

Stimulating Researcher/Practitioner Partnerships for Research Aimed at Modifying Dietary Behavior Related to Cancer Risk

INTRODUCTION

Expanding partnerships between researchers and practitioners in nutrition and behavioral research would provide for greater practitioner relevancy of research topics and may allow for a smoother transition of promising research findings into practice. To clarify what is known about the efficacy and effectiveness of behavioral interventions in promoting dietary change, the National Cancer Institute (NCI) and the Agency for Healthcare Research and Quality (AHRQ) conducted a systematic evidence review to synthesize the published research. Their report, *The Efficacy of Interventions to Modify Dietary Behavior Related to Cancer Risk*, is summarized at <http://www.ahrq.gov/clinic/dietsumm.htm>. The full report can be accessed by visiting <http://www.ahrq.gov/clinic/evrptfiles.htm> and scrolling to “Modifying Dietary Behavior Related to Cancer Risk.” Clicking on the link will open the zipped file.

BENEFITS

- Researchers will benefit from partnerships with the community by developing research projects that are relevant to—and more likely to be adopted by—the community.
- Practitioners will benefit by being able to:
 - (1) Implement evidence-based interventions within community budgets
 - (2) Justify practice based on evidence
 - (3) Use tested interventions in program grant funding proposals

CHALLENGES AND OPPORTUNITIES

- Considering all parties’ priorities when defining goals and objectives
- Using a strengths-based approach when facing community challenges
- Invoking ownership among key community-based organizations in the beginning stages of the process
- Utilizing established relationships to gain support from top leadership of partner organizations
- Maintaining the established infrastructure (e.g., funding) without losing sight of the needs and wants of the community
- Understanding and recognizing the different ways to identify efficacy of the community participation aspect of the project
- Ensuring that motives and commitment of researchers are compatible with those of the community and its partners
- Balancing research and application priorities at the community level
- Distributing benefits and resources equitably throughout community-based organizations
- Recognizing principles consistent with community-based participatory research in evaluation efforts
- Utilizing consensus decision-making methods throughout the process

STRATEGIES

Incorporate the following strategies when developing grants to fund research aimed at modifying dietary behavior related to cancer risk:

- (1) Build research/practice partnerships into the application process for research grants.
- (2) Develop research/practice committees at the state level.
- (3) Capitalize on NCI Special Populations Networks and the Centers for Disease Control and Prevention (CDC) Research Centers’ existing research and intervention delivery channels to inform state public health plans.



Models for Collaboration

Two models for developing successful research/practice partnerships are found in NCI's 5 A Day for Better Health program. They are the *North Carolina Black Churches United for Better Health* project and the *Minnesota 5 A Day Partnership*. Descriptions follow.

North Carolina Black Churches United for Better Health

WHO

- North Carolina Department of Health and Human Services
- University of North Carolina at Chapel Hill (UNC)
- Duke University Medical Center
- North Carolina Cooperative Extension Service of North Carolina State (NC State) University

In addition, 10 local health departments and cooperative extension agencies and 50 African American churches participated in this partnership over a four-year period.

WHAT

The North Carolina Black Churches United for Better Health project is an example of a successful community intervention related to dietary behavior change.

COLLABORATIVE EFFORTS

- The North Carolina State Health Department led the project, overseeing project administration, intervention, implementation, and monitoring of program activities.
- The Departments of Nutrition and Biostatistics of the UNC School of Public Health were primarily responsible for the project outcome and process evaluation, including the research design, surveys, data collection, and data analysis. UNC also developed and implemented individualized print communications that went to church members as one of the core project interventions.
- Duke University and NC State participated on the research team and took the lead on specific intervention components including cooking classes and master gardener training (NC State) and the development of grocer partnerships and a cookbook (Duke).
- Local agencies participated in training and worked with church members to implement project activities. The churches each had a coordinator and formed Nutrition Action Teams to plan and implement the project.

BENEFITS

The results of the randomized trial among 2,519 African American church members in 50 churches demonstrated an increase in fruit and vegetable consumption of 0.85 servings daily. Once the formal research project ended, the state health department continued to build capacity for dissemination and sustainability by developing a training manual for working with African American churches, conducting pilot trainings in several counties, and making project materials available to other researchers and practitioners. This intervention is being evaluated for nationwide dissemination by the American Cancer Society.

Models for Collaboration (Continued)

Minnesota 5 A Day School-Based Partnership

WHO

- Minnesota Department of Health
- University of Minnesota

WHAT

Team members received funding from NCI for two four-year 5 A Day research studies. The goal of each of the studies was to develop and test a school-based intervention to increase consumption of fruits and vegetables among elementary school children. In the first study's design, the intervention consisted of four components: classroom curricula, food service environmental changes, family involvement, and food industry support. The second study tested the effects of a school cafeteria-based environmental change program with links to family and the community.

COLLABORATIVE EFFORTS

- In each study, the grant was awarded to the Minnesota Department of Health with a large subcontract to the University of Minnesota. The principal investigators worked with the project director at the health department and the evaluation director at the university to plan and oversee the study. Participants from the two institutions collaborated on research design, evaluation design, intervention development, and data analysis planning.
- The researchers at the University of Minnesota were primarily involved in study planning, data entry, and analysis preparation, while those at the Minnesota Department of Health were primarily involved in study implementation and analysis. Ongoing promotion of tested programs is provided through the health department.
- Members of each institution, including the school district, met regularly on a steering committee and on several other study teams—specifically, an executive committee, intervention team, and evaluation team. Additional monthly meetings were conducted with school district staff.

BENEFITS

As a result of the collaborative work done in the first 5 A Day study, the health department has substantially increased its capacity to design and conduct nutrition-related behavioral research. Relationships formed through work on 5 A Day research studies have brought collaborators together to work in other areas, including other research studies, Minnesota's 5 A Day Coalition, and joint conferences and seminars.