

Tools for Community-Based Research Summary Report

In summer 2016, Universities Without Walls, the distance education and training arm of the Ontario HIV Treatment Network (OHTN), partnered with the University of Ontario Institute of Technology (UOIT) to pilot a certificate course in community-based research (CBR) methods.¹ This report, based on a pre & post evaluations from the course, analytics from the Learning Management System (LMS) and students' testimonials shows that the course continues to be an educational success.

Tools for Community-Based Research was an intensive, 7 week “blended learning”² course that ran from June 6th, 2016 to July 24th, 2016. A diverse group enrolled in the course, including graduate students, physicians, and a variety of community leaders from the HIV/AIDS and other health sectors. Fourteen students completed the mandatory assignments and received their certificates. 78% of the students reported that they are satisfied/very satisfied with the course offered, and 88% of them said they would recommend this course to a friend and/or colleague.

The curriculum was broken into 6 self-directed learning sessions, online discussions, assignments and 3 synchronous online sessions. The curriculum included how to foster and sustain research partnerships, ethics, frequently used data collection methods and how to turn knowledge to action. The examples used were from health related CBR with an emphasis on HIV related research. During the self-directed sessions, students were asked to complete 10 different learning modules.³

Measuring Learning

The learning objectives for this course were to help students (1) become aware of basic terms used in community-based research (CBR); (2) begin to apply CBR concepts to research contexts familiar to the learner; (3) increase the learner's readiness level to participate in a community based research (CBR) study; (4) Apply new knowledge and concepts by sketching a CBR research proposal.

To measure student learning, learners were asked to rate their levels of knowledge, skills, and experience pre and post training using a modified Kolb learning scale (ranging from “novice/advanced beginner” to “proficient/expert”).⁴

As a result of their participation in Tools for Community-Based Research, students (n = 8) experienced the greatest change in knowledge in the following areas:

¹ Additional information about the course's learning objectives and instructor bio can be found online at

<http://www.universitieswithoutwalls.ca/e-learning/certificate-program/>

² “Blended learning” integrates face-to-face and online learning. Online and classroom activities and course materials are selected to complement each other, to engage students and to achieve specified learning outcomes. <https://uw.aterloo.ca/centre-for-teaching-excellence/resources/blended-learning>

³ The self-directed learning modules used in this course can be accessed at www.universitieswithoutwalls.ca/?page_id=996

⁴ Kolb, D. (1984). *Experiential Learning as the Science of Learning and Development*. NJ: Prentice Hall.

<ul style="list-style-type: none"> • How to plan a research project <ul style="list-style-type: none"> ○ Pre= 38% novice/advanced beginner → Post= 12% novice/advanced beginner ○ Pre= 12% proficient/expert → Post = 75% proficient/expert
<ul style="list-style-type: none"> • The basics terms and concepts in CBR and HIV research <ul style="list-style-type: none"> ○ Pre= 38% novice/advanced beginner → Post= 12% novice/advanced beginner ○ Pre= 38% proficient/expert → Post = 88% proficient/expert
<ul style="list-style-type: none"> • Tools and approaches to support research knowledge translation and dissemination <ul style="list-style-type: none"> ○ Pre= 63% novice/advanced beginner → Post= 12% novice/advanced beginner ○ Pre= 25% proficient/expert → Post = 63% proficient/expert

In addition, here's how some of the students anonymously described their learning experience in our post-evaluation:

“As a health care provider I had knowledge about HIV and AIDS, however after my participation in this course my perspective about stigmatization and discrimination has changed [positively].”

“This course solidified my understanding of the importance of GIPA & MIPA in the HIV sector – not just as a principle but as a constant activity. Instead of nominal participation by community, transformative participation should continue to be the goal of all of our work – empowering those involved and building capacity within the community to allow for change to be realized at the system level.”

“This course caused me to reassess my understanding of what community engagement and collaboration truly mean in research and work. Analogies, personal stories and case studies were used to help apply the concepts taught to real world projects. It compelled me to reflect on my own research project and set goals for future ones. Additionally, I formed working relationships with classmates – their experiences as people living with HIV, researchers, health care providers, etc. shed light on how different community collaboration can look across various communities involved with HIV.”

Acknowledgements

Tools for CBR 2016 is funded by the OHTN, the Canadian Institutes of HIV Research (CIHR) and the Canadian Association for HIV Research (CAHR) and greatly supported by the University of Ontario Institute of Technology (UOIT).

Report prepared by Francisco Ibáñez-Carrasco PhD & Eugene Nam