Is Community-based Work Compatible with Data Collection?

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Although community-based projects have introduced a successful model for addressing many social problems, less consideration has been given to how such projects should be evaluated. This paper considers whether the philosophy underlying community-based practice is compatible with data collection. Specifically at issue is whether empirical indicators are helpful to summarize a project. Although having valid knowledge is important, this paper makes a distinction between merely collecting data versus understanding the course of a project. The key point is that community participation requires a unique perspective on how knowledge is negotiated and interpreted.

Key words: community-based philosophy, community health, social theory

There are many types of community-based work. Sometimes the focus is building a facility, such as a health center, while others involve training and capacity building. The centerpiece of each of these modalities, however, is community participation (Minkler & Wallerstein, 2008). Local knowledge, in short, is expected to guide each of these endeavors. Popular epidemiology provides a current example of this approach (Brown,
In this case, community members provide insight into the effects of pollution or other maladies that may easily escape the assessments of professional epidemiologists.

Most of these projects usually entail some sort of data collection. For example, they are often initiated with a needs assessment or diagnostic, while their evaluation requires the systematic generation of data (Rossi & Freeman, 1993). Many have argued the development of Community-based Participatory Research (CBPR) can potentially lead to policy change as a result of linking projects with successful evaluation (Freudenberg & Tsui, 2013). Furthermore, grantors of project funds often require researchers to demonstrate proof of need and effectiveness, and thus demand evidence that is accessible and objective. Due to pressure from the academic community, project success is thought to hinge on the ability to produce persuasive and publishable data. In such cases, anecdotal claims are not usually deemed acceptable for these purposes.

The issue at this juncture is whether data collection is compatible with a community-based orientation, even though the language of data collection pervades most community projects. Their validity, in fact, is linked regularly to the data collection that occurs. Of course, reliable knowledge is desired. Whether data collection is appropriate for adequate documentation, however, is an altogether different issue.

The point of this reflection is to examine whether data collection constitutes a mode of gathering evidence that violates the spirit of community-based work. Does data collection entail a syndrome of practices that removes the garnering and analysis of facts from the control of a community? If so, then this way of thinking about the generation and use of knowledge is inappropriate (Murphy, 2014). The basic concern is whether usable knowledge should be viewed as a product of a data collection process.

At the root of this incompatibility is the contention that community-based projects, as Kleinman (2008) suggests, are shaped by a moral experience. Those who work within this framework are motivated by care and want to improve the lives of disadvantaged persons. Essential to this activity is the formation of an alliance between community-based workers and local persons which is predicated on solidarity. Data
collection in many ways, however, negates the kindness, sensitivity, and interest that are vital to this dialogue. Simply put, data collection is aloof and is an adjunct to a truly community-based intervention.

Community-based Philosophy

The key element of community-based work is participation (Leung, Yen, & Minkler, 2004). Specifically, community members are supposed to be involved intimately in every phase of a project. Many critics even argue that a community should control these endeavors entirely. The argument is that community-based work is built from the ground-up, rather than imposed by outsiders (Minkler, 2005). Sometimes these programs are referred to as grassroots efforts.

This participation is thought to result in better research or service delivery. Because community members possess local knowledge and are instrumental in the development of these projects, any products are presumed to be valid and sustainable (McTaggert, 1991). These persons will be committed, for example, to any findings or programs that are created and implemented.

In this regard, participation is not simply a fad but has real, pragmatic appeal. If persons are committed to programs and support these projects in the long-term, money is saved and more services can be offered. The problem, however, is that participation is regularly viewed primarily in logistical terms (Mendez, 2010). The question asked most often is: what factors impede participation? The reality is that participation does affect how well research is received or how a clinic operates. These practical aspects, therefore, should not be overlooked.

However, there is a more profound side to participation. An epistemological shift is announced by this focus on participation that is important, especially in community-based work (Murphy, 2014). That is, the usual dualism that encourages the distinction between subjectivity and objectivity is no longer acceptable. How knowledge is approached is thus changed significantly.

Traditionally, valid knowledge is divorced from subjectivity, that is, values, beliefs, and commitments. This distinction allows science to be differentiated from ideology. With
subjectivity moved to the periphery of research or social planning, emphasis can be placed on sound evidence. As Emile Durkheim (1955/1983) proclaimed, facts can be treated as if they are "things" and can be clearly enumerated. In this way, projects are thought to have a firm foundation.

But in community-based work, this dualism is deemed to be passé. Due to the pervasiveness of participation, interpretations and perspectives are never overcome. In everyday practice, these so-called subjective considerations are a vital part of community-based work. After all, local definitions provide access to how a community understands, for example, health or deviance. Rather than an obstacle to achieving objectivity, and something to be eliminated, valid knowledge is tied to how behavior or events are interpreted and organized. Personal and collective experiences, along with an intimate grasp of community life, are crucial to the success of projects rooted in community-based philosophy.

Community-based practitioners are not alone in their rejection of dualism. In some philosophical circles, dualism has been overcome. The postmodern emphasis on language games, and the phenomenological focus on the lebenswelt, or "life-world," are examples of this trend (Murphy, 2012). The problem, however, is that communities are still identified mostly by social indicators—empirical referents related to boundaries and membership. Additionally, "evidence-based" practice, a euphemism for positivism, has become the watchword for many contemporary practitioners (Brownson, 2011; Reid, 1994).

Some community workers have chosen another route. In a recent publication, the leaders of Partners in Health have introduced the work of Berger and Luckmann, particularly their emphasis on social construction, to justify the community-based orientation extolled by this health organization (Farmer, Kim, Kleinman, & Basilico, 2013). In this regard, Arthur Kleinman (1997) has stressed the importance of local worlds to characterize communities and focus attention on how persons define health and cure. Those who advocate the use of narrative medicine, furthermore, believe that local knowledge holds the key to creating relevant and effective interventions (Charon, 2006).

Community-based practitioners, similarly, covet this so-called experiential dimension. Their belief is that the insights
found in this realm validate research and ensure the proper de-
velopment of social programs (Minkler, Blackwell, Thompson,
& Tamir, 2003). Participation, therefore, is not merely a prag-
matic matter. The pool of definitions and values held by a
community can offer an important glimpse into how research
should be conducted and service programs implemented.

A community-based strategy, however, is not necessarily
synonymous with a qualitative orientation. Using a qualita-
tive methodology, for example, does not require that local
persons control a project, construct the instruments that are
implemented, or formulate policy recommendations. A qual-
itative strategy, in the absence of this intimate community in-
volve,ment, may not facilitate the generation of accurate or rel-
evant information. In fact, collecting qualitative data may not
deve  

Collection of Data?

Why is data collection so problematic? After all, similar to
all research or planning strategies, a community-based format
relies on sound evidence. Furthermore, well-documented
projects can be shared with the academic community and spur
future undertakings. Nonetheless, there is something detri-
mental about the confluence of practices that constitute data
collection. Indeed, the result of this process may undermine
community-based work.

When conceived as data collection, for example, this process
constitutes usually one phase of a project. In this regard, most
projects begin with a needs assessment. Once these data are
amassed, project design is usually initiated. The needs assess-
ment, although it informs an entire project, represents a single
stage. The aim is not to build a portfolio of information, but to
establish a baseline.

As a result, data collection has a short duration. Samples
are taken and persons contacted until enough data are gath-
ered, even in many qualitative studies. This process, in other
words, is basically an in-and-out strategy. Time is devoted to
this aspect, and then the focus shifts to other activities. Due to
this change in attention, data are analyzed and used, instead of being integrated further into a community. The generation of information is thus truncated, since additional interpretation, revision, or reflection by community members is curtailed.

Furthermore, often this data collection is undertaken by outside experts. In many projects, a special person is hired to write and implement the evaluation plan or some other facet of the plan. When this practice is followed, a project begins to drift away from the control of a community. In some instances, the data may be literally carried away for analysis and interpretation.

In community-based projects, community members are supposed to generate and own any information collected (Wallerstein & Duran, 2010). In effect, they control the interpretation and use of the data. However, when data are removed for analysis, this intimacy is lost. What occurs, accordingly, is that data are transformed into commodities and processed. The relevance of this knowledge to a community thus becomes dubious, once the socially embedded character of facts is compromised.

The use of computer programs in qualitative research, such as Nvivo or Atlas, may facilitate this drift. Although safeguards are in place to prevent the automatic objectification of information, this process is hard to avoid. The conceptual world-view that subtends computerization, referred to by Papert (1980) as a "micro-world," can easily begin to shape data according to technical criteria. Additionally, community members would have to be trained in this technology, so that they could control data use. Such an undertaking is not impossible, but it is not part of the agenda of most qualitative researchers.

This de-contextualization may be taken even further. Professional standards, for example, are invoked typically to direct data collection. Standard protocols are thus followed to select samples or conduct interviews, and the ethical safeguards imposed by many IRB committees distort community-based work. Without a doubt, when community members are researchers, the traditional confidentiality criteria become confounded; confidentiality becomes a process that is collectively negotiated. In general, these professional standards often disrupt the implementation and impetus of this philosophy.
Where data reside, and how they should be obtained, are issues that should be resolved by a community. After all, the sampling frame is their life-space, and entry depends on familiarity with a neighborhood. How boundaries are defined locally, along with crucial opportunities, is essential for determining a proper sample.

Ethical principles, accordingly, do not exist in a vacuum. What persons believe to be a breach in confidentiality is not necessarily uniform across communities. Behavioral codes depend, for example, on friendships and other measures of solidarity. The typical researcher–subject relationship, which delimits secrecy, is very formalized and is not usually applicable to communities. However, when researchers are simultaneously neighbors, intimacy may be permitted that violates the usual researcher–subject bond. However, this influence of solidarity is not acknowledged in standard ethical codes related to research.

Reliance on professional standards brings up another, equally problematic, issue. Specifically, the quality of data and their utility are determined by a professional audience. The rigor of a research design and analysis, for example, are part of the culture of science and are foreign to many communities (Pickering, 1995). The scientific validation of data, nonetheless, depends on whether these criteria are met.

However, the significance of data is not necessarily a scientific question. Certain findings may seem logical, and even be statistically significant, but are locally irrational and thus irrelevant. The quality of data in community-based work is more of an existential issue. In other words, do data conform to the experiences of communities, or are they judged by certain methodological rules? In community-based work, experience trumps everything else (Krieger, 2001).

In sum, the problem is that data collection, even qualitative data collection, can easily become a virtual process. Community-based work, on the other hand, occurs in a context that is established by participation. Accordingly, the acquisition of knowledge should adhere to the cultural guidelines adopted by a community and directly involve these persons. So, why is this activity not considered data collection? Stated simply, data are too impersonal.
Esoteric Knowledge?

The thrust of garnering knowledge in community-based work is to build a record rather than to set a typical empirical baseline. As an outcome of an on-going activity, information is generated continuously, modified by any additions, and available for local (re)interpretation. The idea is to create a situation where reflection is encouraged, so that initial findings can be expanded and better understood.

What is important to note is that this local knowledge does not simply emerge and cannot be collected (Gergen, 2009). Both of these metaphors misrepresent how knowledge is produced in community-based projects. In short, information is not lying about waiting to be harvested by persons who have the proper tools. This knowledge, instead, is constructed through participation and must be coaxed into the open. The problem with this orientation, from the traditional viewpoint, is that the basic principles of research seem to be violated. Specifically, knowledge cannot qualify as empirical, due to the ubiquity of often conflicting values and perspectives.

This new role for community members has many advantages. Due to their involvement in every phase of social planning, information remains enmeshed in a community. The result is that both the validity and use of any findings are improved. Local knowledge, as Fals Borda (1988) maintains, reflects how persons identify and evaluate issues such as clinical treatment and other interventions. On the other hand, this knowledge can be viewed as esoteric, with little generalizability. After all, contrary to empirical indicators, interpretations are not considered to be objective and, thus, easily detectable and universally applicable. Local participation, in other words, muddies the waters and may hopelessly compromise research or service projects.

In this regard, health officials are often concerned that this local information is not empirical. Although community-based work is empirical, this term is used differently in this context than is intended by empiricists (Doyal & Harris, 2013). Empiricists are interested in the objective characteristics of events or behavior, whereas community-based practitioners focus on how these activities are defined and classified. While
traditionally empiricists eschew subjectivity—by emphasizing quantifiable data—community-based practitioners stress how health, illness, and other phenomena are interpreted (Meyers, 2006).

Empirical, in terms of this broader definition, is not necessarily synonymous with quantification. Because interpretations are assumed to be real, influential, and capable of being shared, and are not purely subjective and esoteric, this information can be studied in a systematic manner in a variety of ways. The point of any technique that is adopted is to enter the world that is constructed by community members. Even a questionnaire, usually treated as a quantitative practice, could be designed and implemented to communicate with a community and facilitate entry into this domain.

In the absence of an objective base, are community-based investigations or projects condemned to limited relevance and appeal? In a health project that is under development in a Hispanic neighborhood in Los Angeles, this issue was constantly raised with researchers. Health officials regularly voiced their fears that any outcomes could not be applied beyond the community in question, and thus their investment of funds was questionable.

In order to address this issue, the researchers had to point out first that generalizability is not necessarily a methodological issue but an existential question (Henry, Zaner, & Dittus, 2007). Findings, for example, have limited relevance, based on the adherence to certain values and commitments. Additionally, we had to illustrate that interpretations are not automatically esoteric and can be corroborated by others. In other words, a process is available whereby different communities can share and make judgments about the relevance of information, without the help of standard empirical referents.

Neither persons nor communities exist in an atomistic way; these individuals and groups share an experiential space and are open to one another. Phenomenologists, for example, refer to this connectedness as inter-subjectivity (Schutz, 1962). Interpretations, accordingly, are available for collective review. As part of this process, identical empirical indicators can be understood to have very different interpretations. This recognition, furthermore, allows persons to realize the importance of
interpretations, while encouraging the acknowledgement and incorporation of different viewpoints into a planning strategy. Persons can undertake this sort of reflection due to the active nature of the mind (Reynolds & Herman Kinney, 2003). As part of participation, and the associated interpretation, everyone is capable of self-interrogation. Accordingly, they can recognize the limited validity of any particular interpretation, thereby allowing other renditions to be encountered. Through the give and take that pervades participation, mutual understanding can be achieved, if not the acceptance of a particular viewpoint. This recognition of difference—a base for commonality and generalizability—is achieved without recourse to a standard empirical referent. Local knowledge, in this regard, can be evaluated by other communities and adopted, if deemed to be relevant.

Community Mapping: An Example

In social planning, community mapping has become very important. This process is defined usually as a process whereby members identify the knowledge bases, institutions, social relationships, resources or assets, and needs and goals of their community (Corbett & Lydon, 2014). The product is different from most needs assessments, in that the outcome is more holistic. The point of a mapping project is to provide an integrated portrayal of a community, rather than garner an array of often disparate data.

Although mapping has been used in the context of community-based work, geographic information system (GIS) output guides most of these projects (Fornace, Drakeley, William, Espino, & Cox, 2014). Some critics have rebelled against this trend and proposed a less abstract process. New developments, such as "critical community mapping," are now available (Parker, 2006). Nonetheless, although community input is sought, these alternatives rely heavily on empirical indicators to identify resources and demarcate boundaries. In the end, a community is still treated as a material entity that is associated with objective features. Location, for example, is geographical, while space is calculated in physical instead of experiential terms.
When viewed in this manner, a community is disembodied (Krieger, 2005). True community mapping, on the other hand, provides community members with a unique status in the process. The point of this activity is to enable community members to control the mapping process. Their input does not merely supplement empirical data but serves to identify resources and other facets of a community. How members experience their communities is thus elevated in importance.

At the root of community-based mapping is the assumption that communities are constructed, and thus consist of multiple and often conflicting viewpoints (Perkins, 2008). A community, in other words, is not an object but on-going invention. To borrow from Melvin Pollner (1991), a community is an "accomplishment." This discovery does not mean that the features of a community are vague or unknown, but that their identification cannot be derived from empirical indicators. Space, for example, is not geographical but is situated and linked to personal or collective movements. The center and periphery of a community are thus not associated with standard spatial or empirical coordinates, whereby a central location can be easily calculated. Where persons walk to conduct their everyday affairs, for example, determines distance and location, rather than the usual spatial measurements. A centrally placed community health center may not be located at the geographic center of a community, but instead reflects local movements and definitions of accessibility. Distance and location are embedded in practice, according to a community-based philosophy (Parker, 2006).

Community-based mapping is thus not a technical undertaking. Rather, community members are engaged, often through a "walkabout" in a neighborhood (Lydon, 2003). Throughout this process these persons come out of their houses, begin to discuss the mapping activity, identify key issues, and regularly debate boundaries and the location of resources. This "open air" conversation reveals the multiple realities present in a community and the contentious nature of asset identification. As a result, the resulting map is contextualized, while priorities and contrasting viewpoints are revealed. In short, the biographical or interpretive character of a community is exposed, in contrast to the results from a GIS
rendition.

Through the dialogue that often emerges from the walk-about in a community, various interpretations arise and are confronted. Unique interpretations, along with more commonly held opinions, are debated, often modified, and sometimes dismissed. But even outlooks that might be considered initially to be quite esoteric are recognized, often understood, and criticized. Nothing, in other words, seems to be beyond comprehension, given enough time and effort. All that seems to be required is a commitment to dialogue until ideas emerge and participation is thorough.

Conclusion

The principle message of this manuscript is that community-based researchers or planners should not be obsessed with data. More important, in fact, is interpretation. In most cases, data are confined to surface analysis, while interpretation relates to community expression. This difference is taken to heart by community-based workers.

At the core of this distinction is the moral dimension that is ignored by data. The standards that guide data collection are indifferent to participation, expression, and solidarity. The dialogue that is necessary to gain entrée to a community is thus unimportant. Valid data, in the traditional sense, are untainted by the contingency associated with these experiential features.

Interpretation, on the other hand, is not necessarily clean but unfinished, modifiable, and replete with ambivalence. But neither is community life tidy. Facts, for example, are neither divorced from values nor clashes of perspectives. For this reason, in community-based work, data are considered to be abstract, possibly even lifeless. Data are thus a distraction.

Despite the value of data in professional circles, proper interpretation is more important to communities. Specifically, local knowledge is grounded in a manner consistent with daily affairs in a community, and thus should be the focus of research and social interventions. Due to the local approval of this knowledge, community-based workers might fare better if they develop an obsession with community storylines instead of data.
References


