

Building Community-Based Participatory Research Partnerships with a Somali Refugee Community

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Background: The U.S. has become home to growing numbers of immigrants and refugees from countries where the traditional practice of female genital cutting (FGC) is prevalent. These women under-utilize reproductive health care, and challenge healthcare providers in providing culturally appropriate care.

Purpose: This study examined Somali immigrant women's experiences with the U.S. healthcare system, exploring how attitudes, perceptions, and cultural values, such as FGC, influence their use of reproductive health care.

Methods: A mixed-method community-based participatory research (CBPR) collaboration with a Somali refugee community was conducted from 2005 to 2008 incorporating surveys, semi-structured focus groups, and individual interviews. Providers caring for this community were also interviewed to gain their perspectives and experiences.

Results: The process of establishing a partnership with a Somali community is described wherein the challenges, successes, and lessons learned in the process of conducting CBPR are examined. Challenges obtaining informed consent, language barriers, and reliance on FGC self-report were surmounted through mobilization of community social networks, trust-building, and the use of a video-elicitation device. The community partnership collaborated around shared goals of voicing unique healthcare concerns of the community to inform the development of interventional programs to improve culturally-competent care.

Conclusions: Community-based participatory research using mixed-methods is critical to facilitating trustbuilding and engaging community members as active participants in every phase of the research process, enabling the rigorous and ethical conduct of research with refugee communities. (Am J Prev Med 2009;37(6S1):S230–S236) © 2009 American Journal of Preventive Medicine