The Steps Model: A Practical Tool for Engaging Communities to Improve Health Outcomes

The Steps Model emphasizes three key ingredients for community-engaged research: trust building over time, mutually beneficial outcomes, and clear metrics for assessing impact.\(^1\)\(^2\) Metrics assess project planning, resource allocation, research impact, and sustainability. Movement up the steps indicates a deepening of academic–community engagement, trust, and impact over time. The partnership must be organic. All parties must remain sensitive to one another’s needs and maintain a willingness to go down steps along the way to rebuild the partnership as necessary. The Steps Model of partnership can enhance research and the translation of findings into applications that can truly improve community health over time.

**STEP 5: Full Partnership (> 5 years)**
- Expand research into other community priorities; add new investigators
- **Keys to success:** Mutual trust and institutional commitment to partnership
- **Metrics:** Broad recognition of academic–community partnership; broader impact on community health; publications, tenure, multiple shared grants (including from the NIH); student training; increased community funding
- **Example:** Obesity intervention disseminated community-wide and to other communities

**STEP 4: Extended Partnership (> 4 years)**
- Expand research
- **Keys to success:** Increased capacity of the academic and community partnership in knowledge, funding, and training; continued shared funding
- **Metrics:** Extended academic services to students; increased capacity of community/employment in research; increased connections to other investigators and potential projects
- **Example:** Community-based obesity intervention designed and funded

**STEP 3: Initial Partnership (2–4 years)**
- Obtain resources and funding; plan next steps
- **Keys to success:** Transparency of roles and agreements; shared activity on grants; continuous return of results to community
- **Metrics:** Tangible products of collaboration (funding, data, training) realized; community advisory board facilitating work
- **Example:** Initial research grant for obesity prevalence and prevention obtained

**STEP 2: Preliminary Engagement (1–2 years)**
- Discuss match of academic and community interests
- **Keys to success:** Academic “give back” to the community; pilot data rapidly shared with and interpreted by the community
- **Metrics:** Partnership planned; initial pilot work underway
- **Example:** Pilot study of community obesity prevalence and/or community needs assessment conducted, and results discussed with community

**STEP 1: No Engagement (0–1 year)**
- Identify potential partners and shared goals: communities assess fit and authenticity; academics assess capacity and readiness
- **Keys to success:** Taking time to form trusted relationships
- **Metrics:** Initial contact/meetings; core partners identified; community needs/goals identified
- **Example:** Initial meeting to understand views and issues about obesity prevention in the community

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**References:**

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