A Call for Papers

Community-based Participatory Research

In 2002, the *Journal of General Internal Medicine (JGIM)* will publish a Special Issue devoted to community-based participatory research (CBPR). This model of research emphasizes active involvement of community representatives and organizations in all stages and aspects of the research process as a means toward generating highly relevant findings in a manner that is ethical and beneficial to those involved. The Special Issue will highlight some of the outstanding work that is being done in this area and the role that it can play in improving the care and outcomes of populations at risk.

While participatory research has existed for some time in many fields, its role has been less accepted in clinical and health services research. Increasingly, however, researchers and policy makers are recognizing the value of meaningful involvement of patients, their relatives and neighbors, and local organizations.¹ The first-hand experiences and contextual understanding of community members complement the skills and knowledge of researchers and often enhance the relevance and usefulness of research findings.² Community members and patients often will be able to articulate priority areas, and identify which questions should be asked and how they should be answered. Their perspectives and insights into the social and cultural dynamics of a community can inform researchers' future work. In addition, community members often can make substantial contributions to study implementation, analysis and interpretation of results, and dissemination of findings such that involvement directly benefits participants and others. CBPR has been identified as a key strategy in efforts to reduce disparities, whether they are racial, ethnic, socioeconomic or geographic.³ Participation of community members can narrow the linguistic and cultural gaps that exist between many underserved groups and researchers.

Substantial community involvement also promises indirect benefits. These include the development of new skills, capacity, and empowerment for community members. It can result in a reduction in the distrust that many communities have developed for researchers because of prior studies resulting in direct harm such as Tuskegee, stigmatization associated with public reporting of unfav-

orable data, and use of findings for financial or professional profit without benefit to the subjects that were involved.⁴

This Special Issue on CBPR builds on efforts of the Society of General Internal Medicine, the Agency for Healthcare Research and Quality, and the W. K. Kellogg Foundation to help CBPR fulfill its potential as an important influence on health care policies and practices. We encourage authors to submit original research articles and brief reports as well as manuscripts that would fit the *Journal's* sections for Innovations in Education and Clinical Practice, Populations at Risk, and Health Policy. These submitted manuscripts will be considered for publication along with several commissioned papers focused on the unique role that CBPR plays in the spectrum of health services research. The commissioned papers will address some of the major challenges facing CBPR and steps that can be taken to alleviate them. These include how incentives to participate can be enhanced for both communities and academics, how additional capacity can be developed for both communities and academics, and how opportunities for funding this type of work can be expanded. The deadline for submission of papers is March 1, 2002. Please contact the JGIM office with any questions at (410) 955-9868 or jgim@jhmi.edu. —**KAYTURA FELIX AARON, MD**, Center for Primary Care Research, Agency for Healthcare Research and Quality, Rockville, Md, and **ERIC B. BASS, MD, MPH**, Editor.

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