they may also wish to integrate empathy into class discussions throughout the semester, again using factors from Table 2 or the critical incident categories as launching points for discussion. It is likely that even without a formal assignment focused on empathy, students will still benefit from increased awareness of empathy development through service-learning.

In sum, findings from this project are encouraging in suggesting that instructors can tailor their service-learning courses to include empathy-focused teaching tools that improve student empathy. Replication of this pilot study is needed to confirm that these themes resonate across other service-learning courses and

groups of students. Ideally, these tools could be adapted and used in a variety of service-learning classes across institutions. As it stands now, this project contributes to the literature on service-learning outcomes by highlighting specific themes and processes that may contribute to increased empathy development among students. The author encourages other service-learning instructors to use scholarship of teaching and learning (SoTL) methods like those described in this article to add new knowledge around other constructs relevant to service-learning classes, including identity development, ageism, and morality. This important research has the potential to benefit both students and the larger community that is served by university service-learning experiences.

## Acknowledgments

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# Dissertation Overviews

# *A Dissertation of Boundary-Spanning Actors Within Community Engagement*

Casey D. Mull

## Abstract

Unique individuals serve in critical roles in the planning and implementation, institutionalization, and support of service-learning and community engagement within higher education institutions. These individuals, identified as boundary spanners, operate at the nexus of the higher education institution and the selected community. This dissertation focused on development and use of an instrument that measured a previously developed qualitative model. Results indicated that personal characteristics do not significantly influence boundary-spanning activities; in fact, organizational characteristics were more significant than previously thought. The individual, organizational, and societal implications of these findings, as well as directions for future research, are discussed.

## Introduction and Purpose

Service-learning and community engagement scholars have focused attention on faculty members, organizational units, students, and even community partners as more research emerges toward institutionalization of this model of engaged scholarship. Those acting in the critical roles of boundary spanner, however, are less studied. Boundary spanners utilize skillsets or roles to work between and among groups and organizations and leverage the internal functions and boundaries of an organization. Boundary spanners permeate society in numerous fields. The government sector, including public higher education, utilizes boundary spanners frequently and in multiple capacities. The activities of boundary spanners in this arena informed this dissertation study in important ways, theoretically and operationally. Boundary spanners support effective networked governance structures.

In networked governance, solutions can be identified and implemented through a network of collaborating producers and providers, rather than requiring that an entity provide direct services. Localized boundary spanners create their own individual networks inside and outside the formal structure of networked governance in order to be effective. To mobilize their networks for influence and action, boundary spanners bridge different agencies

and buffer threats through communication while building trust and understanding.

University–community partnerships can be viewed as one type of contributing entity in networked governance. This study examined the phenomenon in which higher education and a community come together in ways that include boundary spanning for the delivery of educational efforts. The purpose of this study was to investigate boundary-spanning activities and behaviors of individuals who are employed by higher education institutions who build partnerships between higher education and the U.S. Department of Defense. These individuals are university employees but to members of the Department of Defense community, they may appear as contractors, or employed through the military-industrial complex to provide goods and services for the military community. Four research questions guided the process: (1) What specific boundary-spanning behaviors are prevalent in the population of university–military contractors? (2) To what extent are boundary-spanning behaviors explained *individually* by personal or work/organizational characteristics in the population of university–military contractors? (3) To what extent are boundary-spanning behaviors explained *jointly* by personal or work/organizational characteristics in the population of university–military contractors? (4) Is it possible to derive empirically a conceptual structure for the instrument used in this study that differs from the logically derived constructs used in the three preceding research questions?

## Theoretical Framework

The study was based on a theoretical and conceptual framework that used an interdisciplinary approach to examine the phenomenon of individuals operating between organizations and communities within higher education institutions in a networked governance context. First, the framework introduced interorganizational relationships. Specifically, the framework first described how organizations operate in a networked system; this description was informed by agency and stewardship theories derived from the public and private management literature. Second, the framework examined community engagement, in particular its individual actors and organizational systems. Finally, the concept of boundary spanning was introduced with a comprehensive review of how organizational theory and human behavior disciplines used boundary spanning to describe behaviors, antecedents of boundary-spanning behaviors, and effectiveness of these behaviors.

# Methods and Data Sources

This quantitative study employed a selected response instrument created as described in Sandmann, Jordan, Mull, and Valentine *(2014)*. The instrument was adapted for and distributed to higher education employees engaged with the military community. The instrument separated the initial Weerts and Sandmann *(2010)* model from two constructs of task orientation and social closeness to four constructs: technical-practical, socio-emotional, community and organizational orientations. The military community included service members and their dependents as well as the other professionals supporting them. Data were collected through an online data collection tool.

Higher education employees engaged with the military served as the population of the study. Of this population, 413 unique collection links were distributed through publicly available electronic mailing lists to individuals known to be working with the military community. The unique collection links allowed for the modified snowball sample by equipping the researcher to determine how many times each link had been used. A modified snowball sample resulted in 178 usable surveys. To answer the four research questions, statistical analyses of these 178 surveys were performed through descriptive statistics, rank ordering of means, bivariate correlations, multiple regression analysis, and exploratory factor analysis.

# Results and Conclusions

The most surprising conclusion suggested by the evidence was that personal characteristics do not significantly influence the boundary-spanning behaviors of these individuals engaged in the community. This is surprising because many of the qualities embodied in effective boundary spanners reflect individuals' skills, behaviors, or experiences *(Ernst & Chrobot-Mason, 2011; Williams, 2002)*.

The only personal characteristic found to influence boundary-spanning behaviors was an individual's educational attainment. Also, boundary spanners' length of service with the community or the organization has been found to influence boundary-spanning activities *(Miller, 2008)*. Many previous studies of boundary-spanning behaviors have not examined personal characteristics as predictors of boundary spanners. This research suggested that these characteristics are not relevant for future study.

A second conclusion from this study reinforced the importance of communication to boundary-spanning activities. This study affirmed that the single greatest contributor to boundary-spanning behaviors is communications among a variety of groups. Miller *(2008)* defined boundary spanners as effective collectors and disseminators of information. This study found frequency and type of communications to be predictors as well as tools for developing and sustaining partnerships.

A third conclusion was confirmation that boundary-spanning work with the community significantly influenced the boundary-spanning behaviors of all four construct orientations (technical-practical, socio-emotional, community, and organizational). The greater a boundary spanner's perception of being valued and supported, the higher the frequency of boundary-spanning activities occurring across each of the operationalized model's constructs.

As a final conclusion, this study provides support for the Weerts and Sandmann *(2010)* model. The Weerts and Sandmann *(2010)* model relied on two constructs rather than four constructs created from the two axes in the original model of task orientation and social closeness. Through factor analysis, the four constructs applied in this study were conjoined into two. The two-construct rotation mirrored exactly the Weerts and Sandmann *(2010)* model. This two-construct model aligns with past research. Richter, West, Van Dick, and Dawson *(2006)* and George and Chattopadhyay *(2005)* indicated that a dual identity forms in boundary spanners and contract workers. This study confirmed these researchers' conclusion: Individuals can feel affiliation toward both their parent organization and a second group or community.

## Significance for Theory, Research, and Practice

This study has both theoretical and practical implications. The implications for practice and policy are presented, organized by sphere of influence from the individual level to the societal level. Beginning with building awareness among individuals, the significance expands to the societal level.

At the individual level of influence, any specific boundary spanner can use self-awareness of boundary-spanning behaviors in tailoring their performance and roles based on their unique skillsets, attributes, and qualities. The instrument developed in this study can be used in conjunction with other self-assessment scales to augment fulfillment of personal or organizational needs in understanding how boundary spanners serve in the work-

force. Boundary spanners experience a dual identity *(George & Chattopadhyay, 2005; Kreiner, Hollensbe, & Sheep, 2006; Richter et al., 2006)*, sharing the identity of not only their organization, but also their community or other group with which they span a boundary.

At the organizational level, not all organizations have the same readiness to utilize boundary spanners. Traditional hierarchical organizations may not be prepared to embrace high levels of boundary-spanning activities. Flexible, entrepreneurial organizations that understand the collaborative versus competitive landscape may use boundary spanners to their fullest potential. This study illustrated the changes occurring within higher education institutions as community engagement continues to develop. As higher education institutions desire more community engagement, boundary spanners can assist in bridging previously segmented colleges, schools, units, and projects in an entrepreneurial manner so long as support exists in the managerial and executive ranks.

Change occurs more slowly at the system and society levels. Policy changes and influences at the federal level, particularly relating to networked governance, can encourage the use of boundary spanners within the federal sector. Results from this study indicate that individual boundary spanners' experience and background are less influential in network formation than characteristics of partnering organizations.

In addition to the above practical implications, an expanded research agenda exists. This study was an extension of a qualitative study conducted by Weerts and Sandmann *(2010)*. Examining specific populations involved in higher education community engagement, individuals operating in roles other than that of university–military contractor, and nonemployees (volunteers) operating between organizations and communities will assist in determining the validity, reliability, and applicability of this quantitative boundary-spanning behavior measurement instrument. Additional studies will aid in discovering generalizable findings.

Using this instrument combined with other qualitative and quantitative tools in future research could provide clarity in the refinement or expansion of boundary-spanning theory. Williams *(2002, 2011)* described diplomacy, tact, and political acumen as skills and qualities of a competent boundary spanner. Negotiating power was the least noted boundary-spanning behavior among this study's respondents. In networked governance, power is distributed horizontally across the network. Future research focusing on power dynamics and boundary spanning may indicate that negotiating

power was the least used behavior because of the distributed sense of power.

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# BOOK REVIEWS

Burke, J. G., & Albert, S. M. (Eds.). (2014). *Methods for community public health research: Integrated and engaged approaches.* New York, NY: Springer. 278 pp.

# Review by Richard Goranflo

C ommunity health education is an especially hot topic in higher education today. The expansion in community health degree programs and enrollments that has occurred during the past decade suggests that there is great interest in pursuing community health research as a career. A new federal emphasis on coordinated care models and newly developed grants available for community-based research are additional recent factors that make it crucial for public health educators and practitioners to have as many tools as possible to address the complex and even unanticipated issues that will arise.

*Methods for Community Public Health Research: Integrated and Engaged Approaches* is a unique resource in that it provides both an introduction to community health research methodology for beginners and an in-depth guide for advanced researchers. Burke and Albert stipulate this as their goal early in this edited volume, and they execute it admirably. Their selection of authors includes those who present varied and sometimes overlooked research methods, with examples illustrating their potential application.

The premise of this book is that community health research is a subdiscipline of public health that requires its own approaches to research. The complexities of studying community health present researchers with issues more challenging than merely selecting between qualitative and quantitative approaches. The editors assert that integrated research methodologies (also known as mixed-methods methodologies) are often better suited for obtaining accurate and useful data in community health research. Burke and Albert divide the book into two broad categories for understanding the data available to community health researchers: inferring the meaning of numbers (Chapters 2-5) and inferring the meaning of words (Chapters 6-9).

Chapters 2 and 3 focus on spatial analysis and agent-based modeling (ABM), both of which emphasize ecological models predicated on people's interactions with their environments and the impact of those interactions on health outcomes. Predominantly featured is the idea of using geographic information systems (GIS) and ABM to model community behavior. A noteworthy aspect

of these early chapters—one that sets the tone for the rest of the book—is the authors' discussion of methodologies varying in degree of sophistication and cost. Multiple computer models are identified as well as sources of information that could be useful for everyone from graduate students to current practitioners. The authors even cover how to use existing and free data in conjunction with free GIS models to begin producing one's own spatial analyses. Beyond collecting and modeling one's data, Chapters 2 and 3 also emphasize that creating community partnerships is vital for adding meaning to data.

Chapter 4 explores the use of network models and how interactions shape health outcomes. It helpfully opens with an easy to understand introduction to the concept of "shared conditions" *(p. 69)*, using a neighborhood structure model as a straightforward example. Simply put, how does a neighborhood arrange itself based on the preferences of those who live there? Contributing author Keane walks the reader through an activity that feels more like active learning than reading. Once the reader has a basic understanding of network structure, more advanced methods are described for readers with larger and more complicated data sets.

One method, described in Chapter 8, that may be new to many readers is Visual Voices, which is based on the principles of community-based participatory research. According to contributing authors Ochtera, Rak, and Yonas,

> Visual Voices began in 1993 as a project that provided a creative and fun opportunity for free expression, learning, and relationship development that crossed age, gender, race, and economic boundaries.… Visual Voices projects use multiple creative arts–based painting, drawing, and writing sessions to create and explore topics of interest with a community group. *(p. 197)*

The authors offer an example drawn from research with a group of adolescent youth in Pittsburgh, Pennsylvania, regarding the topic of gender dynamics in relationships. Individual participants were asked to create paintings representing their feelings on an array of topics, as well as written stories accompanying their paintings. Paintings and stories were then coded for themes so that researchers could quantify which themes appeared the most by gender. Creative expression activities are not common in com-

munity health research, but as the authors argue, they could be especially useful in research involving adolescents.

The remaining chapters of this book extend the strengths exemplified in the chapters just described by adding thoughtful discussions of realist evaluation (Chapter 5), concept mapping (Chapter 7), and news media analysis (Chapter 9). Chapter 10 concludes the book by summarizing how each method is important in furthering the advancement of modern community health research.

One critique of this book I would offer involves the introduction of system dynamics in Chapter 6. Although system dynamics is a valid tool for community health research and is appropriate in certain situations, it is a very time-intensive and resource-heavy method that seems a bit out of place in this book. The discussions of other methods start with examples one can essentially try for free with existing data, but system dynamics more or less requires the researcher to dive into the deep end. Seasoned community health researchers may feel comfortable with this treatment of the topic, but less experienced researchers and graduate students may find it a bit overwhelming. Perhaps even moving it to Chapter 9 would have made a bit more sense in terms of the flow of this book.

Despite this single minor criticism, I highly recommend this book. It is an important resource for anyone interested in community health research. The writing is so accessible that it would even be an appropriate text for relevant upper-division undergraduate coursework. It includes a wide variety of integrated research methods that borrow from many different disciplines, thus offering approaches to the types of multivariable questions that often must be addressed in community settings. Even the most seasoned community health researcher is likely to find something new in the methodologies explored by the authors of this volume.

## About the Reviewer

**Richard Goranflo** is the program manager for the School of Medicine's Graduate Studies Program at Oregon Health & Science University. His research focuses on aspects of faculty wellness with specific interest in biomedical research programs. He earned his Ed.M. from Washington State University and is currently completing an Ed.D. in educational leadership at Portland State University.

Guinier, L. (2015). *The tyranny of the meritocracy: Democratizing higher education in America.* Boston, MA: Beacon Press. 176 pp.

# Review by Megan S. Segoshi and OiYan A. Poon

Lani Guinier's *Tyranny of the Meritocracy: Democratizing Higher Education in America (2015)* offers a critique of current measures of merit frequently used in selective college admissions and challenges the way we define merit as a society. Guinier demonstrates the incongruence between the mission statements of many colleges and universities, with their use of phrases like "preparation to enter a diverse workforce" and "diverse citizenry," and the criteria by which these institutions actually evaluate their students in admissions processes and pedagogical practices. If institutions of higher education are indeed to serve the purpose of producing informed and engaged citizens, Guinier suggests that a reexamination of how they define merit is warranted.

Guinier borrows her definition of *merit* from Amartya Sen, stating that merit "is an incentive system that rewards the actions a society values" *(p. xi)*. Ergo, measures like SAT scores, which are used as one highly valued marker of student merit in admissions processes, reflect a misguided emphasis on individual accomplishment rather than the potential for learning the skills and talents needed to address collective problems in our democracy. Guinier implies that by relying heavily on criteria that supposedly reflect individual achievement, institutions of higher education are engaging in social reproduction, or the perpetuation of social inequality through the valuing of measures more readily accessible to and easily achieved by the wealthy.

Further problematizing the overreliance on SAT scores, which she names the "testocracy," Guinier presents the now commonly accepted argument that such scores have proven to be poor predictors of student potential. In fact, they are more accurate reflections of student wealth *(Bowen & Bok, 1998)*. Hiss and Franks *(2014)* found that there was no significant difference in the academic success of students who submitted standardized test scores to their colleges and those who opted not to—most of whom were women and students of color—suggesting that these scores are not valid predictors of student academic success.

Guinier nicely sets the stage for proposing a more comprehensive way in which admissions offices can fulfill the promise of advancing their institutions' democratic and diverse missions but

then falls short of actually advocating such an arrangement. She attributes our obsession with SAT scores to the reliance of many higher education institutions on their rankings in the *U.S. News & World Report*, which uses average student SAT scores as a strong measure of college quality. Because the U.S. News serves as a determinant of prestige for colleges and universities, many institutions depend on its rankings to maintain their status in the increasingly competitive, market-driven field of higher education. Guinier explicitly states the issue: that we need to "rethink our meritocracy and our definition of 'merit' altogether" *(p. 42)*. However, rather than focus on challenging institutional dependency on such reports and external prestige brokers, Guinier places the burden on high schools and recruitment programs to ameliorate society's reliance on false measures of student merit. By naming these organizations "solutions," as Part 2 of *Tyranny* is titled, Guinier shifts attention away from the need to reform admissions processes, suggesting instead that external programs offer the most promising means to reconceptualize merit as democratic.

Guinier presents two organizational initiatives as examples of "solutions," University Park Campus School and the Posse Foundation, and then delves into innovative, collaborative teaching techniques implemented at colleges and universities. University Park is a public charter high school created in collaboration with Clark University in Worcester, Massachusetts, with the goal of emphasizing collaboration, service, and an equitable education. Its students come from the surrounding underserved, low-income neighborhood. Students who graduate from University Park are granted full scholarships to attend Clark University if they are accepted through the standard university admissions process. The Posse Foundation is a well-known race-blind, need-blind college program that recruits students from various urban areas based on their potential for collaborative community leadership and sends them to colleges and universities across the country along with their "posse," or cohort of other Foundation-supported students. Both of these organizations are redefining merit by assessing students based on their leadership skills and potential rather than strictly on quantifiable measures of achievement. Despite the advances these organizations have made in their attempts to redefine merit, they are still operating within a larger system that does not value those same qualities. This is evidenced by the surprisingly low persistence rates of University Park graduates, despite their very high attendance and high school graduation rates. For example, in 2012, none of the University Park students who attended the University

of Massachusetts Amherst or Clark University persisted to earn their undergraduate degrees. Since then, University Park has taken on the new challenge of incorporating college readiness into its curriculum.

Finally, Guinier challenges the notion that merit should be based on individual ability to do well on high-stakes tests by examining the innovative pedagogical methods being implemented by college professors at the University of California Berkeley and the California Institute of Technology. Eric Mazur and Uri Treisman encourage their students to value the process of learning rather than their performance on tests and quizzes. They also embrace a Freirian view of teaching, which values both students and instructors as equal participants in a collaborative learning process. Guinier's support of these methods is informed by other authors *(Page, 2007; Woolley & Malone, 2011)* whose work supports the notion that the future of our country—not just education, but other fields such as law and health care—is dependent on our ability to educate students in how to work collaboratively and innovatively to solve challenging world problems. She echoes other authors *(Rae-Dupree, 2008; Yeager & Dweck, 2012)* in her assertion that real learning takes place when students view intelligence as something that can be cultivated rather than an innate characteristic, and academic success as a matter of effort rather than something predetermined and fixed. Citing recent studies *(Boaler, 2008; Brewer & Gardner, 1996; Hong & Page, 2004; Page, 2007),* she further argues that more learning happens when diverse groups of individuals are working together. Guinier redefines merit as democratic instead of something that only a few at the top-tier institutions can access and define; thus, merit ought to be understood as achievable by anyone, with learning opportunities more equitably distributed in society. She posits that the concept of merit should concern qualities such as leadership, collaboration, resiliency, and a drive to learn rather than simply being defined by dubious test-based measures.

Guinier offers a compelling critique of generally accepted notions of merit adopted by those colleges and universities that often lament the challenges they encounter in enrolling racially diverse students. However, Guinier does not follow her critique with a direct call on colleges and universities to reconsider and transform their criteria for admissions review and selection. Rather, she offers programmatic examples of solutions to the problematic ways of defining merit that absolve colleges and universities of any responsibility to reconsider their admissions systems. Although it is important to acknowledge and give credit to the many efforts by

organizations like the Posse Foundation and unique high schools like University Park, it also should be noted that they are not actually challenging the use of SAT scores in admissions; rather, they are finding ways around it. In order to truly challenge the testocracy, higher education institutions must be willing take a stand against the flawed measures of success touted in the *U.S. News & World Report*. Given the evidence that SAT scores are poor predictors of overall college success, selective postsecondary institutions are actively contributing to the perpetuation of the wealth gap in the United States by relying so heavily upon them.

Guinier's critique of our meritocracy is incredibly timely. The U.S. Supreme Court will soon announce a decision in the rehearing of *Fisher vs. University of Texas*, a case in which a White female applicant filed a lawsuit against the University of Texas after being denied admission, claiming that the consideration of race unfairly privileged Black and Latino applicants. Additionally, more than 100 Asian American organizations have jointly filed a federal complaint against Brown, Yale, and Dartmouth universities, attacking affirmative action and holistic admission review processes for allegedly discriminating against Asian Americans. Central to these attacks is the testocracy and its overreliance on quantifiable measures of achievement, like the SAT, in determining who deserves admission at elite institutions. It is troubling that the use of race in admissions processes is being targeted as the culprit for inequities in college access, especially given the extensive research suggesting that racial diversity offers many benefits to all students *(Gurin et al., 2004)*.

Guinier makes a compelling case for the importance of reconsidering admissions policies and processes in light of conversations about reconceptualizing merit. Leaders in higher education must accept responsibility for tailoring admissions criteria to create more diverse student bodies. *Turning the Tide*, a report by Harvard's Making Caring Common Project *(2016)*, is a representative indication that elite universities are beginning to do just that. By redefining merit in the classroom, colleges and universities embrace the possibility of shaping a more collaborative, democratic, and equitable workforce. However, institutions of higher education must be willing to take the risk and make the investment in admissions criteria that will actually determine which students will be the most successful in and after college, rather than relying on external organizations to do so.

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St. John, E. P. (2013). *Research, actionable knowledge, and social change: Reclaiming responsibility through research partnerships*. Sterling, VA: Stylus. 276 pp.

# Review by Timothy J. Shaffer

*I*n a world increasingly fraught with the acknowledgment that our social institutions and systems have not lived up to their purported goals, Edward P. St. John *(2013)* offers a thorough and thoughtful book on the ways that research might generate knowledge that informs efforts to "equalize opportunity for those underrepresented among college graduates and practitioners across professions" *(p. xv)*. Offering an alternative to public policy that has been shaped primarily, if not almost exclusively, by an economic development model, St. John attends to the need to bring social justice and fairness into our thinking about education and social systems. He squarely situates concerns about social good in our contemporary global context while acknowledging that the core assumption of progressivism and positivist research—a "general trajectory toward social uplift of low- and middle-income families" *(p. xvi)*—can no longer simply be assumed to be true. St. John offers frameworks for researchers and practitioners to use in partnership with educators in schools, activists in community-based organizations, and leaders in health care organizations.

The book consists of an introduction, eight chapters, and an appendix. The entire book is a great resource for scholars, but the appendix is particularly noteworthy for outlining how graduate students can conduct dissertation research that utilizes action research. Graduate students considering engaging in community-based research for theses or dissertations, as well as those who mentor them, will find this book an invaluable resource. I turned to Joseph Maxwell's *(2005) Qualitative Research Design* when writing my dissertation proposal, and I believe that St. John's book could be very useful in thinking about and framing what a dissertation using action research could be. Additionally, at the end of each chapter, St. John provides what he terms "guidance" in the form of recapitulations of key concepts, often written to practitioner and research audiences. Since the book seems to be most useful as a tool for researchers, including but not limited to university faculty and graduate students, it is helpful to have these brief statements at the conclusion of robust chapters engaging diverse literatures to reinforce key concepts.

To illustrate his concepts, St. John uses examples related to three general challenges: (a) improvement in inequality in academic and social preparation for college, (b) outreach by colleges to support preparation and ease the college transition for underrepresented students, and (c) expansion of opportunities for underrepresented students in higher education. He uses these issues to show how researchers can work with practitioners to address locally situated challenges. The book offers a foundation for dialogue between researchers who focus on education and researchers engaged in addressing challenges related to access to social support services and health care. We live in what St. John refers to as a world driven by a "government-corporate-nonprofit complex [that] has transformed education by using research to rationalize systemic reform initiatives" *(p. 1)*. Calls for evidence-based reform across sectors ask for a critical perspective about the role researchers can and should play in response to complex public problems, and St. John offers a useful text to squarely ground researchers as actors and contributors to social justice issues, not simply as passive observers.

Chapter 1 focuses on the importance of reframing social and educational research in a way that puts researchers in relationship with community-based organizations so that they are "sharing responsibility [for] solving critical social problems in local contexts" *(p. 25)*. One of the great challenges is to move from a standard, centralized approach to a more polycentric approach to change. However, emergent issues of inequality "cannot be solved merely by replacing central control with polycentrism," because we must also recognize how the globalization process affects this dynamic. St. John refers to our current period as the Global Transition *(p. 26)* and helpfully offers a historical look at globalization and social justice. This examination highlights the significant shift that took place in the 1980s through the embrace of neoliberalism in government and educational sectors and the impact of this political philosophy through its promotion of individual rights and choice over approaches attempting to balance social good and economic development. With a rise in privatization of education and other social services, social scientists and researchers concerned about social justice issues must offer new insights and approaches to public problems since "most of the theories currently used to frame problems related to quality and access of service were developed during an earlier period of social and economic progress" *(p. 54)*.

Chapter 2 focuses on the critical-empirical approach, "a meta-methodology that can be used in literature reviews, qualitative research, and quantitative research to discern and address critical

challenges in policy and practice" *(p. 59)*. A great challenge, St. John notes, is that theories in problem solving have largely been based on universal theories in order to provide universal patterns of problems and solutions. Our universities have prepared us well to think in this way. In contrast, to solve problems in practice, scholars and practitioners need situated theories "that provide testable explanations about how a recurrent problem might be solved in context" *(p. 60)*. St. John argues that we in fact need both types of theories working in tandem, and we must help develop theory through community-based research and partnerships. As Peter Levine *(2016)* has recently noted, "we will be unable to address profound social problems until we strengthen our theoretical understanding of society, and that will come from books, data, and seminar rooms as well as from action in communities" *(p. 249)*. St. John offers a framework for thinking about the importance of theory, both for specific partnerships we are part of and for the scholarly community.

This leads to the focus of Chapter 3, the action inquiry model (AIM). The process of addressing public problems in educational and social support organizations is not simply a matter of implementing best practices, standards, and prescribed interventions. Instead, professionals ideally use their knowledge and skills to respond to problems that emerge when they are confronted by new requirements and standards. AIM is the heart of this book and consists of three core processes: assessing critical challenges, organizing to address these challenges, and using action inquiry in working groups (or communities of practice) to address challenges *(p. 84)*. Action inquiry focuses on integrating learning-oriented strategies into organizational change processes explicitly focused on reducing inequality. This is contextualized in a number of settings in which social scientists and researchers are in partnership with others. Chapters 4 through 7 offer deeper exploration of topics such as professional development, organizational change, public policy, and leadership and public responsibility. The challenge is that within our global context, we have shifted from earlier models and concepts that placed social responsibility on public institutions rather than hybrid or explicitly private institutions. Neoliberalism and the dominance of market-based approaches only intensify the need to attend to social justice and inequities in various domains.

The volume's conclusion offers a framing that is, in my opinion, often absent or marginalized in our discourse about university–community partnerships or engaged scholarship. Using the Global Transition as a lens, St. John challenges his readers to consider the

neoliberal worldview that dominates our lives and institutions in such a that we *almost* forget that there are alternative ways to view the world around us. The Global Transition is shaped by a political philosophy that embraces privatization to the detriment of those concerned about human rights and the capacities of all people to engage in meaningful work that can improve their lives. He emphatically puts it this way: "We must confront the challenge of promoting social justice in the world as it exists rather than arguing only for the unattainable alternative of returning to fully publicly subsidized and operated education and social services" *(p. 210)*. His central argument is that reclaiming social responsibility with an integrative emphasis on equality and human rights is a responsibility researchers share with professionals in multiple domains—public, nonprofit, and private sectors—along with citizens in communities. We must do this work together, in relationship. But this isn't a simple thing to do.

This leads to my critiques of the book. First, I was dissatisfied with St. John's use of the conceptually limiting language of "partnership." Institutions and communities are framed in a dichotomous manner that parallels his treatment of researchers and citizens. Most of us write in such ways, but I was hoping that St. John would note this problematic language or suggest something better. Am I, a university professor, not a citizen? Are nonprofit employees not members of neighborhoods, sometimes those they seek to improve? The language of partnership between institutions and communities sets up a perplexing issue if we are serious about addressing social justice problems. St. John is speaking to professional audiences, but I believe we need to think more deeply about the assumptions we make when we approach our work in such ways. Drawing on the scholarship of Harry Boyte and others to frame research partnerships as opportunities for coproduction of knowledge, rather than efforts by well-intentioned researchers, would be one helpful addition to this very useful book. This suggestion, however, is not so much a departure from what St. John recommends as a departure from how he writes about it.

My second critique of the book is that I felt St. John was trying to speak to a wide audience and lost some of his clarity in the process. Although the later chapters fleshed out his theories, they gave the impression of walking through a field of tall grass with only a sense of one's destination. Many examples included corresponding tables that offered greater depth, but I found the presentation somewhat confusing. To develop his concept of AIM, St. John draws on his many experiences. The sheer extent of information leads me

to wonder if a more streamlined presentation would have been appropriate for such a volume. I fear some readers might not have the perseverance to see the conclusion of the book in the distance, beyond the field.

My third critique builds on this point: The author's frequent references to his substantial body of scholarship give the book an element of reading like a summation or culmination of that past research. At times, I felt that I needed to read those other publications in order to make sense of this book. This is unfortunate because St. John offers an important critique of our current intellectual climate, as well as valuable suggestions for a different approach to our research. In the face of an increasing focus on a market mentality in our educational institutions and social service organizations, engaged scholars can grasp opportunities to buffer that seemingly inevitable embrace of neoliberalism and to see the world differently. We can and should be social actors, not simply social observers. St. John helps us think about how to do so.

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