Community-Engaged Population Health Research: A Possible Next Step for CAFO Research

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Presentation to the Environmental Health Scholars Fall Forum
November 1, 2018
Objective:

Generate discussion about some possible next steps using community-engaged population health research
“The health outcomes of a group of individuals, including the distribution of such outcomes within the group...The field of population health includes health outcomes, patterns of health determinants, and policies and interventions that link these two.”

Population Health Interventions

Health Impact Pyramid

Increasing Population Impact

Counseling and Education

Clinical Interventions

Long-Lasting Protection Interventions

Changing the Context to Make Individuals’ Default Decisions Healthy

Socioeconomic Factors

Frieden T. American Journal of Public Health | April 2010, Vol 100, No. 4
Community-Engaged Population Health Research

“The process of working collaboratively with and through groups of people affiliated by geographic proximity, special interest, or similar situations to address issues affecting the well-being of those people.”

-CDC (1997), Principles of Community Engagement
Communities include...

- Those adversely affected
- Those positively affected
- Payers
- Regulators
- Supporters
- Opponents
CEnR

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• Community-based research (can be, but doesn’t have to be)
• Qualitative research (can be, but doesn’t have to be)
• A research method
The Research Lifecycle

- Problem identification
- Research design and planning
- Data collection
- Data analysis
- Interpretation
- Dissemination
The Research Lifecycle w/ CEnR

<table>
<thead>
<tr>
<th>Section</th>
<th>Description</th>
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<tbody>
<tr>
<td>Problem identification</td>
<td>• Community helps determine issue</td>
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<tr>
<td>Research design and planning</td>
<td>• Community helps to determine what will be feasible, appropriate, effective</td>
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<tr>
<td>Data collection</td>
<td>• Community provides insight into instrumentation, collection plans, may help with collection</td>
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<tr>
<td>Data analysis</td>
<td>• Community helps determine what questions need to be answered, may help with analysis</td>
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<tr>
<td>Interpretation</td>
<td>• Community helps understand what results mean</td>
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<tr>
<td>Dissemination</td>
<td>• Results are disseminated back to community in appropriate and timely manner</td>
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Why?

• Enhances community benefit in short and long-term.
• Can improve the work -- more culturally and context-appropriate, more feasible, improved recruitment....
• Builds trust; promotes accountability and ethics.
• Community buy-in promotes investment of resources, translation, sustainability.
• Allows you to move “up-stream” on the determinants of health.
• Is a muscle that gets stronger with use. Increased trust and increased experience working together create new opportunities for collaboration.
• New funding opportunities.
An Example

- Concerned Citizens of Tillery, Halifax County Health Dept., and Chapel Hill School of Public Health.
- For example, 1998 study funded by the NIEHS, compared volume of intensive livestock operations (ILO) in wealthier, predominately white census blocks with their prevalence in poorer, largely African American communities.
  - Research question emerged from the community’s concerns; local residents helped evaluate the quality ILO location data; findings interpreted collaboratively.
  - Findings disseminated through normal scientific channels, to state health department, and via media (esp. through community partner efforts).
  - Findings used by EPA, US Dept. of Agriculture to address environmental racism, contributed to policy positions, banning of new hog factories.

Community-Engaged Population Health Research

- A range of research.....
  - Explore
  - Describe
  - Explain (move from correlation to causation)
    - Predict
  - Address issues, change reality
Discussion

• Where are we at with the CAFO research? What kinds of research still need to be done?

• What communities could be beneficial to engage in order to:
  – Contribute to research feasibility and quality?
  – Lay the groundwork for sustainable action?