Building a Registry of Research Volunteers Among Older Urban African Americans

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Background

• Recruitment challenges limit representation of African American older adults in research.
• Volunteer registries provide an emerging strategy for increasing these adults’ representation in health research.
Research Question

Does a community outreach partnership between older residents and academic researchers of the Healthier Black Elders Center facilitate recruitment of older urban African Americans for a research volunteer registry?
Theoretical Framework

Community-Based Participatory Framework
(Israel, Eng, Schulz, & Parker, 2005)

• Equitable partnership
• All parties share in the research process
• All parties share ownership in research results
Methods

• Retrospective case design
• Process evaluation
• Logic model framework
Results

Figure 1. Logic model illustrating recruitment process for building a registry

Assumptions
Involving older African Americans in outreach health education activities will facilitate participation in a research volunteer registry.

Elders
Academic researchers
Healthier Black Elders' Center
- Community advisory board (CAB)
- Older adult volunteers
- Service agencies
- Financial sponsors
- Community Outreach Specialist

Resources

Activities
Consumer health education learning series
Monthly CAB meeting
Annual health reception
Semi-annual newsletter

Immediate Outcomes
Older African Americans attend health consumer education learning series and annual health reception

Short-Term Outcomes
Older African Americans consent to participate in registry
Researchers build registry of urban older Black adults willing to participate in health research
Results

Figure 2. Annual Total Count for Elderly Enrollees in Volunteer Registry, Ending December, 2003 through Ending December, 2009

Notes: Numbers above each bar refer to annual total count for enrollees in a particular year.
Discussion

• Longitudinal data in Figure 2 show the number of enrollees in the volunteer registry increased 10-fold over seven years.

• Growth in the registry over seven years may be indirectly associated with health education and promotion events.

• Timely follow-up of potential enrollees may explain the largest increase in the registry—2006 and 2007.
Limitations & Next Steps

• Unclear linkage between community outreach health education activities and enrollees’ participation in registry
• Test the applicability of the logic model for making causal inferences about outreach activities and enrollees’ participation in registry
• Collect systematic data on recruitment barriers
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References Cited