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A Cultural Variant Approach to Community-Based Participatory Research: New Ideas for Family Professionals

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Review

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3 Running head: A Cultural-Variant Approach to CBPR

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8 A Cultural-Variant Approach to Community-Based Participatory Research: New Ideas for
9
10 Family Professionals

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36 Abstract

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39 The cultural-variant community-based participatory research (CV-CBPR) model expands the
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41 traditional community-based participatory research (CBPR) model and supports the ongoing
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43 creation of innovative basic family and translational science. The CV-CBPR model supports
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45 family professionals using a cultural-variant perspective that discourages the use of a deficit or
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47 pathological lens. It also encourages inclusive and culture-sensitive practices in all stages of a
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49 project. After a brief review of diverse types of community or action-research projects and the
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51 nine principles of the traditional CBPR model, a cultural-variant perspective and related
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53 principles are described. We offer lessons learned from two project management experiences: a
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community-focused, disaster project with older survivors of Hurricane Katrina and a CBPR arctic-climate project with Alaska Native grandparents rearing grandchildren.

Key Words: Community-based participatory research, cultural-variant community-based participatory research model (CV-CBPR), cultural-variant perspective.

Expanding the traditional community-based participatory research (CBPR) model, the cultural-variant community-based participatory research (CV-CBPR) model provides a methodology that fosters socially conscious community engagement. The CV-CBPR model also promotes an understanding of how sociopolitical, historical, economic, and contextual factors influence individual, family, and community development and addresses the intersections of race, class, gender, age, and other “isms” of society. The journey toward translational family science may be furthered when a cultural-variant perspective is placed explicitly at the center of CBPR methods and applied at every level of a community-engaged project. The CV-CBPR model shifts focus away from a mere conceptualization of cultural competence and sensitivity toward a more explicit application of inclusive practices; it institutionalizes respect for culture, traditions, and adaptive behaviors of a group. Compared with the CBPR approach, this model offers a more specific conceptual and methodological guideline to apply a cultural-variant view to community engagement and a heightened level of socially conscious and ethical practice in CBPR projects. CBPR researchers engaged in CBPR largely have focused on community engagement (for examples, see Israel, Eng, Schulz, & Parker, 2013; Minkler & Wallerstein, 2008); we focus on the deliberate ways to understand family and community development by placing culture, inclusiveness, and social justice at the core of the work.

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3 The CV-CBPR model provides family science professionals an opportunity to further
4 exhibit cultural sensitiveness when conducting basic family science. The CV-CBPR model
5 provides an opportunity to further translational science, which refers to research aimed at
6 removing obstacles to wellness, health promotion, and overall health of citizens by using unique
7 holistic perspectives born from the synthesis of multiple disciplinary perspectives (National
8 Center for Advancing Translational Science, n.d.; Woolf, 2008).
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17 The CV-CBPR model emerged over time from a community-engaged study with two
18 sample groups of older adults. The first sample consisted of survivors displaced by Hurricane
19 Katrina in New Orleans and the surrounding areas, as well as long-term residents in the receiving
20 city of Baton Rouge, Louisiana. Alaska Native grandparents rearing grandchildren made up the
21 second sample. The CBPR study with Alaska Native grandparents rearing grandchildren inspired
22 the creation of the cultural variant CBPR approach, unmasking the interpretations of arctic,
23 Alaska Native family members about whom little is known: Alaska Native grandparents. These
24 chosen studies, which will be described in greater depth later, each involved diverse yet
25 vulnerable populations and also faced many unexpected conditions of a disaster and arctic
26 climate living.
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DIVERSE MODELS OF COMMUNITY-FOCUSED AND TRANSLATIONAL RESEARCH

41 Professionals have used several models of community engagement and action-oriented research
42 to enhance human, family, and community development. *Community-based research* is an
43 umbrella term referring to any study or project that involves communities, and this involvement
44 has a variety of applications. Stoecker (2009) suggested that community-based research typically
45 has two components: participation and action. Community-wide research (e.g., Perry, Klepp, &
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3 Sillers, 1989; Perry et al., 1993) is certainly a type of community-based research, but this type of
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5 research emphasizes neither participation nor action in its methods.
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8 Community-centered research focuses on participation. It values practice or intervention
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10 through community participation more than the outcome (Flaspohler, Duffy, Wandersman,
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12 Stillman, & Maras, 2008). The starting point is the assessment of community strengths and needs,
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14 which facilitates community involvement throughout program design and implementation.
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16 Because of its emphasis on community participation, community-centered research can also be
17
18 referred to as *participatory research* (Cornwall & Jewkes, 1995; Maguire, 1987).
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22 Action research, another methodological approach, values the practicality of research. It
23
24 is designed to produce outcomes that benefit communities, although it does not always include
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26 community participation (Lewin & Lewin, 1948; Lundy & McGovern, 2006). Action research
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28 has also been referred to as *action-based research* (Krockover, Shepardson, Adams, Eichinger,
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30 & Nakhleh, 2002) and action-oriented research (Coates, Dodds, & Jensen, 1998; Small, 1995;
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32 Small & Uttal, 2005; Yoshihama, 2002). Small (1995) defined action-oriented research and the
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34 ways in which family professionals seek to solve problems, build the knowledge base, and
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36 promote social change.
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40 Family professionals have engaged in projects that focused on either community
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42 participation or outcomes, but an increasing number of family scholars and professionals have
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44 incorporated both aspects in their projects, which have been described as participatory action
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46 research (Gosin, Dustman, Drapeau, & Harthun, 2003) or community-based participatory action
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48 research (CBPAR; Maiter, Simich, Jacobson, & Wise, 2008). On the basis of an online literature
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50 search for articles published in the *Journal of Family Issues*, *Journal of Marriage and Family*,
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52 *Journal of Family Theory and Review*, and *Family Relations*, it appears that family professionals
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3 have focused largely on translational science that involves community and participant
4 engagement (Berge, Mendenhall, & Doherty, 2009; Dodson & Schmalzbauer, 2005). For
5
6 example, Berge et al. (2009) developed the citizen health care model of empowerment to address
7
8 the social justice issue of health disparities at the community level. They first identified a
9
10 concern of interest to them, as well as to the participating community, then held biweekly
11
12 meetings to generate potential action goals and approaches, and finally stipulated and executed
13
14 the action plans. Similar to CBPAR, community-based participatory research (CBPR) is an
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16 approach based on a social constructivist approach to science that centers on the nine basic
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18 principles of the CBPR (Israel et al., 2013).
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SETTING THE CONTEXT FOR CV-CBPR MODEL

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27 The CV-CBPR model is built on the nine principles of traditional CBPR: (a) recognize
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29 community as a unit of identity and members of a group; (b) build on strengths and resources
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31 with the community to enhance development and honor resilience; (c) facilitate collaborative,
32
33 equitable involvement of partners in all phases of research, moving beyond identifying
34
35 participants or listening to findings at the close of a project; (d) integrate knowledge and action
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37 for the mutual benefits of all partners, which positions family professionals to translate findings
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39 into evidence-based documents, conferences, and presentations; (e) promote co-learning and
40
41 empowering process that attends to social inequities; (f) use a cyclical and iterative process of
42
43 questioning, critiquing, and discussing findings, and determining next steps; (g) address health
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45 from both positive and ecological perspectives that address risk and protective factors; (h)
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47 disseminate findings and knowledge gained to all partners; and (i) involve a long-term
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49 commitment by all partners with scholars remaining engaged with the community (Israel et al.,
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2013; Minkler & Wallerstein, 2008).

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Scholars have expanded on these principles and recommended additional features of CBPR. For instance, reciprocity between researchers and communities throughout the research process are key to a collaborative, mutually beneficial partnership between researchers and communities (Israel et al., 2013; Israel, Schulz, Parker, & Becker, 2001; Maiter et al., 2008; Minkler & Wallerstein, 2008). Professionals and communities share decision-making power. Mutually beneficial projects also emphasize action-oriented science, health promotions, and understanding communities and their experiences (Israel et al., 2001, 2013; Minkler & Wallerstein, 2008).

For the present article, *culture* refers to shared language, activities, food, arts, music, rituals, values, norms, and beliefs that hold meaning in the lives of an individual or group. Culture adds meaning, outlines actions, motivates human interactions, and organizes the world of individuals and groups. It provides connections to self and others and to the past and present. Culture has a historical and contemporary lens and embraces all components of life. Porpora (2016) operationalized culture into “social meanings and its products” (p. 439). For example, there were many negative social meanings attached to survivors of Hurricane Katrina; survivors were referred to as refugees, not citizens, and media images focused on an area rippling with looting, disorder, and lawlessness in an effort to survive in the midst of ravaged communities. These and other social constructions and medical practices contributed to negative images of storm survivors (Tierney, Bevc, & Kuligowski, 2006).

Although challenging to conceptualize at times, culture is systematic and heavily woven into the human existence (C. Smith, 2016). In the lives of Alaska Native grandparents rearing grandchildren, for example, culture reflected traditional ways of living, such as the respecting others, children, Elders, and the connection of humankind to land, water, ice, and fire (Nelson,

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3 1983; Roderick, 2011). Culture continues to reflect a reliance on traditional values that have been
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5 passed down for generations (Roderick, 2011). Culture is like research: For every piece of new
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7 information, a sea of new, diverse, and sometimes consistent meanings surface across time,
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9 people, and space.
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13 Family professionals who embrace a cultural-variant perspective seek to understand the
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15 role of and meanings attached to culture in individual, family, and community development
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17 while discouraging a deficit (Allen, 1978; Henderson, 2005; Henderson & Bailey, 2015;
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19 Henderson & Cook, 2005; Stevenson, Henderson, & Baugh, 2007) or pathological lens (Fine,
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21 Schwebel, & James-Myers, 1987) to science and practice. Accordingly, outlining the basic
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23 elements of cultural competence or sensitivity—such as art, music, norms, or traditions—does
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25 not in itself ensure an awareness and commitment to understanding the journey of groups about
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27 which little is known or for which a deficit lens has overshadowed adapted resilience.
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32 Ultimately, understanding the human condition in the context of an individual,
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34 community, or group's narratives is core to this perspective. Proponents of the CV-CBPR model
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36 support the personal and group agency of research participants and communities in practice;
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38 dissemination practices also disallow relegating a person or group to a position of otherness or
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40 inhumanity (Hill Collins, 2000). In short, family professionals respond to cultural factors by
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42 adjusting their methods, processes, and interpretations to explain the nuances in the human
43
44 condition. For example, Phenice, Griffore, Silvey, and Hakoyama (2015) recognized the
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46 influence of interdependence and community in their obesity project with Native American
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48 youth. Despite a well-organized, Western intervention paradigm combined with a community
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50 engagement feature, there were high attrition rates. For study participants, the impact of
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3 traditional values of interdependence and community were stronger than their commitment to an
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5 individual-oriented study intervention program.
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CULTURE-VARIANT COMMUNITY-BASED PARTICIPATORY (CV-CBPR) MODEL

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10 This cultural-variant approach to CBPR was first developed following lessons learned from a
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12 community-focused, disaster project with older adults whose lives were changed directly by
13
14 Hurricane Katrina and a CBPR project with Alaska Native grandparents raising grandchildren.
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16 The community-oriented Hurricane Katrina project was one of the first disaster studies with a
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18 sample consisting solely of older adults. This mixed-method project involved 122 older adults
19
20 from New Orleans and the surrounding areas who were displaced in the aftermath of Hurricane
21
22 Katrina and 93 older, long-term residents of the receiving city of Baton Rouge, Louisiana.
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24 Disasters place older adults at a heightened level of vulnerability (Lamb, O'Brien, & Fenza,
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26 2008), disrupting daily life, routines, health strategies, and familial and community infrastructure.
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28 Therefore, researchers examined the daily hassles and coping of displaced older adults
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30 (Henderson, Roberto, & Kamo, 2009), the social and psychological challenges of older women
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32 (Roberto, Henderson, Yoshinori, & McCann, 2010; Roberto, Kamo, & Henderson, 2010), as
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34 well as the perceptions of older adults in the receiving city of Baton Rouge (Kamo, Henderson,
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36 Roberto, Peabody, & White, 2015).
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44 In addition to methodological issues concerning sampling (Henderson, Banks, Chen,
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46 Airess, & Sirios, 2009), disaster research is riveted with unexpected conditions and additional
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48 ethical considerations. Disaster survivors are declared a vulnerable population; this declaration
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50 rests outside of the daily social constructions of race, class, gender, age, able-bodiedness,
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52 national origin, and more. Persons whose lives were disrupted by a disaster needed immediate
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54 services and continuity in daily life. Although many Hurricane Katrina survivors were burdened
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3 with several groups of researchers seeking their participation, many also needed the gift cards or
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5 honorariums offered by researchers to obtain essential supplies, such as propane gas.
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8 A cultural-variant lens was instrumental in adhering to the principles of the Belmont
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10 Report (respect for persons, beneficence, and justice) and guided the actions taken by many
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12 disaster researchers (Barron Ausbrooks, Barrett, & Martinez-Cosio, 2009), especially given the
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14 complexity of the Federal Emergency Management Agency (FEMA) definition of vulnerable
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16 populations. FEMA's definition includes persons with physical and intellectual disabilities,
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18 limited or non-English speakers, persons who are geographically or culturally isolated, people
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20 with mental health concerns, people with transportation limitations, and more (Trust for
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22 America's Health, 2012). Consistent with the FEMA definition, this model provides an
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24 opportunity to protect the humanity of a vulnerable population, which is further illuminated in
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26 the description of the two projects.
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31 In addition to the multiple tiers of vulnerability of older Hurricane Katrina survivors,
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33 Alaska Native People reside in the margins of society, and arctic families are underrepresented in
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35 family research. Face-to-face interviews were held with self-identified Alaska Native
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37 grandparents who reared their grandchildren for at least 1 year; interviews were held in three
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39 regional communities. In Interior Alaska, it was disappointing to hear an Athabascan Elder feel
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41 the need to dispel the myth that Alaska Native People live in igloos. Alaska Native People are
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43 vulnerable due to misperceptions such as that noted in this example, the impact of Historical
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45 Trauma that had been detrimental to cultural meanings associated with possessions, land, culture,
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47 language, and religion; research maltreatment; the removal of children from their homes and
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49 families; and the disproportionate number of Native children in foster-care homes (Brave Heart,
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51 Chase, Elkins, & Altschul, 2011; Brave Heart & DeBruyn, 1998; Bussey & Lucero, 2013; Cross,
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2008). Additionally, previous research on this sovereign group has been largely focused on poor health outcomes and health disparities (Gonzales & Stoll, 2002; Neckerman & Torche, 2007); few published studies in this body of literature take a strengths-based approach.

This research project was the first CBPR project that focused solely on a sample of grandparents or grandparents rearing grandchildren in an arctic climate of the United States. The exploratory study used open- and closed-ended questions to (a) broaden understanding of the meaning of grandparenting; (b) learn about the experiences of grandparents living in rural and urban arctic areas; (c) examine strengths, wants, and needs; (c) discover what has shaped the lives of grandparents; (d) learn what events have and are changing grandparenting; and (e) discover what grandparents do to care for their grandchildren, families, and communities. The research team agreed to complement the oral history tradition of self-identified Alaska Native People by combining Western and Alaska Native traditions to document the experiences of grandparents rearing their grandchildren and use this information to guide programs and service needs.

Because of the principles outlined above, CBPR is useful when studying diverse groups and groups about which little is known. Cultural sensitivity or a variant perspective needs to be a more prominent feature of the methods used with vulnerable populations and diverse or invisible groups. Out of this need, the CV-CBPR model was developed to honor and advance community autonomy and engagement. Cultural sensitivity is central to all aspects of the model, as shown in Figure 1.

Instead, this model encourages the development of projects that (a) recognize the effect of sociopolitical, historical, economic (Henderson, 2005; Sprey, 2000), and cultural forces on development at all levels of human ecology; (b) recognize the influence of culture on

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3 development (Henderson & Bailey, 2015; Henderson & Cook, 2005); (c) address the social
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5 constructions of otherness that stimulate social, health, and wealth equity; (d) become familiar
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7 with and value participants' culture, traditions, and experiences based on their definitions and
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9 meanings; (e) value unique adaptive attitudes and behaviors; (f) respect all forms of knowing;
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11 and (g) endorse mutually beneficial basic and translational works (e.g., policies, programs,
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13 community-oriented and advocacy tools). The CV-CBPR model also positions family
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15 professionals to create translational tools that may broaden the impact of science, provide some
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17 immediate support to communities, and champion personal or community agency.
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22 One of the first principles of the CV-CBPR model is to recognize the factors that promote
23
24 or undermine overall well-being of children, youth, and families (Israel et al., 2001). For
25
26 example, the development of Hurricane Katrina survivors was influenced by the intersection of
27
28 race, class, and age in the aftermath of the disaster (Lavelle & Feagin, 2006). From a cultural-
29
30 variant lens, the research team recognized the need of older adults to create some form of
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32 normalcy and locus of control. In support of these needs, the research team accepted survivor
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34 assistance in the form of snowball sampling as well as helping organize interviews with
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36 subsequent participants.
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41 The second principle involves professionals recognizing and respecting the diverse and
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43 common features of individual, families, and groups; it requires explicitly looking for a group's
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45 unique and common adaptive attitudes and behaviors. For instance, older survivors of Hurricane
46
47 Katrina were placed in a sociopolitical context of poverty and otherness coupled with
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49 compassion fatigue (the deteriorating ability to show empathy, an amplified sense of
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51 exasperation, and a sense of indifference toward others; Figley, 1995; Kamo et al., 2015; Tierney
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53 et al., 2006). The continual reporting of the disaster and the public's exhaustion from constant
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3 exposure to the devastation resulted in people tuning out to previously covered stories (Feeney,
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5 2007). This project provided an opportunity to resist compassion fatigue by understanding the
6
7 meanings that older adults place on family, social support, and coping in the face of a disaster.
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9 For instance, the research team spent time in the trailer communities and observed the
10
11 adjustments of Hurricane Katrina survivors. They created Katrina families, shared meals with
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13 other older adults with limited resources, and cared for children while others took care of their
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15 affairs to manage their disrupted lives.
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20 Third, the CV-CBPR model expands traditional CBPR models by understanding the
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22 importance of interpersonal dynamics from a cultural-variant lens, which requires respect, trust,
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24 and a model of interdependence (Israel et al., 2013) beyond the initial and final exchanges with
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26 the community. Self-awareness, understanding, active listening, being teachable, planfulness,
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28 and flexibility are important cultural-variant practices. In other words, stabilizing CV-CBPR
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30 partnerships requires a set of soft skills coupled with socially conscious methodological practices.
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32 The interpersonal dynamics of the CV-CBPR model are to (a) create and preserve respectful
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34 researcher–community relationships; (b) integrate the diverse contexts that influence human and
35
36 family development in CBPR projects; (c) seek to understand and value the definitions and
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38 meanings participants and community attach to their lives; and (d) cultivate relevant,
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40 emancipatory basic and translational documents to improve the human condition and support
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42 community and human capital resources.
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49 The CV-CBPR model also calls for a fourth principle, which is respect for all forms of
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51 knowledge (Denzin & Giardina, 2008). Alaska Native ways of knowing have been exemplified
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53 by research in Arctic climates and with Alaska Native People (Arctic Research Consortium of
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55 the United States [ARCUS], 1999; Mohatt et al., 2004) and can be translated into more
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3 purposeful translational tools (e.g., white papers, program activities). Useful translational tools
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5
6 tend to address complex social, familial, and health concerns identified in partnership with the
7
8 community. Translational tools also provide a window to the meanings of culture, the
9
10 connections of culture to resilience, and the self-determination that is woven in the lives of older
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12 Hurricane Katrina survivors and Alaska Native grandparents raising grandchildren, whose stories
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14 have not been told.

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17 Furthermore, a cultural variance approach to community engagement also requires the
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19 ongoing practice of respecting the knowledge gained from personal experiences, wisdom handed
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21 down by Alaska Native Elders and ancestors, and the Alaska Native perspective, meaning a way
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23 of viewing the world through their traditional ways, values, and roles (Henderson et al., 2015).
24
25 Therefore, CBPR projects must be culturally sensitive, embedded, or anchored (Henderson et al.,
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27 2015; Mohatt et al., 2004); cultural-variant theorists respect all experiences of participants and
28
29 their communities. Culture variant principles (Henderson, 2005; Henderson & Bailey, 2015;
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31 Henderson & Cook, 2005; Stevenson et al., 2007) are required and interwoven in the eight
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33 components of the proposed CV-CBPR model.

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39 *Eight Key Components of the CV-CBPR Model*

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41 To promote equity, respect, trust, and social change, we propose eight components of a model
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43 that takes a cultural-variant perspective to build on the CBPR model (Israel, Coombe, &
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45 McGranaghan, 2010; Israel, Eng, Schulz, & Parker, 2013). In this model, professionals seek to
46
47 understand culture and context as it relates to strengths and adaptive behaviors in a reiterative,
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49 cyclical pattern that occurs across and within eight primary stages (see Figure 1). The cultural-
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51 variant perspective rests at the center of the model but interacts with and is engaged in all aspects
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53 of it.
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Stakeholders' assessment. As depicted in Figure 1, one component of the CV-CBPR model is to begin with an ecological assessment of resources, policies, and infrastructure held by all project stakeholders. For the Alaska Native project, introductions, visits, and communication with tribal authorities, community leaders, and researchers in close relationship with Alaska Native People (primary stakeholders) began 2 years earlier and established respectful and transparent engagement. Asking permission to visit and awaiting approval is key to demonstrating respect for Alaska Native traditions, values, ways, Elders, and tribal sovereignty. A culturally appropriate and proactive approach to stakeholder assessment is to adhere to group norms, which often advances the Belmont principles.

Stakeholders have different and distinct roles, and some may hold discrepant expectations of family professionals. Primary stakeholders are researchers; practitioners; communities; tribal authorities; ethics committees for tribal corporations; and coordinating committees for each of the Alaska Native communities, universities, and funders. These entities, their resources, and needs are central to the success of the project, which means family professionals must understand and address the culture of work (i.e., policies, procedures, and ways of conducting business) for each entity. Secondary stakeholders may include public and private agencies, faith-based organizations, and other communities not in the study. In Alaska, these other communities desired findings and best practices related to grandparent rights and responsibilities. To maintain respect for Alaska Native traditions, the research responded to these requests.

The primary stakeholder assessment involves (a) assessing the policies that govern all partners; (b) creating an organizational system that guides the authorization of tasks, responsibility for funds management, and feasible timelines; and (c) developing ways to create and maintain trusted, transparent, and respectful relationships with communities. Users of the

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3 CV-CBPR model must develop research and project management systems that align with the
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5 requirements, cultural beliefs, and practices of stakeholders.
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8 From a cultural-variant stance, it is also important to understand and evaluate
9
10 expectations, common and uncommon policies, the infrastructure and capacity, and funding
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12 options and requirements held by all primary stakeholders. Ideally and before submitting a grant
13
14 or contract proposal, CV-CBPR professionals must conduct a global assessment of stakeholders
15
16 at the community-level in anticipation of modification in project policies and governance.
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18 Specific to cultural-sensitive practices, overburdening Alaska Native communities or older
19
20 Hurricane Katrina survivors was a constant consideration and informed efforts to provide
21
22 services (e.g., caseworkers provided on-site services to survivors, a fact sheet was developed for
23
24 an Alaska Native elder program, and the team had informational booths with study findings at
25
26 community events). Engaging in community events and demonstrating respect for the lives of
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28 study participants, tribal authorities, and participating communities were other ways of
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30 contributing versus solely extracting from the community.
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36 To manage the burden on and value of the project to participating communities, CV-
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38 CBPR professionals also must discuss and create handbooks and training materials and
39
40 determine who has judiciary authority. Proactively creating project policies can prevent
41
42 burdensome, time-consuming procedures for diverse types of payments needs and transfer of
43
44 funds, building on traditional models of CBPR (Israel, Schulz, Parker, & Becker, 1998). For
45
46 example, community partners, especially groups with a history of research maltreatment, such as
47
48 Blacks and Alaska Native People (Foulks, 1989; Pacheco et al., 2013; Reverby, 2001), benefit
49
50 from knowing federal, state, university, and community agency policies regarding purchasing,
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52 payments, and travel. For example, it was critical to explain policies regarding payment for
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3 travel and honoraria to the coordinating committees and communities in Alaska. All these
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5 policies have implications for the institutional review board (IRB) application, the ease of project
6
7 management, and the process of nurturing respectful relationships across primary and secondary
8
9 stakeholders.
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11
12 *Stakeholder formation and stability.* The formation and stabilization of primary (e.g.,
13
14 funders, tribal authorities, coordinating committees, universities, IRBs) and secondary
15
16 stakeholder relationships is an ongoing process. For the Alaska Native grandparents rearing
17
18 grandchildren project, the traditional councils and governing authorities were involved in the
19
20 construction of the oversight team (e.g., the coordinating committees) and developed procedures
21
22 for managing their review and approvals of project promises, documents, and activities. This
23
24 oversight was iterative and sometimes shifted as issues arose and centered on Alaska Native
25
26 values of respect, traditional knowledge, and the oral transmission of history and culture.
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28 Managing primary stakeholders was heightened when working with native people and older
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30 Hurricane Katrina survivors because of cultural, environmental, sociopolitical, and historical
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32 factors.
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39 Through a cultural-variant lens, researchers and community leaders and members act as
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41 co-creators by also assessing relevant global community expectations, networks, and traditions.
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43 Stakeholders' views on effective project management, deliverables, feasible timelines, project
44
45 goals and missions, and the budget must be discussed early, and those conversations must be
46
47 ongoing; these processes are critical to the success of a CV-CBPR project in which two major
48
49 cultures are merging, providing a sense of patience with the research process used by universities,
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51 and managing differential expectations in translational versus research documents. Assessing
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53 stakeholder views on all aforementioned items may need to be repeated after the initial
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3 stakeholder formation process, such as when developing project management tactics and during
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5 research dissemination. For example, a large amount of time was invested in holding meetings
6
7 with and listening to staff members at the Governor's Office on Elderly Affairs, service
8
9 providers, church leaders, and executive directors of Councils on Aging in the affected areas of
10
11 Hurricane Katrina. Likewise, Elders and tribal authorities desired documents that assisted them
12
13 with obtaining funding for local program and services.
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18 Although community members may serve as co-investigators, staff members,
19
20 interviewers, translators, and field leaders, training in research ethics, project responsibilities,
21
22 and policies are needed for community partners, especially those serving as co-investigators,
23
24 interviewers, translators, and key informants. The sociopolitical and economic context of Alaska
25
26 is influenced by village traditional councils, more than 200 tribal corporations, and 12 or 13
27
28 regional corporations (Alaska Department of Natural Resources, n.d.); the corporation system
29
30 was established to protect the interests of Alaska Native People. The unique use of corporations
31
32 versus tribes alone beckons the need for oversight by communities. Stated differently, review by
33
34 participants, traditional councils, and sometimes corporation ethics boards are needed to ensure
35
36 accuracy and a cultural-sensitive lens to the analysis and reporting of data.
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41 Likewise, research team members benefit and need training in the written and unwritten
42
43 cultural and traditional norms that shape the lives of the community partners. By attending and
44
45 participating in community activities, researchers also show respect and foster a deeper sense of
46
47 understanding of the data and participants' lives. Visiting communities 2 or 3 days before the
48
49 start of the project also permits team members to observe and engage with community members,
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51 participate in or assist with community activities, and strengthen relationships with key
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53 community leaders. For example, in the Hurricane Katrina project, one principal investigator
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3 who resided in Baton Rouge facilitated project management and trainings. Another arrived two
4 days in advance of meetings and data collection to visit Hurricane Katrina sites and transition
5 into project management.
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10 Extra time must also be invested in maintaining respectful, trusted, and stable primary
11 stakeholder relationships and to manage culturally aware practices at all or most levels of
12 community-based projects. For example, time is needed for transparent communication so that
13 researchers can actively engage community partners and secure ongoing advice and guidance.
14
15 Before the grant proposal is submitted, before the project begins, and throughout the project, all
16 stakeholders must agree on appropriate methods, project goals, deliverables, research ethics, and
17 relationship processes that promote respect and power-sharing. Relationship processes include
18 how to demonstrate respect, enter communities, and manage tasks (Buchanan, Miller, &
19 Wallerstein, 2007). A common question posed at every collaboration-focused Hurricane Katrina
20 meeting was: Where are you from? The cultural norm of connectedness and identity affected the
21 level of community cooperation and support rendered to the disaster survivor study.
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36 *Identification of priorities and corresponding items.* Identifying priorities and related
37 items among the primary group of co-creators begins with the stakeholder's identification of
38 priorities (e.g., data collection, community engagement, translational tools or intervention
39 activities, manuscripts), and conducting the community assessment. These priorities are not
40 necessarily "problems" to be solved, but they must be important to both the community and
41 family professionals. Studying grandparents rearing grandchildren is an academic task. The loss
42 of traditional values, roles, and ways of living and the future of their tribes, communities, and
43 culture inspired the participation of governing authorities and Alaska Native grandparents raising
44 grandchildren. Documenting the lives of Elders who were grandparents was way of keeping
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A CULTURAL-VARIANT APPROACH TO CBPR

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3 traditions that were dear to them. The research team’s goals were to enhance and support existing
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5 community programs, activities, and preventive or intervention initiatives that the community
6
7 identified as concerns while contributing to the knowledge base on grandparents and advancing
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9 research on arctic family life. Doing both—engaging respectful community-partnering and
10
11 cultural-variant practices—takes time, planning, and a commitment beyond funding.
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16 Once priorities are identified, researchers and prospective participants meet to formulate
17
18 research or program evaluation questions and to determine research methods (e.g., quantitative,
19
20 qualitative, mixed). For instance, in the Hurricane Katrina project, the principal investigators met
21
22 with key community groups, such as the Governor’s Office on Elderly Affairs, the directors of
23
24 the Councils on Aging, and disaster relief managers at local churches. Because the
25
26 aforementioned groups worked with older adults across the state, they saved time for the
27
28 Hurricane Katrina research team by helping to identify participants, selecting interview sites, and
29
30 providing interviewers who were “insiders” to the respective communities. From a cultural-
31
32 variant lens, a greater understanding of the needs of survivors was strengthened by having
33
34 trained interviewers who understood the southern culture of Louisiana and dismantled
35
36 geographic areas. The collaborations with Councils on Aging, churches, Catholic diocese, and
37
38 other community groups also helped to outline useful educational tools and activities on disaster
39
40 preparedness for older adults.
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46 *Community assessment.* The focus here is on the actual partnering community as opposed
47
48 to all of the primary stakeholders. The community assessment is similar to the stakeholder
49
50 assessment in terms of assessing strengths, needs, capacity, and goals (Berge et al., 2009);
51
52 however, it focuses on a well-defined community and wellness goals within that community. The
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54 policies and requirements of primary stakeholders influence the community partnership. The
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community assessment addresses the readiness of the community to engage in a long-term project (Andrews, Cox, Newman, & Meadows, 2011) and must prevent any undue burden on the community (ARCUS, 1999). The Hurricane Katrina research team recorded and sought resources to meet participants' needs, had caseworkers from Councils on Aging make site visits during data collection, and brought other services to trailer communities, such as bringing those who conduct Medicare Plan C registrations to the community of Hurricane Katrina survivors. Likewise, working in partnership with Alaska Native People meant planning research and dissemination trips with an understanding of the weather; respecting hunting, fishing, and gathering seasons; and selecting dates that did not interfere with the annual convention of the Alaska Federal of Natives, as well as tribal or regional conferences. The grandparents rearing grandchildren research team respected the traditions and religious practices of the community. For example, respect for the month-long and other related bereavement practices limited the research team's ability to conduct interviews, travel into the community, and disseminate findings. The team engaged with communities 4 to 5 months in a calendar year due to the nearly 4-month hunting, fishing, and gathering season; the duration of engagement is thus different from that for most research projects.

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Additionally, community members have work and family responsibilities that influence their capacity to manage the tasks of shared power and decision-making (Fisher & Ball, 2003). The assessment and overall project methods are done in a cultural-variant manner, meaning that professionals purposefully examine embedded characteristics of resilience, cultural traditions, values, norms, adaptive behaviors, survival, and more (Henderson et al., 2015). The community assessment also includes approaches to promote social change based on the consensus of the

A CULTURAL-VARIANT APPROACH TO CBPR

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3 community and researcher. Varying methods may be used to conduct the partnering community
4 assessment, including focus groups, community, or town hall meetings, and project meetings.
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8 *Implementation of the project.* The goals of many projects are to collect data, analyze and
9 store it, and perhaps to implement a program. Meeting research or project goals requires the
10 creation of relevant research questions, appropriate sampling strategies (Israel et al., 2013;
11 Minkler & Wallerstein, 2008), and culturally sensitive practices that include honoring cultural
12 traditions and norms. Family professionals can demonstrate cultural sensitivity by recognizing
13 stereotypes, choosing the best entry approaches, or finding optimal locations to hold a program.
14
15 The best approach may require additional meetings, or interviews or focus groups with
16 participants, community leaders, and stakeholders. After Hurricane Katrina, millions of people
17 found themselves homeless and experiencing the ambiguous loss of culture and place. Almost
18 three quarters of the estimated 1,833 deaths were older adults (Gibson, 2006). Listening to and
19 respecting survivors motivated the production of translational science (i.e., videos, disaster
20 planning checklists, and workshops on disaster planning), which slowed the scholarly
21 productivity of the Hurricane Katrina research team. From a cultural-variant lens, some activities
22 need to be done before and while completing the study and publications.
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41 It is critical to determine who owns the data when the findings are grounded in a cultural,
42 historical, and sociopolitical context of social equity. The review of findings is critical to
43 establishing and maintaining trust, respect, and community autonomy. Buchanan and colleagues
44 (2007) addressed the sometimes-delicate challenge of informed consent that may clash or impose
45 on community autonomy. In the Alaska project, a history of distrust of researchers, the self-
46 governance and autonomy among sovereign indigenous groups (H. S. Smith, 2013), and the
47 complicated aspects of a well-defined CBPR project required a level of cultural sensitivity far
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A CULTURAL-VARIANT APPROACH TO CBPR

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3 beyond the Hurricane Katrina project in which Western ways dominated the work of the research
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5 team. The Alaska Area Institutional Review Board, tribal council and ethics committee reviews,
6
7 and coordinating committees had oversight of the grandparents raising grandchildren project in
8
9 Alaska. Agreed-on solutions to balancing community autonomy and research ethics, such as
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11 mandatory reporting of threat or harm, acquiring a certificate of confidentiality, and memoranda
12
13 of understanding were used to weave cultural sensitivity—honoring traditional values of
14
15 optimism, unity, honesty, respect, humor, spirituality, and more—with explicit respect for tribal
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17 autonomy, self-governance, and self-determination throughout the Alaska Native project.
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22 In other words, researchers engaged in the Alaska Native CBPR project formalized the
23
24 use of a strengths-based lens, which moved the study from a researcher-directed project to a
25
26 researcher–community partnership. The IRB application, memorandum of understanding, and
27
28 guidelines for the coordinating committees or Participant Advisory Group supported consistency
29
30 in practice and relationship stability. These formal documents outlined deliverables (e.g., project
31
32 reports, translational documents, and scholarly articles), roles and expectations, and the
33
34 construction of trust and transparency for the research team and the community.
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39 Special occasions, disasters, deaths, and other responsibilities emerge for the community
40
41 or participants and the researcher; project interruptions are a major factor in project management.
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43 For example, researchers followed grant and IRB requirements, were sensitive to the needs of
44
45 Hurricane Katrina survivors (e.g., family caregiving, support services, lodging, health care, basic
46
47 resources), and respected their survival priorities. However, 6 to 10 months after Hurricane
48
49 Katrina, researchers also reported project challenges and interruptions. Scholars had to modify
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51 data collection processes, protect research quality, and address sample size and profile concerns
52
53 (Henderson et al., 2009). Similarly, severe weather; the death of an Elder; hunting, fishing, and
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3 gathering seasons; and other important community and individual commitments delayed projects
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5 in Alaska.
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8 *Analysis and review of the findings.* Researchers and communities collaborate to develop,
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10 analyze, review, and disseminate findings; addressing the usefulness of the findings to the
11
12 participants and their communities is an important part of enhancing community capacity,
13
14 promoting healthy human development, and expanding the knowledge base. In Alaska, the
15
16 coordinating committee assisted with the creation of the questions, outlined the research
17
18 publications, and identified translational documents based on study findings on traditional
19
20 knowledge, values, and roles (e.g., see Henderson, Dinh, Morgan, & Lewis, 2015). In other
21
22 words, basic and translational research was not driven by the research team, but by cultural
23
24 values and the desire to document, honor, and advance Alaska Native ways.
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29 To go further, community members and participants were instrumental in ensuring that
30
31 the data were interpreted accurately, and not from a pure methodological stance. The
32
33 coordinating committees, governing authorities, and traditional councils reviewed and guided our
34
35 interpretations of findings throughout the coding and manuscript development processes.
36
37 Cultural truths and terminology were important, especially given the lack of literature in
38
39 mainstream journals about Alaska Native People.
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44 *Dissemination of scholarly and translational documents.* One of the most important
45
46 differences between CBPR and traditional research methods is that the CBPR research process is
47
48 endowed with respect for the traditions, culture, and meanings participants or communities give to
49
50 their experiences. Family professionals using a CV-CBPR focus design mutually beneficial
51
52 translational documents, develop activities and programs that address the mutually agreed-on
53
54 immediate and identified need, along with the required or expected scholarly and professional
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A CULTURAL-VARIANT APPROACH TO CBPR

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3 articles. Because scholarly and translational works are expected by universities and federally and
4
5 state-funded governmental agencies, it is important for researchers to work with the community
6
7 to design activities, programs, and basic and translational documents that serve the community's
8
9 best interests. Translational works truly broaden the impact of the project findings and inspire
10
11 social change; however, these documents are primary, not secondary, to research.
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15 Responding to immediate community needs is an added feature of the CV-CBPR
16
17 approach. Cultural-variant professionals develop articles and translational documents that meet
18
19 the needs of the community and the profession; they engage in activities that honor the culture
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21 and norms of the participating community. Translational documents may include evidence-based
22
23 policy briefs, fact sheets, white papers, videos, and podcasts. From a culturally variant lens,
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25 translational documents at the community-level may include posters, bookmarks, and
26
27 presentations, which was the case in the Alaska project. In the case of the Hurricane Katrina
28
29 project and to address disaster preparedness, the team developed a checklist for disasters (see the
30
31 Disaster Preparedness Checklist; Henderson, Miller, Hendrix, & Dinh, 2010), coordinated three
32
33 videos on how to prepare older adults for disasters (Oklahoma Geriatric Education Center, n.d.),
34
35 and conducted presentations in coordination with the Louisiana Councils on Aging focused on
36
37 disaster preparedness for older adults. The Department of Social Services, American Red Cross,
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39 insurance companies, realtors, and international medical researcher have used the checklist. The
40
41 checklist also was made into a fillable form, which extends the usefulness of this translational
42
43 tool to others. Taken together, the CV-CBPR model opens doors to engaging in cultural-variant
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45 projects, creating basic and translational documents, strengthening trusted partnerships, and
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47 positioning partners to obtain meaningful and accurate findings.
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SUMMARY

A CULTURAL-VARIANT APPROACH TO CBPR

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3 The lessons learned from the management of the Hurricane Katrina and the Alaska Native
4 grandparents rearing grandchildren projects generated considerations and suggestions offered to
5 family professionals. We have described how cultural-variant practices enhance community
6 engagement and expand basic and translational family science using two project management
7 experiences: a community-focused disaster project with older survivors of Hurricane Katrina,
8 and a CBPR arctic-climate project with Alaska Native grandparents rearing grandchildren. Both
9 projects dealt with issue of race, age, social constructions of poverty and class, and otherness,
10 which were central features to the life course context of older Hurricane Katrina survivors of
11 Louisiana and Alaska Native grandparents raising grandchildren residing in an arctic
12 environment.
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27 The CV-CBPR model situates culture, cultural sensitivities, and inclusion at the core to
28 create a systemic, purposeful model that focuses on strengths, adaptations, and challenges in
29 multiple contexts of individual and community development. Cultural-variant family
30 professionals seek to understand the meanings that participants give to their lives and
31 experiences. Professionals using this model explicitly apply CBPR, Belmont, and inclusive
32 practices of social conscience in their community-based projects. Professionals who view culture
33 as a central feature of understanding development may use the CV-CBPR model as a tool to
34 generate new ideas for community collaborations, produce translational science, positively shape
35 family and community development, and support social change.
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48 With the guiding primary principles, the cultural-variant CBPR model explicitly
49 incorporates culturally sensitive practices into research grounded in community engagement,
50 making it a centralized and explicit component of basic family and translational science. It is
51 taking community engagement to a heightened level of social conscious and ethical practice.
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Consequently, the cultural-variant model commits family professionals to inclusive practices, transforming basic and translational research or tools as co-creators. Family professionals have the opportunity to be more directive in using a culturally sensitivity lens in projects by rejecting deficit models; examining development in multiple contexts; becoming familiar with and seeking to understand the culture, norms, and traditions of the community; and respecting all forms of knowledge. There are additional opportunities to document inclusive research and program practices by taking advantage of opportunities to transform the literature and programs that shape individual, family, and community development and expand the impact of evidence-based practices. New ideas may be generated by collaborating with communities in a culturally variant way, such that the meanings of culture, traditions, history, development, resilience, context, adaptive behaviors, and challenges become better understood.

AUTHOR NOTE

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1
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5 assistance with the Katrina project.
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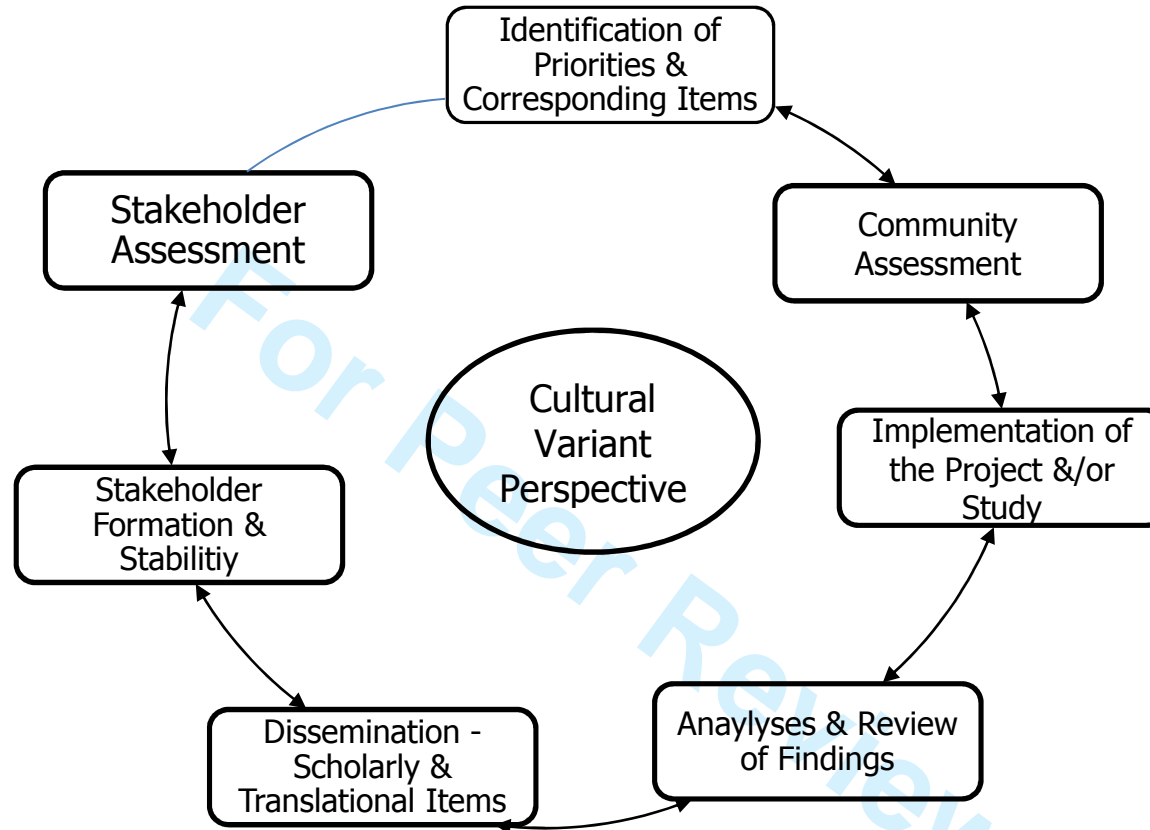


Figure 1. Cultural-variant community-based participatory research model. Note. Adapted from Israel, Coombe, & McGranaghan (2010).