COMMUNITY-BASED PARTICIPATORY RESEARCH AND DIGITAL EDUCATION TO ATTENUATE DISPARITIES TO ACCESS KIDNEY TRANSPLANTATION

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Abstract

Background. Community-based participatory research (CBPR) and digital education offer promising approaches to attenuate kidney transplant access disparities. This paper describes the CBPR process that resulted in the development of the *KidneyTIME* +PEERs intervention, a digital kidney transplant self-education and outreach platform combined with peer mentors to kidney failure patients in Buffalo, NY that is culturallysensitive and tailored to transplant stage. Methods. Following the principles of CBPR, a community advisory board was formed and played an essential role in the adaptation of KidneyTIME and development of PEERs. We conducted a qualitative analysis of intervention development meetings. Community member Co-Investigators partnered in writing this paper. Results. Collaboration between a diverse group of community members and researchers resulted in four guiding principles that informed our intervention efforts to promote Black and Latino individual's kidney transplant access: (1) patient self-education, (2) patient encouragement and resources, and (3) social network outreach. Full engagement with community members is especially evident in the program's animations, video interviews, written content, and community capacity building efforts. **Conclusions**. Applying the principles of CBPR we developed an intervention to promote kidney transplant access that is accessible, culturally appropriate, and supportive and ensures that when the project ends, tangible products would be left behind in the community. Processes and products from this work may inform the work of other CBPR partnerships.