

## **Collaborative partnership between research and community partners: a formula for equitable partnerships and codesigned interventions**

### **Authors:**

Adamson E<sup>1</sup>, Tran L<sup>2</sup>, Tu T<sup>2</sup>, Richmond J<sup>1</sup>, Wallace J<sup>1</sup>, Yussf N<sup>2</sup>, Orozco A<sup>1</sup>, Pedrana, A<sup>1</sup>

<sup>1</sup> Burnet Institute, <sup>2</sup> Hepatitis B Voices Australia

### **Background/Approach:**

The Burnet Institute and Hepatitis B Voices Australia (HBVA) are working in partnership to codesign a hepatitis B public awareness campaign for Chinese and Vietnamese communities.

Understanding of and responses to any health condition are informed by existing beliefs and cultural norms. To explore, understand and be directed by community experiences of hepatitis B, project partners have collaborated closely using codesign and participatory research approaches. These approaches prioritise lived experience expertise and local knowledge to form the foundation for campaign development through to delivery and evaluation.

### **Analysis/Argument:**

This spotlight presentation is a reflection piece on the partnership which has capitalised on mutual strengths. The Burnet Institute, as a research organisation has the organisational infrastructure and research frameworks while HBVA has the intersectional lived experience of hepatitis B, and the community connections and trust.

### **Spotlight Discussion:**

The partners established clear protocols to ensure lived and community experiences informed the campaign and participation was culturally meaningful.

Ways of working defined clear communication and reflective practice between partners. Three new positions at HBVA enhanced trust and links with community and weaved lived experience throughout the project.

A research protocol was developed to guide community participation. For each community, partners undertook interviews to inform gaps and needs (n=21), co-design workshops (n= 31) for concept development, and a survey (n= 45) and focus groups (n= 57) to test campaign concepts and materials.

Different methods helped gather diverse insights by engaging people with a variety of experiences and backgrounds.

### **Conclusions/Applications:**

Burnet and HBVA have aimed to bridge the gap between research and community knowledge, by sharing power, commitment to co-building knowledge, actions and the evidence base to support the development of the campaign. Project partners will

continue to use community led and participatory approach in the next phase of implementation and evaluation.

**Disclosure of Interest Statement:**

The Burnet Institute and Hepatitis B Voices Australia received funds for this work from Australian Centre for Disease Control.