

Foreword

HIV continues to be a national and international challenge. Not all communities have benefited from the strides made in public health and medicine, and these differences have led to disparities across a variety of health concerns, including HIV. Although great progress has been made in both the prevention and treatment of HIV and its associated conditions, much more work is clearly needed. With more than 50,000 new HIV infections each year in the United States and the profound disproportionate burden borne by racial/ethnic and sexual minorities, including men who have sex with men (MSM), American Indians/Alaska Natives, African Americans/blacks, and Hispanics/Latinos, it is imperative that we further develop strategies that reach individuals, social networks, and communities, and change policies and promote social change to reduce risk.

Academic researchers and practitioners within local communities have developed and are implementing innovative approaches to reduce HIV exposure and transmission; the CDC's *Compendium of Evidence-based HIV Behavioral Interventions* (www.cdc.gov/hiv/topics/research/prs/compendium-evidence-based-interventions.htm), for example, provides a description of the currently available evidence-based interventions promoted and used across the country. The National Institutes of Health (NIH) also funds intervention research designed to move the science and practice of HIV prevention forward. The National Institute on Minority Health and Health Disparities (NIMHD) at NIH has several active studies designed to reduce risk among MSM, African Americans/blacks, and Hispanics/Latinos. Some of the progress highlighted within this important book, *Innovations in HIV Prevention Research and Practice through Community Engagement*, is a result of both CDC and NIH funding.

However, we must continue to develop even better approaches to reduce HIV exposure and transmission particularly for some of our most vulnerable and neglected communities. We cannot merely continue with what we have been doing; we know that what we have done is not enough. Rather, we must develop additional innovative approaches that are meaningful and authentic to communities; reach large numbers of community members at greatest risk; are sustainable; expand beyond HIV-related health disparities and build capacities that have potential to affect other health disparities.

An emerging approach that has gained traction within public health and medicine is community engagement. Community engagement is the process by which organizations, agencies, other types of institutions, and community members affiliated by geographic proximity, special interest, or similar situations build ongoing and permanent relationships to work collaboratively to reach a collective vision. Generally this vision includes addressing prioritized issues affecting the health and well-being of community members. Within the context of public health and medical research, community engagement can be powerful in bringing about changes that improve the health and well-being of communities and community members. At its core, community engagement involves partnerships and coalitions to mobilize resources and influence systems, change relationships among partners, and serve as catalysts for change. Community-based participatory research (CBPR) is based on the concept that community members' perspectives, experiences, and insights should be blended with sound science to produce the most promising interventions and programs to promote health and well-being and prevent disease.

This book comprises a compilation of innovative interventions and programs from across the United States that apply community engagement principles and approaches throughout HIV prevention intervention and program development. This book outlines both the successes and challenges faced when scientists and lay-experts from academic, government, and nongovernment institutions, including community-based organizations and businesses, and the community at large, partner and engage. It includes the perspectives, experiences, and insights gleaned from real-world examples of community engagement. It serves as a benchmark of the current state of the science and practice of community engagement for those from communities, community-based organizations, agencies (including health departments), businesses, and research institutions who want to better understand what community engagement is, what has been accomplished, and what the next steps might be in terms of community engagement as an approach to HIV-related disparities reduction and elimination. Chapters have been authored by outstanding leaders in HIV prevention and community engagement research and practice. The writing of the chapters and their compilation within this book represent unique partnerships of representatives from diverse communities, community-based organizations, agencies, businesses, and research institutions.

On a personal note, this book has been edited by a long-term mentee and colleague. I have known Dr. Scott D. Rhodes since 1990, when he was a graduate student and community activist in South Carolina. He and members of the CBPR partnership that he is part of in North Carolina have been on the forefront of authentic approaches to community engagement and partnership, and CBPR. Building on the firm foundation established by others in the field of CBPR, including Drs. Eugenia Eng, Barbara Israel, Meredith Minkler, and Nina Wallerstein, the unique and sustained partnership has multiple projects that cross race/ethnicity, sexual orientation, gender identity, assets, and risks.

Within public health and medicine we frequently hear of the need for community engagement, particularly as a strategy to address community priorities, build community capacity, and lead to a reduction in and subsequent elimination of health

disparities. This book presents solid guidance for community engagement and partnership and CBPR. I am thrilled that this book has been realized; it will serve as an important resource as we work to prevent HIV within vulnerable and neglected communities.

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