The era of community-based participatory research (CBPR) began years ago. It may have even started with the American Revolution, when angry colonists rallied under a banner of “taxation without representation” and demanded that their unwelcome despot change his ways. Much more recently, in the early 1990s, disability activists brought the slogan “nothing about us without us” to common usage. With its history of social marginalization, discrimination, and various forms of inhumane treatment, this particular community had had enough. Its members wanted to be included—not just as an afterthought, but also from the “get go”—in the research questions and policy platforms that involved them. Now, many communities are following suit, demanding respect, inclusion, and research methodologies inviting their active participation. An array of advocates supporting indigenous rights and decolonizing perspectives also make similar calls: Methodologies “of the oppressed” promote emancipation of our collective consciousness and instigation of progressive social movements through what has been referred to as “a hermeneutics of love in the postmodern world” (Sandoval, 2000, pp. 10–11).

CBPR is steeped in local geography, culture, and relationships—it is community based. CBPR is participatory when partnerships form between community members and researchers to address jointly shared priorities and research agendas. From the inception of the research purpose to the implications of the research endeavor, CBPR participants live up to the intent of mutual collaboration by actively working with researchers for social change. Because CBPR is nested in true-to-life environments, its results—discussions, critiques, and writings about methods, ethics, and outcomes—inform us not only about the health and illness features, but also of the resiliencies and strengths of the natural and built environments where people live, work, and play.

Knowing what to ideally expect of CBPR begs the question of how to do it. Qualitative methods are dynamic, as are CBPR methods. To evolve our methods, we write. To keep our methods safe, relevant, and respectful, we write. To encourage representation within our methods, we write. These tasks riddle our written works. In the process, we learn basic lessons about ourselves, regardless of how we entered the research endeavor or what brought about our research collaborations. “Other people don’t think like I do!” is perhaps the one common insight born of such collaborative efforts. Idealistic researchers may enter research settings expecting enthusiastic community members to fully “participate,” only to discover that even on the basics—what “participation” means, for example—understandings differ, and disappointments can occur. CBPR is thus of necessity both process and product, ongoing over time, a dynamic, engaging, “back-and-forth” between researchers and community members that illuminates underlying structural challenges and highlights how humans interact amid those challenges.

This special issue of Qualitative Health Research (QHR) addresses the use of qualitative methods in CBPR from many viewpoints. We honestly hope the articles in this issue will enthuse and inspire new qualitative health researchers and “old hands” at research endeavors alike, whether they are interested in becoming or currently involved in the CBPR enterprises as academics, community partners, stakeholders, funders, or evaluators of research.

In review, this issue offers the following:

- A variety of snapshots that illustrate the state-of-the-science and state-of-the-art in qualitative CBPR research;
- Several engaging articles about certain “hidden” populations or at-risk populations (Darroch & Giles, 2015; Hunleth, 2015; Johnson et al., 2015; Phillips, Rowsell, Boomer, Kwon, & Currie, 2015; Waterworth, Dimmock, Pescud, Braham, & Rosenberg, 2015);
- A survey of various qualitative methodologies within CBPR (Berger, Stauffacher, Zinsstag, Edwards, & Krütli, 2015; Kingery, 2015; Paradiso de Suya & Channugum, 2015);

Corresponding Author:
Lauren Clark, College of Nursing, University of Utah, 10 S. 2000 E. Salt Lake City, UT 84112, USA.
Email: lauren.clark@nurs.utah.edu
• An affirmation that the use of qualitative methodologies within CBPR are evolving, deepening in methodological richness, and gaining credibility (Cartwright & Schow, 2015; Mayan & Daum, 2015); and
• An open door inviting exploration of new metaphors and opportunities for research engagement (Belone, 2015; Ventres, 2015).

We know that neither qualitative methods nor CBPR are panaceas and that both present significant concerns regarding study conception, project implementation, and presentation of results. At the same time, however, we are enthusiastic about the possibilities qualitative CBPR methods bring to our work as investigators of health and illness. These two methods are all about relationship as much as revolution. Qualitative, community-based participatory research is about diving into communities, recognizing and valuing those with whom we work, and bringing our creative and engaging selves into waters of exploration and understanding. Uniting qualitative methods and CBPR demands explicit attention to the development and growth of a bilateral sense of reflexivity and appreciation.

We believe that up from such collaborative milieus can arise research leading to thoughtful and efficacious outcomes. We also believe that the process of considering community problems and resiliencies honestly and in discussion with others can be therapeutic in itself. We hope that the articles in this special issue will help guide all our steps on both counts.

However, you can be the judge of that! We invite you read this issue with eyes wide open and look forward to reading future submissions to QHR that bridge qualitative methods and CBPR.

References