Towards Transformative Knowledge Production: Understanding Health through Civic Engagement and Multimodal Methodologies
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Purpose
This project aims to design, implement, and evaluate a form of engaged scholarship through civic engagement and multimodal methods in order to address and problematize current understandings of health disparities.

Background
In Knowledge for Social Change (2017), Benson et al. define the university as a “democratic, civic, socially-engaged institution.” Working within the tradition of engaged scholarship (1998) by Benson et al., this project aims to destabilize traditional understandings of research, away from the model of research as scientific discovery and towards a model of knowledge production and co-creation between academic institutions and the community. However, there exist several debates in the field regarding the purpose, methodology, and evaluation of engaged scholarship. Does engaged research produce knowledge? What level of collaboration is appropriate? How can we evaluate the efficacy of an engaged research project? Through this project we aimed to address these questions and others. I organized a three-part discussion series around people-centered health practice, the politics of care, and the sociopolitical determinants of health with the Health Ecologies Lab, an initiative sponsored by the School of Social Policy and Practice and the Slought Foundation, which works to bring academics, health practitioners, and community members together in dialogue.

Questions
How can we bring scholars and community members together through public programming and civic engagement to address health and disparities? To what extent is this format accessible? To what extent is knowledge produced through this method? What are the successes and limitations of our method?

Methods

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<th>Coordinate and Collaborate</th>
<th>Event and Survey Design</th>
<th>Sought Discussion Series</th>
<th>Analyze and Reflect</th>
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<td>Reach out to scholars and community members</td>
<td>Collaborate with discussants to organize programs</td>
<td>Facilitate three programs in April</td>
<td>Code and analyze survey responses using grounded theory method</td>
<td>Transcribe event recordings</td>
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<td>Build relationships and establish partnerships</td>
<td>Design survey questions</td>
<td>Record discussions for Slought archive</td>
<td>Reflect on successes and areas for improvement with collaborators</td>
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<td>Publicize programs</td>
<td>Collect survey responses</td>
<td>Present findings</td>
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SURVEY QUESTIONS:
In what ways did you find this program to be accessible? In what ways did you find this program to be collaborative? What did you learn from the discussion today? How can we improve programs like this in the future?

Discussion
Survey results broadly indicated that attendees found the programs to be accessible in cost, space, content, and language. The conversational style and use of visual media during the programs were also found to contribute to intellectual accessibility and knowledge production. The public discussion series can be viewed not only as a site or case study in engaged knowledge production, but more broadly as an example of the ways in which power relations are re-negotiated between institutional actors and community members in order to reorganize our understandings of knowledge and health, and destabilize the relationships (spatially, economically, politically, intellectually, and culturally) between the academy and urban communities.

Limitations: Although the survey responses received were largely informative and will help to improve programming in the future, the response rate was low and not all surveys were completed fully. In the future, this can be addressed through a more engaged feedback session using post-event in-depth interviews or focus groups.

References & Acknowledgements

Program 1: Into Unknown Parts
A film program and conversation about indigenous life under colonialism and the politics of care with anthropologist Lisa Stevenson
Approx. 25 people in attendance | Response Rate: 8/25 (32%) | 4 Students | 3 Community Members | 1 Faculty/Health Practitioner
Accessibility: Free cost, welcoming space, facilitated conversation, media as entry point
“THE fact that it featured [Lisa’s] movie and then used that as an entry point into her book, as well as the contextualizing that the moderators and Lisa did, made the material and conversation accessible.” – Student
Knowledge Production: Visual ethnography, the politics of visual art, Inuit history, the practice of listening and care, the violence of friendliness
“It was wonderful to hear from Lisa in candid terms about her work – it illuminated and added to the gems of ideas I have taken away from reading her work.” – Student
Future Improvement: Enhance publicity and longer Q&A with audience
“Raised stage for the panelists, so all attendees in audience can view, hear, and connect with guest speakers!” – Community Member

Program 2: Folded Into Lives
A conversation about the politics of listening and ethnography as an unfinished practice with health anthropologist Joao Biehl and ethnographer Kristen Ghodsee
Approx. 25 people in attendance | Response Rate: 5/25 (20%) | 3 Students | 1 Community Members | 1 Faculty/Staff
Accessibility: Physical space and event format, audience Q&A, conversational style, media component
Knowledge Production: New ways to think about openness and vulnerability in ethnography, development of open frameworks with one another, ethnographic method, alternatives to the practice of diagnosis, embodied knowledge, the illusion of empiricism
Future Improvement: Longer Q&A, raised stage, enhance publicity, more accessible language-useage
“Leave more time for questions and phrase the question/answer as a round table discussion.” – Student
“Include previous research participants or community members, and include people from other organizations and disciplines.” – Staff Member

Program 3: State of Risk
A conversation about medicine’s obsession with risk control and anticipatory treatments with history of science scholar Robert Aronowitz and bioethicist Lance Wahlert
Approx. 25 people in attendance | Response Rate: 9/25 (36%) | 4 Students | 3 Community Members | 4 Faculty/Staff
Accessibility: Open space, accessible and relevant topic, conversational audience Q&A was inclusive and accessible
Knowledge Production: Queerness and medicalization, history of medical discourse, understanding of the role of risk in healthcare treatment
“I learned more about understanding the relationships between risk and ‘atypical’ bodies in the context of medical care.” – Staff Member
“I learned a great deal about the range of positive and negative aspects, as Lance detailed, with trans and queer communities dealing with healthcare.” – Community Member
Future Improvement: Increase use of visuals and media, enhance publicity, provide more informative background on core concepts, include medical practitioners/policy-makers/patient populations in the dialogue