

## Participatory Action Research 2022 Framework

### Purpose

To leverage the existing PAR principles and practices to distribute research-restricted funding to projects that are co-designed and co-led by community members and researchers to learn more about the root causes of pressing issues negatively impacting the health of communities.

### Overview

Prior to 2010, Vancouver Foundation funded traditional medical research through the BC Medical Research Foundation housed within Vancouver Foundation. This approach centred the decision-making and design power with researchers and positioned communities and individuals as research subjects.

Vancouver Foundation's volunteer advisors advocated to the Board of Directors to dissolve the BC Medical Research Foundation and to dedicate its restricted funding to promote and support participatory action research instead. This methodology is a collaborative approach that shifts and shares power amongst all stakeholders – including people whose lives are affected by the issue being studied – in all phases of the research process. The Board agreed and, since 2010, Vancouver Foundation has awarded research-restricted funding exclusively to projects that use a participatory action research methodology.

At the core of the PAR methodology is the belief that research must be done with people, and not for them or on them. The 'action' part of PAR refers to how evidence is gathered, and how issues are researched. The action becomes part of the subject matter being researched. Action happens throughout the project by the team to develop the research and inform its future direction. Action also means that research moves beyond just observing or studying an issue and focuses upon using the research findings to transform it.

### Principles

PAR has many definitions, but it tends to have these features in common:

- researchers and community members are active co-participants
- researchers and community members learn from each other
- the research team uses a process of critical reflection
- the research is action-oriented to influence systems change

Building upon past PAR cycles, we are applying the following principles:

- **Community-directed change:** We will prioritize funding to projects that articulate a clear health-related research question that came forward from community and demonstrate how the findings will position community to take action to influence change.
- **Flexible funding:** We will offer two different grant types to reflect the different stages of a participatory action research process (Convene and Investigate). Budgets must demonstrate how funding will enable and sustain community participation in the process.

- **Informed decision-making:** We will consult with project teams to understand their proposals as best we can and will rely upon the expertise of advisors to make funding recommendations. We will seek out community members from affected communities to act as advisors and will compensate them for the service they provide to us.
- **Equity, diversity, and inclusion:** We recognize some groups are underrepresented in health-related research, that require priority consideration. We will strive to reduce and/or simplify the application process to reduce structural barriers to applying for and being considered for funding, and we will continue to require that only one of the applicants be a Qualified Donee listed by the CRA.
- **Reconciliation:** We recognize the unique relationship we have with Indigenous people, that requires special consideration.
- **Transparency:** We are open, transparent, and communicative about our decision-making.

### **Guiding Framework**

If the number of applications we receive is greater than the funding we have available, then we will prioritize the following:

- Research projects that are co-led by communities who are disproportionately impacted by racism and other discriminatory behaviours and beliefs within health systems
- Research teams that include as many community members as professional researchers
- Research projects that bring an intersectional lens to the work

### **Community Informed**

In order to ensure that our recommendations are community-informed, we are drawing on three primary forms of intelligence:

- *Published Data* – in addition to asking specifically about what research and evidence is shaping their knowledge and understanding of the research question, we will also seek out information about the current state of health systems, such as through the independent investigations into the discrimination faced by Indigenous people and children with disabilities. <https://engage.gov.bc.ca/addressingracism/>
- *Existing Community-based Health Research Networks* – from our portfolio of grantees to our relationships with research-based universities and CBHR networks, Vancouver Foundation actively engages our community networks to share information and assess priorities.
- *Community Advisors* – Vancouver Foundation has a network of existing and alumni community advisors with a broad range of expertise. We will engage additional community reviewers from the populations that brought research projects forward to bring unique perspectives to the decision-making process.

### **Restricted Funds Influence Some Decisions**

The largest proportion of research-related funding is distributed through subfunds with specific charitable intentions, such as researching the social determinants of heart disease, cancer, arthritis, mental health, multiple sclerosis, Alzheimer's disease, or neurological, emotional or paediatric disorders. Vancouver Foundation strives to honour these intentions as much as

possible by making special consideration to project proposals that align with these charitable intentions.