

Bridging Academia and Community Practice: Growing the Peel Institute of Research and Training

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The importance of evidence-based practice has been a major focus in social services since the 2000s. Evidence-based practice "is the conscientious, explicit, and judicious use of current best evidence in making decisions about the care of individual [clients]" (Sackett et al., 1997). As evidence-based practice gained momentum and acceptance, and evidence has grown, there has come an expectation, and often a requirement, that social service practitioners and organizations implement evidence-based programs and interventions to improve services and create better outcomes for clients (Brodowski et al., 2007).

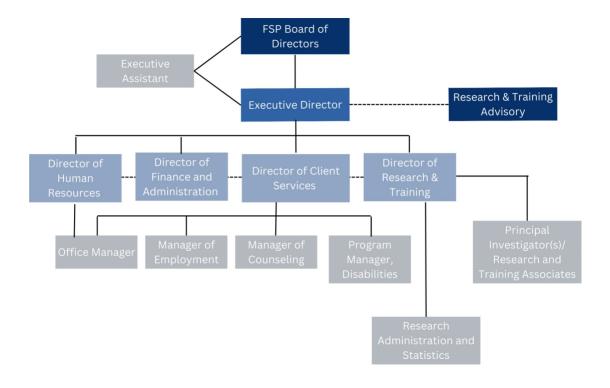
However, gaps exist in understanding how to transfer evidence-based programs and interventions into practice in community settings. For example, evidence-based programs and interventions are often tested in clinical settings with specific populations, where numerous interacting variables are controlled for in testing. These contexts often differ from that in which community social service organizations operate. In community settings, target population(s) often differ significantly from that which the intervention has been predominantly tested to become an evidence-based practice, and confounding variables interact in complex ways that are not often engaged with in clinical testing. Further, social service agencies do not always have the funds or research capacity to conduct ongoing and effective evaluations of program outcomes to determine if they are adequate, effective, and sustainable. Thus, there remains a gap between what we know theoretically and clinically to be effective and how to integrate that into practice in community settings with diverse populations.

The problematic gap between academic research and community practice remains in place, complicating effective service provision. Research evidence for programs and interventions continues to occur outside of the conversation and involvement of communities, especially marginalized and historically oppressed communities, who rely heavily on social

service organizations for various forms of support. Yet, building and maintaining effective practices requires relevant research and evidence to understand how to serve the community appropriately. Thus, there is a strong need to bridge gaps between research and community practice. Improving the integration of evidence-based practice into social services requires research with the community of focus to understand what the needs of the group are, how an existing program or intervention may be effectively adapted, or a new program created and implemented for the community. It would also support the evaluation of its effectiveness. Bringing research and evidence into community social service settings and breaking the historical divide between academia and community requires creative and innovative approaches to doing research and mobilizing knowledge. It requires doing research with rather than on communities to ensure programs, interventions, and practices are aligned with the needs, wants, and capacities of the community.

In this article, we explain the evolution of the Peel Institute of Research and Training (PIRT), a community-based research institute that operates as the research arm of Family Services of Peel (FSP), a non-profit social service organization in the Region of Peel. Situated in the Region of Peel since 2013, PIRT is an example of how a social service agency can integrate research and knowledge creation into its practices and work to bring together academic researchers, community organizations, and community members to bridge the long-standing gap between research and practice. We present some of the major challenges faced and solutions mobilized to support the growth of the Institute. This overview offers an experiential account of a unique and innovative research endeavour by a social service agency that can support other social service agencies in expanding their operations into the realm of research.

Figure 1: PIRT organizational chart



Historical Overview

The Institute serves as a central, region-wide, and community-based initiative focusing on supporting and enhancing the well-being of Peel residents. Grounded in an equity, anti-oppression, anti-racism framework, the Institute is a central point for data-driven, evidence-informed practice. Using a community-based participatory research (CBPR) approach, it aims to support the improvement of community services by combining the perspectives of the diverse population served, academia, and community service providers.

The Institute was founded in 2013, following the open forum discussion, *Café*Scientifique: An Open Discussion of the Experiences of Immigrant and Racialized Women

Survivors of Sexual Assault in Accessing Primary Health Care Services. This event hosted by the Peel Committee on Sexual Assault (PSCA) brought together women survivors of violence,

service providers from social and health sectors, and academics to discuss healthcare and social service access for women survivors of assault. Discussions highlighted several barriers to accessing care and the need for collaboration between academics, service providers, and survivors to identify issues and mobilize action for addressing concerns related to care and support for survivors of violence. A formal proposal was subsequently submitted to establish the Peel Institute on Violence Prevention (PIVP; now PIRT). At the time of the proposal, the PCSA was named as the group that would collectively run the Institute, and Family Services of Peel (FSP), as an established non-profit would be responsible for the administration of the funding.

Unfortunately, just as the proposal was accepted, the PCSA was dismantled. This significantly altered the plan for how the Institute would be structured for operation. FSP became the social service agency through which the Institute would be run. However, prior committee members were reluctant to sign-off on the change, struggling to accept FSP as holding sole responsibility for the Institute. Competition for the proposal funding and area of intellectual and advocacy focus (violence against women) arose in waves. It took several months of continuous outreach and advocacy on how the Institute could benefit the community in an innovative manner before the final go-ahead was given.

Despite being accepted to move forward, initial partners no longer wanted to engage in the project and dropped out, stating various financial and time barriers. What was supposed to be a diverse collaborative Institute in the Region of Peel, was now in the hands of FSP alone. Fortunately, the small team formed to guide the project, the Executive Director of FSP and Director of Counseling Services at the time, as well as the now Director of the Institute, were highly dedicated to the project and integrating a research Institute within FSP to support service

programs and interventions related to violence. During the 43rd Annual General Meeting of FSP in 2014, the Institute was officially launched.

Initially, the Institute's focus was specifically on the area of violence, focusing on the following at-risk groups: youth, seniors, women, Indigenous peoples, people with disabilities, and male victims of violence. As of 2022, the Institute expanded its focus beyond violence to enhance its ability to support the diverse and variable needs of groups across the Region. The PIVP accordingly changed its name to the Peel Institute of Research and Training (PIRT) to better reflect the scope of research being conducted. Although the Institute continues to be committed to working on violence prevention, new projects regarding social services, immigration, mental health care, and more in the wake of the COVID-19 pandemic and changing societal landscape, have become critical in the work of the Institute.

Over the past decade, the Institute has faced numerous challenges related to financial support, staff retention, and acceptance into the social service community. Despite these numerous and often complex challenges, the Institute has continued to flourish, creating partnerships within FSP, with the broader community, and with academic institutions; publishing in international journals and books; and growing its research focus to meet the changing needs of the community it serves. Within the past two years, the Institute has seen immense success, collaborating with academic and community partners, seeing a high proposal acceptance rate, bringing on several part-time staff on project contracts, and increasing their presence in the community. Fundamental to reaching this point has been the Institute's framework, the community-based participatory research approach, the infrastructure and organizational support of FSP and academic institutions, and its approach to knowledge mobilization.

The Framework: Challenging the Normative Research Framework

The Institute operates from an equity, anti-oppression, and anti-racism framework. This framework was developed by the Director of the Institute prior to the creation of the Institute and upon her joining the Institute in 2013, where she integrated the framework into the operating structure. This framework has been noted as one of the major factors related to the success of the Institute. This framework is built upon the concept of equity, the theory of intersectionality (Crenshaw, 1989), the Indigenous Wheel of Health, and the Social Determinants of Health (SDH; Reading & Wien, 2009).

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Figure 2: FSP-PIRT Equity, Anti-Oppression, and Anti-Racism Framework

Riutort, M., Peel Institute on Violence Prevention (2015)

Equity	Equity refers to the fair and just treatment of all individuals, regardless of their social positioning and inequalities faced. Equity in well-being is the "absence of systematic differences" across well-being (or health or mental health, etc.) status across groups or population (Starfield, 2001, p. 546). In services, equity implies that no differences exist in the provision of health services when needs are equal (horizontal equity) or that where greater health needs exist, enhanced services are provided (vertical equity; Starfield., 2001).
Intersectionality	Intersectionality involves understanding how social categories related to identity, experience, and social positioning, such as race, gender, sexual

	orientation, age, immigration status, etc., are mutually shaped and intimately entangled with broader social, political, historical, and global forces (Hobbs & Rice, 2011, 2018).
Indigenous Wheel of Health	The Indigenous Wheel of Health recognizes that health and well-being are about more than just the physical. From this perspective, health and well-being involve physical health, mental health, emotional health, and spiritual health.
Social Determinants of Health	The social determinants of health (SDH) are "the conditions in which people are born, grow, live, work, and age. These circumstances are shaped by the distribution of power, money, and resources at global, national, and local levels" (World Health Organization, 2021). The social determinants of health and well-being can be classified as distal, immediate, and proximal. Proximal determinants: the factors most immediate to an individual, including environmental, behavioural, and demographic factors.
	Intermediate determinants: include community infrastructures, systems, resources, and capacities.
	Distal determinants: include historic, social, political, and economic factors.

The Region of Peel is home to a diverse population, where many of the residents live at multiple intersections of oppression and identity which deeply influence their experiences and needs for social services. However, evidence-based practices and interventions used in social services have been predominantly developed for the heteronormative White Canadian, and do not always account for the diversity of experiences across groups. As such, the Institute implemented its framework to break down dominant models and broaden the creation of frameworks, interventions, programs, and training to account for the vast diversity and complexity across individuals and families in Peel. The Institute's framework and commitment to social justice have encouraged them to become a leader in social service research in the Region and to focus attention on areas where there remains a paucity of research and appropriate services for clients.

Community-Based Participatory Research

Critical to the work of the Institute is its community-based participatory research (CBPR) approach. CBPR enables collaborative and active engagement between community members, stakeholders, service providers, and academic researchers to contribute their experience, knowledge, and skills in the research process (Collins et al., 2018). Existing studies have demonstrated that a CBPR approach is crucial to adopt when undertaking research projects aimed at addressing health and well-being inequities among historically marginalized groups (Collins et al., 2018; Fleming et al., 2023). CBPR takes an ecological perspective that recognizes that health and well-being are deeply influenced by individual, familial, community, and systemic factors (Collins et al., 2018). Since the Institute is embedded in a social service agency that provides services related to health and well-being to the marginalized, it is critical that the Institute takes a CBPR approach.

The Institute's community-based approach is what sets it apart from the dominant approach to research. Historically, research has been conducted strictly in academic settings, where the community is only used as a source for knowledge extraction. Community members and stakeholders would not be engaged in the entirety of the research process and oftentimes, research analyses and outcomes would not make their way back to the community. Unlike dominant historical academic approaches to doing research *on* rather than *with* communities, the Institute draws on the intersectional feminist tradition of engaging deeply with the community throughout the research process.

In various ways, community members and relevant stakeholders are brought on as partners in research to support proposal development, theoretical and methodological foundations, data collection methods, and outcomes of research analyses and dissemination. For

example, many projects have been guided by advisory committees formed by service providers and/or community members. These members offer feedback on findings, data collection instruments, analysis, and final outcomes to ensure they are appropriate and align with the voices of the community of focus. Ultimately, the Institute is driven to bridge the long-standing divide between academia and community, and theory and praxis to facilitate the conduction of research that aligns directly with the needs and wants of the community it serves.

While crucial to bridging the divide between academia and community, there are several challenges related to CBPR that the Institute has faced. CBPR requires developing trust and building relationships with community members. This can often be a time-consuming process. The Institute must invest time and effort in establishing rapport with communities, understanding the community's needs and priorities, and demonstrating a genuine commitment to the community's well-being. This is challenging in an environment of competitive funding, strict project timelines, and staff retention based on funding levels. To support building trust-based relations and building a rapport within time restrictions, the Institute often works with established and well-known community leaders where relations with FSP and PIRT management have been previously formed.

Organizational Support

Embedded within FSP, the Institute is organizationally supported by the agency. Upon its inception, the Institute was attached to FSP, but not governed by FSP's board of directors, and accordingly not included within FSP's strategic plan. At this time, the Institute was supported by several committees that were established within 2014 and 2015. These included an Executive Committee, Governance Committee, Scientific Advisory Committee, Seamless Committee, and the Community Partnership Committee. However, within a few years of the inception of the six

committees, the decision was made to disband all except the Governance Committee, which continues to exist today.

The Governance Committee is formed by a combination of leaders from academia, service providers, and community organizations from the public and private sectors. They provide advice, guidance, and support for research on scientific and clinical matters related to the area of focus and training development. While the Institute is supported by the Governance Committee, it remains overseen by the Institute Director, who reports to the Executive Director of FSP. Since the proposal stages, the Executive Directors of FSP have offered great levels of support for the development, implementation, and growth of the Institute. While the Executive Director and Governance Committees have always supported the Institute, pushing it in new and innovative directions with the goal of supporting the community, bridging the divide between community practice and academic research among internal FSP service providers and external community organizations has, at times, been a challenging feat.

Longstanding divides between community and academia have created mistrust and misunderstanding between those in community and those in academia. Many FSP and community service providers, at times, struggle to understand how research may actually explicitly benefit them and the community, beyond advancing academic theorizing and frameworks. Both internal and external community service providers have at times struggled to recognize the use of the Institute to strengthen their own knowledge, programs, services, and larger organizational policies. This has made it challenging for the Institute to integrate seamlessly into the community and build its reputation as an influencer for policies, programs, and services both internally in FSP and externally, within the broader community.

As a result, the Institute has had to operate in creative and innovative ways to find space within the community where they can effectively engage in research. While these endeavours stemmed from lack of active and open trust from internal and external providers, it has enabled PIRT to advance work in various under-researched areas, such as value transmission in mother and daughter relationships and human sex trafficking. However, when barriers exist to creating close and trust-based relationships within FSP and the broader community, it is challenging to move some projects from the theoretical and conceptual research realm into the implementation stage of research. This is again due to the struggle to fully integrate into the community as a core source of support, influence, and benefit. Instead, there continues to be a divide that the Institute continues to strive to bridge.

Why this divide continues is not always apparent, but is likely to be connected to historical influences of research extracting from communities rather than engaging deeply with them in a co-creative, collaborative, and relational way. It is a systemic issue, not an individual issue, influenced by the historical process of doing research and is also related to and complicated by a competitive capitalist and neoliberal environment that creates competition for funding, resources, and influence.

It takes time to break long-standing divides and silos, however, with willingness to learn, engage, and build together from both FSP and external communities and the Institute, strong partnerships can be formed and programs and services can be transformed in ways that can effectively meet the needs of communities. This is evidenced in the various community partnerships the Institute has formed over the years and collaborated with in various projects. Strong community relationships have been built with Catholic CrossCultural Community Services, Elizabeth Fry Society, Polycultural Immigrant and Community Services, and more.

These partnerships have been integral for the Institute to build its reputation within the community.

Financial and Infrastructure Support

The financial support and infrastructure of the Institute remain precarious. It has been an area of continued challenge to obtain financial resources in a sustainable format to support the Institute's growth. The Institute launched in 2014 with a grant of \$224,000. Since then, it has continued to operate based on funding from research and project grants. There is no core funding structure for the Institute, which has resulted in moments of precarity and strain for resources. Despite continued funding strains, and relying strictly on project grants, the Institute has grown significantly. To obtain funds, the Institute submits numerous proposals annually, in collaboration with various programs and services within and outside of FSP, as well as, at times, with university partners. These proposals take variable forms, with some aiming at research and development, and others on program implementation and evaluation. Since 2014, the number of proposals submitted and accepted annually has significantly grown. Yearly, the institute submits around 15-30 proposals and several are successfully secured.

The lack of core funding presents the Institute with many challenges to conducting research and long-term sustainability. Without core and consistent funding, the Institute struggles to attract and retain skilled staff. As a result, we rely heavily on placement students from various undergraduate and graduate programs at local colleges and universities and part-time staff hired on short-term contracts. Placement students offer unpaid labour and support for projects in return for course credit. While these placements are beneficial opportunities for students and the Institute, they remain short-term. Similarly, paid staff is hired on a part-time contract, project-to-project basis. This leads to high staff turnover, loss of skilled staff overtime, minimal ongoing

support, increases time spent recruiting and training, and increases the workload of the Director, who remains the only long-term staff for the Institute.

On a long-term basis, it is not sustainable to have one core staff that oversees all proposals and projects, especially as the Institute continues to grow. With a single core staff member, it is difficult for the Institute to plan for the long term, develop strategic initiatives, or build partnerships with stakeholders in the community due to the constant need to prioritize securing funding. This creates an environment of uncertainty and raises issues for the sustainability of the Institute. The hope is that in the next several years, the Institute can develop a small, yet permanent set of staff that can support the ongoing development of the Institute.

Skills and Confidence Building

The Institute is staffed with research assistants, placement students, and volunteers. There are continuous opportunities for knowledge building and skill training for these staff. Every new staff member undergoes diversity and equity training to learn about the framework the Institute operates under and approach all projects from a diverse and equitable lens. This training explores determinants of health, including, distal and proximal factors. It also teaches trainees about the roots of racism and colonialism concerning modern-day society, while exploring the patriarchy and differences of gender. To further develop an understanding of gender issues, research staff are required to complete a Gender-Based Violence and Analysis course. This course prepares staff for research with diverse groups by teaching how to recognize identity and social factors that affect different people, and how to enhance the effectiveness of research projects with this in mind.

Along with this course, the TCPS 2: CORE research ethics course is a mandatory learning initiative to familiarize staff with the ethical considerations needed for conducting high-

quality research. Staff take these courses in their own time and complete them for a certificate. Each course provides transferable skills which aid in the preparation of all research-related activities in the Institute. In addition to these courses, training will be held as needed when staff require knowledge in a particular skill or field. For example, before conducting focus groups, which is one of the Institute's practices for qualitative research, staff were given formal training on how to effectively host a focus group. All training is accompanied by practice, with staff participating in activities to evaluate their knowledge.

Appropriate Knowledge Transfer

Knowledge mobilization is critical at PIRT. PIRT takes what the Canadian Institutes of Health Research (2012) refers to as an integrated knowledge translation (iKT) approach. IKT is an approach to doing research that engages the principles of knowledge translation throughout the entire research process. Central to iKT is involving the community and partners equally alongside researchers from start to end to ensure that the knowledge developed is useful to knowledge users. As a community-based institute, such an approach to knowledge mobilization is crucial. The Institute actively organizes, creates, captures, and shares its research and data through various means such as community, national, and international training, symposiums, conferences, newsletters, seminars, and publications. Through knowledge transfer, the Institute enables empowerment and facilitates transformative change.

Since 2016, the Institute has published 18 newsletters on various topics relevant to our work. The newsletters provide an overview of past and current work, announcements of seminars, and major issues impacting various communities. Given our continued commitment to addressing violence against women and marginalized groups, newsletters continue to be disseminated annually on two days dedicated internationally to the rights and livelihoods of

women: International Women's Day (March 8th), and the International Day for the Elimination of Violence Against Women (November 25th). These newsletters have been vital to sharing our work with internal employees at FSP, local stakeholders in Peel, national organizations, and with international organizations that share a goal to eliminate violence against women and enhance the livelihoods of women and other historically oppressed groups.

The Institute has organized several project-specific seminars since its inception. Various community organizations, FSP employees, community members, and other stakeholders are invited to these events to learn about the project of focus and how it can support them in the future. These seminars are also a critical part of our CBPR approach, as a key focus is gathering feedback from the audience on our work and ensuring outcomes align with the needs and capacities of the community.

Since 2014, the Institute has hosted two major conferences. The first, the *Global Symposium on Violence Prevention*, was held in June 2016 at the University of Toronto Mississauga. This conference was a landmark success of the Institute, bringing together leaders from the field of violence prevention to share projects and continue to advocate for change. In 2019, the Institute supported the *Global Conference on Human Trafficking and Trauma*. This conference invited a range of researchers and community stakeholders to share ideas and thoughts. A site of critical and respectful exchange, this was another major milestone for the Institute, which marked us as a leading organization tackling human trafficking in the Region of Peel.

The Institute has also made strong efforts to engage in academic and sector conferences both in Canada and internationally. In 2016, the Institute presented at two conferences in Spain and Brazil, followed by another two international conferences in 2018 in Spain and Brazil. In

2018, the Institute also presented to the Standing Committee on Justice and Human Rights. In 2023, we attended the Metropolis conference that brought together stakeholders and researchers in the immigration sector. These conferences have been a key site for building the reputation of the Institute as a leader in community-based research. While often challenging to engage and receive acceptance to present due to being embedded in the community rather than a university or hospital, they have been vital to disseminating our work locally and internationally.

Conclusion

In sharing our experiences, challenges faced, and lessons learned, we hope to encourage other social service agencies and researchers to engage collaboratively and embed research into their community agencies. The development of community-based research arms within social service agencies will play a critical role in advancing evidence-informed interventions and programs that align with the specific needs and wants of the local community served. By working closely with the community and providers using and offering support, we can ensure that programs are deeply effective and appropriate for those engaged. While advancing evidence-informed practice in the community, we can continue to break down barriers between academic research and community practice, ultimately creating a system that strives to actively meet the needs of communities with their continued involvement in knowledge and intervention generation. Together, we can advance the capacity for rigorous, community-based, and relevant evidence-based practice within social services.

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