

## THE RESOURCE CENTERS FOR MINORITY AGING RESEARCH (RCMAR): COMMUNITY/RESEARCHER INTERACTION AND RELATIONSHIPS

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For more than a decade, the National Institute on Aging (NIA) has led a program called the Resource Centers for Minority Aging Research (RCMAR). One of the four key components of the RCMARs is a Community Liaison Core whose objectives are to conduct research on recruiting community members for scientific studies and to facilitate working relationships with host communities. The articles in this supplement represent some of the scientific knowledge available on community-based participatory research (CBPR) at the RCMARs. The hope is that this supplement will motivate others involved in CBPR to more fully engage in the conduct of science related to relationships that mutually benefit communities and researchers. (*Ethn Dis.* 2007;17[suppl 1]:S1-1–S1-2)

**Key Words:** Community Research, Aging, Minority

### INTRODUCTION

The National Institutes of Health (NIH) is committed to its mission of medical and behavioral scientific research in the pursuit of knowledge about the nature and behavior of living systems and the application of that knowledge to extend healthy life and reduce the burdens of illness and disability. Despite significant advances in medicine and the behavioral and social sciences, not all persons in our society are beneficiaries of those advances that result in improved health, increased longevity, and decreases in disability. Many impediments to these goals are attributable to social factors in American society. The consequences of race, ethnicity, socioeconomic status, and geography are mechanisms through which disparities in health and well-being manifest themselves. To overcome some of these roadblocks, especially for older persons, the National Institute on Aging (NIA), along with the National Center for Minority Health and Health Disparities (NCMHD), and the National Institute of Nursing Research (NINR) have directed and funded a committed group of researchers for nearly a decade, all of whom are organized into a program called Resource Centers for Minority Aging Research (RCMAR).

The RCMARs' approach to improving the health of older Americans is to: 1) increase, through intensive mentoring and funding of pilot research projects, the number of diverse scientists doing research on older populations; 2) mentor investigators in the conduct of research on older minority populations through the same pilot

funding mechanism; 3) develop methods and measures that can be used reliably and validly across diverse populations so that measurement variation is minimized in understanding health disparities; and 4) work with communities in which research is conducted to advance the state of science and, just as importantly, to benefit participating communities and their residents. The RCMARs are committed to the translation of research findings that, as the NIH mission suggests, improves health, increases longevity, and decreases disability. It is to this latter objective that this supplement is addressed.

The RCMARs are structured such that one of the four key components is a Community Liaison Core. This Core's objective is to conduct research on recruiting and retaining community members for behavioral, social, and medical research and to facilitate working relationships with host communities. A nascent scientific literature replaces a typically anecdotal or case study approach to the recruitment and retention of older diverse group members.<sup>1</sup>The area of community/research relationships in diverse communities needs a similar infusion of scientific research on the nature and process of initiating, maintaining, and fostering these relationships. Too often, researchers attempt access to diverse communities of older persons only to find the path to successful and productive relationships with communities, their leaders, and their members blocked. Like the recruitment and retention issue, too little science has been focused upon community-based participatory research (CBPR) in diverse communities of older

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persons even though CBPR as a research strategy has existed for some time. It is important to apply the same research rigor to the process of constructing and maintaining working relationships with diverse communities as it is to the recruitment and retention issue so that mutual benefit can be assured. Without this knowledge, community/research relationships will remain anecdotal and based upon trial-and-error methods that may benefit neither community nor science. Without this careful approach, there will be too little science to translate.

We know that conducting research within diverse communities takes extraordinary amounts of time and effort to gain the trust of both the community leadership and its membership. Yet, too often open and ready access to communities is simply "assumed" prior to a research project, producing significant delays in the conduct of research, significant "cost-overruns," and often questionable results. The American Indian/Alaska Native communities, in general, have structured a mechanism for handling CBPR and therefore community access. This mechanism is used as a model of community protection and involvement benefiting both the community and furthering the assurance of excellence in research. While time consuming, it does lead

to a respect for the traditions and integrity of the community, a sense of trust among participants, and an assurance that research results are valid in the minds of the participants. Portions of this model may be worth emulating.

To overcome the lack of scientific investigation in how to work with diverse communities of older persons so as to benefit both community and science, the Community Liaison Cores of the six RCMARs (see Acknowledgments) conducted a well-attended symposium prior to the Gerontological Society of America's annual meeting in 2004. The articles appearing in this supplement are the product of that symposium. As such, they represent some of the most current scientific knowledge available on this topic from both researchers at the RCMARs as well as from the perspective of key community members. It is hoped that this supplement will motivate others involved in community-based participatory research among diverse older populations to more fully engage in the conduct of science related to community/researcher relationships benefiting both groups. Without this type of commitment to CBPR, research will be conducted *within* the community rather than *with* the community. Further, without a commitment to the

development of the science behind CBPR, we are likely to be unsuccessful at advancing scientifically gained knowledge of diverse older communities that mutually benefits community and science. The RCMAR program remains committed to advancing the science of community-based participatory research.

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#### REFERENCE

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#### AUTHOR CONTRIBUTIONS

*Design concept of study:* Stahl, Hahn

*Manuscript draft:* Stahl, Hahn

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*Supervision:* Stahl