A COMMUNITY-BASED EVALUATION OF A CULTURALLY GROUNDED, AMERICAN INDIAN AFTER-SCHOOL PREVENTION PROGRAM: THE VALUE OF PRACTITIONER-RESEARCHER COLLABORATION

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Abstract: Programs serving American Indian (AI) youth are an important component of maintaining cultural identity and healthy lifestyles. The current research took a community-engaged approach to evaluate an urban AI youth after-school program that has transitioned into a culturally grounded prevention program. Ways to create a successful research collaboration between AI communities and academics is discussed as well as implications for understanding the importance of culturally-grounded programs for AI youth who reside in urban areas. Overall, the cultural and health components that are integrated into the after-school program were highlighted as primary strengths because they help foster a healthy lifestyle and deeper connection to the heritage/culture for the youth who participated.

INTRODUCTION

Research indicates that American Indians (AI) endure many difficulties as they attempt to thrive in a mainstream culture that is markedly different from their own cultural beliefs and practices (Garrett et al., 2014). This is particularly true for AIs who reside off the reservation in urban settings due to forced immersion into mainstream U.S. culture and an experienced disconnect from native lands, family members, language, and culture (Brown, Dickerson, & D'Amico, 2016; Garrett, Bellon-Harn, Torres-Rivera, Garrett, & Roberts, 2003; Schweigman, Soto, Wright, & Unger, 2011). These differences in culture often are not compatible with one another and can result in further difficulties in navigating these distinct worldviews. Other challenges include poverty and differing health disparities which impact this population at a disproportionate rate (Weaver, 2012). These include elevated rates of behavioral health issues such

as substance use and suicide. Many of these disparities stem from factors such as early trauma and childhood abuse, cultural displacement, unemployment, discrimination, and poverty within AI communities (Rieckmann, et al., 2012). Additionally, AIs have some of the highest rates of chronic health diseases, accidental death, and other comorbid conditions. To further compound the problem, AI individuals have limited access to resources and health care, which can cause more issues pertaining to these disparities (Rieckmann et al., 2012).

AI youth, similar to their adult counter-parts, show increased risk for a number of health-related issues including use of tobacco, alcohol, and drugs; mental illness; and suicidal behaviors (Langdon et al., 2016; May, Serna, Hurt, & DeBruyn, 2005; Rieckmann et al., 2012; Sarche & Whitesell, 2012; Schinke, Tepavac, & Cole, 2000; Weaver, 2012). To address these issues within the AI community, research has often focused on the concept of cultural identity. The promotion and maintenance of cultural identity has been associated with a number of positive youth outcomes including better physical and psychological health, school success, and suicide and drug use prevention (Friesen et al., 2014; Herman-Stahl, Spencer, & Duncan, 2003; Jones & Galliher, 2007; Schinke et al., 2000; Whitbeck, Hoyt, Stubben, & LaFromboise, 2001; Schweigman et al., 2011). There is general consensus amongst the literature that a strong cultural identity positively impacts youth because it allows them to place their own experiences within a historical perspective and promotes an awareness of "…how the past, present, and future are tied together" (Friesen et al., 2014, pg. 4; Wexler, 2009). Underlying this historical perspective is an understanding of historical trauma associated with AI populations across the United States and how their torrid history of colonialization and forced assimilation has impacted intergenerational trauma outcomes (Walls & Whitbeck, 2012; Ehlers, Gizer, Gilder, & Yehuda, 2013).

The Role of Culturally Grounded and Indigenous Prevention Programs

In order to promote cultural identity and subsequently assist in the prevention of adverse health outcomes for AI youth, two approaches to prevention programs have been developed. Culturally grounded programs start within the targeted community and are built "…from the values, behaviors, norms, and worldviews of the populations they are intended to serve" (Okamoto, Kulis, Marsiglia, Steiker, & Dustman, 2014, pg. 2). Culturally grounded programs take a bottom-up approach and are situated within a collaborative relationship between researchers and community partnerships where both groups work together to develop a culturally appropriate evidence-based prevention program (Lauricella, Valdez, Okamoto, Helm, & Zaremba, 2016).

Indigenous prevention programs, while also being derived from the ground up and have a foundation in cultural values and practices, do not incorporate researcher/academic involvement, but instead rely solely on community stakeholders to develop the program (Lee, Vu, & Lau, 2013). Literature on Indigenous approaches is far more limited than culturally grounded approaches, likely due to the absence of researchers who typically publish the work.

Lauricella and colleagues (2016), in their literature review of minority youth culturally grounded prevention programs, acknowledge the variety of Indigenous culturally grounded programs for youth that have been studied, and they suggest additional research on effective prevention methods for this group. Additionally, Lauricella et al. (2016) build on other research that emphasizes the importance of community-based participatory research (CBPR) strategies for building culturally grounded programs in minority communities. CBPR has been shown to be an effective tool for building a collaborative and engaged partnership between AI communities and academics to promote the end goal of reduced health disparities (Langdon et al., 2016; Stacciarini, Shattell, Coady, & Wiens, 2011; Wallerstein & Duran, 2006). Lastly, the systematic literature review by Lauricella et al. (2016) identifies that most culturally grounded programs reside within rural communities, likely because of the diversity in cultures present in more urban settings, which can be a challenge to the development and sustainability of culturally grounded programs.

Pathways Youth Program

Pathways youth program (referred to as Pathways throughout remainder of the paper) is an after-school program of the Native Americans for Community Action (NACA), which is a non-profit organization serving AIs in northern Arizona. Pathways is free of charge and relies heavily upon external grant funding from the Indian Health Service (IHS) and the United Way. The program was originally developed over thirty years ago using an Indigenous approach with a curriculum developed by individuals within the community organization without input from researchers/academics. Over time, the program staff members have worked with various academic entities to enhance programmatic content while still prioritizing cultural values, norms, and practices. Currently, the program has a strong partnership with an academic institution to assist it with further curriculum development and evaluation, thus it has now crossed-over into a culturally grounded program.

Pathways serves elementary and middle school-aged (5-13) AI youth who are considered "at-risk" and live off-reservation in urban areas. In a fiscal year, the program staff interact with

approximately 90 children, with regular, consistent program attendance of around 40 youth. The participants in the program are considered "at-risk" due to factors such as low self-esteem, academic underachievement, inadequate support systems, parental instability, accessibility of alcohol/drugs, etc. Some of these difficulties may also stem from unresolved trauma caused by cultural assimilation, forced relocation, livestock reduction, and other modes of institutionalized discrimination occurring over multiple generations (Walls & Whitbeck, 2012; Ehlers et al., 2013). In order to best combat this historical trauma, Pathways is a multi-faceted program with an emphasis on substance abuse resistance while also promoting various life skills which foster personal growth and overall wellness.

Pathways is structured as a non-traditional after-school program in that it has designated time for free play and homework instruction/tutoring similar to other after-school programs, but it also incorporates *culturally appropriate* programmatic content on substance abuse and whole-body wellness, including physical fitness, nutrition, and healthy lifestyle choices. It is estimated that 150 curricular sessions take place in a fiscal year. The program operates Monday through Thursday from 2:30-6:00. In the past, children could attend every day, but given the demand for participation in the program and to allow more children the opportunity to participate, attendance is capped at two days a week. The foundation of the program is rooted in a commitment to promoting Indigenous cultural identity. The targeted outcome of the program is increased resiliency in AI youth through the Developmental Assets framework and approach to youth development (Benson, 1997). Resilience for the purposes of Pathways incorporates increased self-esteem, understanding a holistic view on healthy living including risks associated with substance abuse, and skill-building in decision-making, conflict resolution, and effective communication. The mechanism to build resilience is specific programming that supports AI youth in academics, enrichment activities, healthy lifestyle options, and AI language and culture.

The Pathways curriculum is designed to give the students many opportunities to learn about and practice the uniquely special aspects of their Indigenous cultures. From learning how to introduce themselves by clan in their native language, to learning winter "coyote stories," to practicing weaving, beading, and moccasin making, the participants remain actively engaged in many aspects of their culture, which serve to strengthen their self-worth and ability to make positive life choices. The program also has a strong academic component and receives weekly academic progress reports from a majority of participants' teachers, which guides the need for tutoring or homework assistance. The academic assistance that Pathways provides helps build the

students' academic confidence and alleviates some homework-related stress for the students and their families. Overall, Pathways strives to be a multi-level, effective after-school program for AI youth in which the participants feel welcomed, heard, and supported in an environment that values and celebrates their heritage.

Current Research Objectives

This article describes using a community-engaged approach to evaluate (via parent/caregiver satisfaction surveys) an AI-serving after-school program that has transitioned from an Indigenous to a culturally grounded program. The primary objective is two pronged: 1) describe what elements are key to a successful research collaboration between AI communities and academics and 2) highlight the results from the research collaboration that emphasize positive attributes of a culturally grounded after-school program for AI youth.

METHODS

Process for Project Set-up

The development and implementation of a collaborative project with a community partner was funded by an external grant from the National Institute on Drug Abuse aimed at training graduate students in behavioral health and translating research into practice. The first step was for the academic team to make contact with the community partner (Native Americans for Community Action; NACA) to gauge interest in building a collaborative group that would work toward developing and implementing a research project that would serve the needs of the community organization. The initial contact was made by the Principal Investigator (PI) of the grant who had worked previously with NACA. In addition, our academic institution has had a long-standing working relationship with NACA, so the groundwork had been laid to build upon a trusting relationship. After a number of in-person meetings and contact via phone and e-mail, the community organization suggested Pathways would be a good fit in terms of need and guidelines set forth by the funding agency. The collaborative team included several key people from NACA: the CEO, the clinical director of behavioral health, and the program manager for Pathways, as well as from the academic institution: one of the principal investigators, a faculty mentor, and graduate students. The entire team initially started to brainstorm specific project ideas based on the needs of Pathways. These discussions were led by the program director and entailed a thorough history

and description of Pathways with a focus on the program's mission and values. Practicality was also a central component of the conversations as both the community partner and academic team wanted to construct a feasible project that could provide meaningful results that the community organization could use to garner future support for the continuation of the after-school program. Through these conversations, the program manager emphasized two primary needs: 1) the program was short-staffed and could use assistance in the programming component for the youth, and 2) the program director wanted to know how the parents/caregivers who had children in the program felt about various aspects of the program and where it could be improved. The program director also specifically requested an evaluation to gauge if the parents/caregivers felt that the program was meeting the needs of the AI community. The academic team then took the lead on turning the verbalized needs of Pathways into a practical research project. A three phased approach to conduct an evaluation of the program was proposed and met with great enthusiasm by the community partner. The three-phase approach was structured as follows: Phase I – Participant observation and direct programming; Phase II – Parent/caregiver and staff interviews; Phase III – Survey evaluation.

Setting

There were two settings involved across the three phases. Phase I (observation and programming) and Phase III (survey) were completed at elementary schools where Pathways is held. The program has access to classrooms, the gym, and the playground, and both phases took place within those locations. Observation of the program, providing direct programming for the youth, and the implementation of the survey all took place at the elementary school.

Phase II (parent/caregiver and staff interviews) was completed over the phone to make participation as easy and convenient as possible.

Instruments

Two primary instruments were developed for the project. The collaborative team worked together to create interview questions for both the parents/caregivers (19 open-ended questions) and the Pathways staff (11 open-ended questions) that focused on identifying the perceived strengths and weaknesses of Pathways. The interviews were conducted using a semi-structured interview method. Additionally, the collaborative team worked through a multi-stage process to

create a survey evaluation instrument. This involved many rounds of back-and-forth conversations between the academic team and the community partner where drafts of the survey were tweaked and revised to ensure appropriate language was used and content was covered. The final survey consisted of 35 Likert-style questions ranging from (1) Strongly disagree to (5) Strongly agree and (6) Don't know. Four open-ended questions were also included: What do you think is your child's favorite part of Pathways?; As a parent, what do you appreciate most about Pathways?; Have you or your child ever had a negative experience with Pathways?; and Is there anything specific you would like to see changed regarding Pathways? All Likert-style questions were worded in an affirmative way such that a rating of (5) Strongly agree represented that the program was doing a good job in that area. Questions were categorized into eight areas of investigation: child engagement, cultural component of program, emotional well-being component of program, positive socialization, programmatic content, programmatic values, programmatic structure, and general assessment of the program. The survey was administered via hard copy form to parents.

Procedures

Phase I

Phase I consisted of conducting observations of Pathways and providing direct programming for the youth. Observations and programming took place two days a week for an hour over four weeks. The purpose of these activities was to use the observation of the program and the direct interaction via programming responsibilities to experience and learn about the program first-hand and, more importantly, build rapport with staff and youth involved in the program. Additional observations and site visits were continued throughout the next six months, but in a much less formalized manner, in an effort to continue to strengthen the relationship between the academic team and community partner. Members of the academic team spent approximately 50 hours of time observing, prepping, and programming with the youth in Pathways.

Observations consisted of the academic team being present during the normal functioning of the program and observing activities, interactions, structure of the program, etc. Detailed field notes were taken electronically using an app on a cellular phone, and those notes were later uploaded into a word processing program. The academic team regularly debriefed following observation time. Field notes were used for ethnographic purposes in that they were used to describe the population, culture, and program values. Direct programming consisted of the academic team leading educational activities for the youth that focused on culturally relevant

factors of self-esteem, decision making, and healthy lifestyle choices. The community partner expressed particular interest in developing programming in these specific areas. The programming piece was a vehicle to get access to the program and contribute in a meaningful way to the community organization to continue to strengthen the collaborative relationship.

Phase II

Phase II involved interviewing parents/caregivers and staff associated with Pathways to gather qualitative data to compliment the quantitative survey data in Phase III. All interviews were conducted via phone and recorded for research purposes. The academic team interviewed the program director of Pathways, one Pathways staff member, and seven parents/caregivers who have children enrolled in Pathways. Pathways staff were identified for interviews based on their degree of involvement with the program. It is important to note that at the time of the interviews, the program only had two consistent staff members along with other volunteers who come on an intermittent basis. To recruit parents/caregivers, the academic team created a flyer to distribute to parents/caregivers upon picking up their children that requested their participation and contact information. Interviews took place over the phone and were scheduled at the convenience of the parent/caregiver. Participants were required to agree to a verbally provided consent to participate, which involved informing the parent/caregiver that participation was completely voluntary, that all information provided would remain confidential, and that no personal identifying information would be collected. Once he/she consented to participate, he/she was given a pseudonym of "Parent 1," "Parent 2," and so on for data collection purposes. Interviews were then conducted in a semi-structured way with 19 open-ended questions. Upon completion of the interviews, transcriptions were completed from the recorded interviews to appropriately code and identify themes in the analysis phase.

Phase III

Phase III incorporated the development and implementation of a parent/caregiver satisfaction survey to quantitatively evaluate Pathways. The academic team used the information collected in Phases I and II to develop a first draft of a survey. In particular, the academic team used the data gleaned from the observations and interviews to construct specific questions about the program. For example, both observations and interviews identified the importance of health education that was culturally appropriate, thus a specific question was created to formally assess that. The survey went through numerous iterations as the community partner and academic team

worked collaboratively to cover all aspects in an appropriate way. This collaborative process was conducted in order to have individuals with a deep knowledge of the program provide feedback on the content of the survey and also ensure that it aligned with and covered all of the areas that they were interested in investigating. Once the informed consent and content of the survey was finalized, the collaborative group worked together to construct a plan for optimal return rates of the hard copy surveys. To facilitate completion of the survey by parents/caregivers, it was handed out at program pick-up time with both members of the academic team as well as the program coordinator present to answer any questions and explain the purpose of the survey. Parents/caregivers were given the option to complete the survey in person or take it home. If they took it home and returned it later, the program manager collected and stored the informed consent forms and survey responses separately to ensure anonymity. The surveys were available for completion for approximately three weeks. At the end of those three weeks, the collaborative team decided it would be useful to do a distribution and collection of the survey at a social event being held by the team as a thank you to youth and parents/caregivers involved in the program. The collaborative team explained the survey's purpose at the social event and asked for people to voluntarily complete it. All survey data were entered into a separate Excel file (with no identifying information) and eventually transferred to an SPSS file for analysis purposes.

RESULTS

Phase I

In Phase I, the academic team successfully built rapport with the organization, assessed areas for development, and observed cultural norms and practices that are foundational components of the program; all of which were imperative to building Phases II and III of the project. Large themes drawn from the observations included 1) youth enjoyment and engagement in traditional cultural practices such as beading and making frybread; 2) the importance of having positive interactions with adult mentors, including AI matriarchs like grandmothers, who volunteered with the program and staff within the program; 3) youth interest in discussing issues related to health and wellness and sharing their personal experiences on those topics; and 4) the occasional use of gendered language and activities such that playing basketball was reinforced for boys and not for girls (one example). The hands-on time spent with youth and staff in the program in this phase was integral to the success of this partnership and project. Phase I was critical because

it established and strengthened a relationship of trust between the academic team and the community organization, program staff, and the youth who participate in the program. Additionally, Phase I allowed parents/caregivers who had children in the program become familiar with the academic team members which, in turn, created an environment where they were more willing and able to assist with the future phases of data collection.

Phase II

A total of two Pathways staff were interviewed (including the program director) and seven parents. Qualitative open coding was used to investigate major themes that parents/caregivers relayed throughout the interviews. The major themes were divided into two broad categories of 1) strengths of the program and 2) areas for improvement. Strengths of the program included the program's adherence to and incorporation of cultural values and practices, the programmatic component, the socialization component, the structure of the program, and the staff (see Table I). Areas of improvement included the desire for more space, availability, awareness, and creating a more gender-neutral environment (see Table 1).

Table 1
Phase II Strengths and Weaknesses of Pathways Program

Strengths
Definition = qualities of the program described using positive language by the parents

Cultural Component	*I like [Pathways] because being Native American and living off the reservation. I don't have the opportunity to expose my child to cultural aspects just because we live off the reservation. I like that Pathways introduces some cultural aspects to my daughter. (Interview 7)*
Programmatic Component	*[My kids] tell me about like what he learned at Pathways. I really liked the presentation that was done on cigarettes and tobacco. And he really like understood what they were talking about. And he's like only 7 years old. They tell him that smoking is bad but how they did a little project with them showing them like how to make a lung like your lungs out of a paper bag and showing the effects that a tobacco has on your lungs so you can feel like telling me basically everything you know. (Interview 4)*
Socialization Component	*I feel like there's more camaraderie with other kids. It just builds healthy relationship amongst their peers and with the adults there that are running the program. (Interview 6)*
Structure	*Oh so they go all year long and they're there when school starts and the way till school ends then the summer program as well. This is actually their I want to say their fourth year. (Interview 2)*
Staff	*You have that home feel when you get there. It doesn't even stop at Pathways. They give you a phone call, sometimes they just check in on you to see how you're doing, or to give you a heads up on upcoming events. They're more like family than they are just people who just work and their time ends. (Interview 3)*

Table 1 Continued
Phase II Strengths and Weaknesses of Pathways Program

Weaknesses
Definition = Qualities or criticisms of the program that were described negatively by the program

Space	*I think they don't have the funds to hire more people and the location is so small that where they're at if they have to make do with it. So what you said then yeah a bigger location. (Interview 2)*
Structure	*Like I said it's very popular in my community. That the fact that so much that we went from a whole week at pathways to just two days. (Interview 2)*
Awareness	*Yes, that's unfortunate that it's just something that some of the people in the community are unaware of, the education and the resources. (Interview 1)*
Gendered Structure and Language	*When some of these issues are brought to their attention, I mean it has this gentlemen's club and they just kind of like, 'Okay. We heard it.' Then, just leave it at that. (Interview 1)*

Phase III

The total number of parents/caregivers who completed the survey was 14, with 13 filling it out in its entirety. It is estimated that approximately 35-40 parents/caregivers were provided with the survey, giving a response rate of between 35-40%. Overall, for 23 of the 35 Likert-style questions on the survey, 100% of respondents said they agree (4) or strongly agree (5), meaning that parents felt positively about the program (see Table 2). The remaining twelve questions had varied responses, with most people responding that they agree (4) or strongly agree (5), and a few people responding with either neutral (3) or I don't know (6); (see Table 2 for additional details). There were two questions that had slightly lower agreement rates than the others, one of which had an agreement rating that fell below 50% (less than half of the respondents said they agreed (4) or strongly agreed (5) with the statement). These two questions were: "The program could be strengthened by including a behavioral/emotional health youth group offered one time a week" and "The program is currently free, but I would be able and willing to pay for my child to attend this program." For the behavioral/emotional health group question, 15% of respondents provided a neutral (3) rating, 62% said they agreed (4) or strongly agreed (5), and 23% said they did not know (6). For the question about willingness to pay, 7% of respondents said they strongly disagreed (1) with willingness/ability to pay for the program, 7% said they disagreed (2), 35% gave a neutral (3) rating, 43% gave an agree (4) or strongly agree (5) rating, and 7% said they did not know (6). Additionally, there were four open-ended responses at the end of the survey that echoed much of the numeric responses as well as the interview responses from Phase II.

Table 2
Phase III Parent/Caregiver Survey Responses

Areas of Investigation	Questions: "The NACA Pathways youth program…"	% Agree or Strongly Agree	% Disagree or Strongly Disagree	% Neutral	% I don't know
Child Engagement	Is something that my child talks to me about including things like what activities they complete and what they learn.	100	0	0	0
	Is something my child enjoys and looks forward to going to.	100	0	0	0
Cultural Component	Has a strong component of cultural identity and cultural value.	86	0	7	7
	Incorporates a sufficient amount of culture specific activities.	86	0	0	14
	Provides my child with accurate and culturally appropriate information regarding health and wellness.	100	0	0	0
Emotional Well-Being	Promotes my child's self-esteem and self-confidence.	100	0	0	0
	Encourages, develops, and instills resilience within my child.	100	0	0	0
	Encourages social emotional learning such as being able to express emotions and be empathetic.	86	0	0	14
	Helps my child learn positive coping and problem-solving skills such as deep breathing techniques.	79	0	7	14
	Encourages my child to express themselves in creative and artistic ways.	100	0	0	0
Positive Socialization	Promotes children's abilities to form positive peer relationships.	100	0	0	0
Programmatic Content	Incorporates the importance of physical fitness.	100	0	0	0
	Promotes healthy eating habits and nutrition.	100	0	0	0
	Provides educational information about substance use and abuse, as well as healthy relationships to my child.	86	0	0	14
	Has helped my child learn about the importance of not abusing substances - both legal (medication, cigarettes, alcohol) and illegal.	79	0	0	21
	Teaches my child about diseases and ways to prevent and avoid becoming ill (ex: washing hands).	79	0	0	21
	Engages the children in meaningful field trips (ex: Diamondbacks game).	86	0	0	14
	Incorporates age-appropriate activities that align with my child's level of development.	100	0	0	0
	Provides homework assistance and tutoring to students as needed	100	0	0	0
	Promotes career development and encourages the children to think about what they want to be when they grow up.	86	0	0	14
	Has guest speakers who come to present important and valuable information on a wide variety of health related topics.	77	0	8	15

Table 2 Continued
Phase III Parent/Caregiver Survey Responses

Areas of Investigation	Questions: "The NACA Pathways youth program..."	% Agree or Strongly Agree	% Disagree or Strongly Disagree	% Neutral	% I don't know
Programmatic Values	Promotes values of respect and kindness.	100	0	0	0
	Promotes inclusion and values each child's unique abilities.	100	0	0	0
	Is a positive environment and has a positive atmosphere.	100	0	0	0
	Teaches my child practical knowledge that they can apply to their everyday life and will be useful to them in the future.	100	0	0	0
Programmatic Structure	Could be strengthened by including a behavioral/ emotional health youth group offered one time a week	62	0	15	23
	Is an organized program.	100	0	0	0
	Promotes physical safety and takes appropriate safety precautions.	100	0	0	0
	Is led by highly qualified individuals who effectively instruct the children.	100	0	0	0
	Provides my child with structure and consistent expectations.	100	0	0	0
	Is currently free, but I would be able and willing to pay for my child to attend this program.	43	14	36	7
General assessment	Has helped my child grow and change in concrete and observable ways.	100	0	0	0
	Helps my child learn new skills and be successful.	100	0	0	0
	Overall is a valuable use of my child's time and has been a positive experience for my child.	100	0	0	0
	Is a program that I would recommend to my friends and family for other children.	100	0	0	0

Overall Findings

Results across all three phases of the project identified clear strengths of Pathways, including its commitment to promoting cultural identity; providing health education in a relevant and culturally driven way; having staff that are consistent, reliable, and trustworthy; and lastly, that the program is widely accessible because it is free. Results across all three phases also identified some possible areas for improvement for the program. Parents identified space and structural issues with the program, focusing on the desire for a bigger, nicer space for the program and for the program to serve children every weekday, instead of twice a week (the structure that is currently in place). Additionally, parents thought the program could be promoted more (evident through the interviews as well as survey responses) to the greater AI community as well as the promotion of the program's mission and values to the families that participate in the program.

Finally, there was a suggestion to incorporate and strengthen the use of gender-neutral activities and language into the program to make it more inclusive.

DISCUSSION

The primary objective of this paper was to describe what elements were key to a successful research collaboration between AI communities and academics and to highlight the results from the research collaboration that emphasize positive attributes of a culturally grounded after-school program for AI youth. In regards to the elements of a successful collaboration and community-engaged approach to a program that originated without researcher involvement (Indigenous approach), there are a number of points to underscore (see Table 3). Throughout the implementation of this project, both the academic team and the community partner were fully committed to making this a successful partnership where both groups could learn from one another to benefit the greater community. Upon initial meetings and conversations, it was imperative that the academic team listen to the expressed needs of the community partner, and specific to working with AI populations, it was critical for the academic team to have an in-depth understanding of the importance of cultural identity as it is represented in the youth after-school program. The community partner's willingness to allow full access to the program and openness to adopting a research design allowed the project to fully develop in a time efficient way. Similarly, a basic understanding and appreciation for evidence-based program evaluation on behalf of the community partner was important for the partnerships shared value system. Additionally, the rapport building through Phase I and hands-on time in the program built the foundation of trust and acceptance, which was necessary to complete the project. With an understanding of issues associated with historical trauma within Indigenous populations in the United States, hesitation to work with academic institutions is understandable and can only be overcome when genuine trust is established.

The collaboration between the academic team and the community partner, which was created through efforts mentioned above, led to the successful completion of the research project and produced findings that have implications for understanding the importance of culturally-grounded programs for AI youth. In this way, the partnership was valuable to both parties; the community partner was able to utilize the academic team's expertise in research methodology and program evaluation to identify the strengths and weaknesses of the program and make subsequent

improvements, and the academic team was able to engage in community-based research with an underserved population and contribute to a growing area of research. While the current work did not evaluate youth perceptions of the program or directly assess program effectiveness, it did assess parent/caregiver satisfaction with the program with a focus on the strengths and weaknesses. Overwhelmingly, parents/caregivers identified the cultural and health component of the program as strengths and expressed sentiments that these pieces fostered a healthy lifestyle and deeper connection to the heritage/culture, while most of the indicated areas for improvement centered on the need for more of the program. This is particularly meaningful in the context of the program serving urban, off-reservation youth.

Table 3
Recommendations for a Successful Practitioner-Research Collaboration

Role	Recommendations for Successful Collaboration
Academic Team/Community Partner	Commitment to a successful partnership
Academic Team	Listening to the expressed needs of the community partner
Academic Team	Understanding of the importance of cultural identity for Indigenous youth
Community Partner	Full access to the program and being open to research design
Community Partner	Understanding the value of evidence-based program evaluation
Academic Team	Rapport building that includes hands-on time in the program
Academic Team	Understanding of and appreciation for issues associated with historical trauma within Indigenous populations

Lauricella et al. (2016) identified that most culturally grounded youth programs were located in rural environments. Findings from this study indicate that culturally grounded prevention programs can positively contribute to urban AI communities as well. Parents/caregivers of youth in the program specifically identified the importance of emphasizing cultural identity and belonging for youth who reside off the reservation because they are less connected to tribal traditions and practices because of location. While Lauricella et al. (2016) offers that the diversity present within urban minority communities may pose a challenge to the building and sustainability of culturally grounded programs, these programs may be particularly beneficial to urban youth populations to promote a sense of identity, belonging, and connection to their culture.

Along with importance of a culturally grounded prevention program, parents/caregivers also highlighted the significance of committed and responsible staff and open accessibility such that they could take advantage of the benefits of the program at no cost. Both of these central parts to a successful program pinpoint the need for resources, both to run the program at no cost as well

as to be able to hire and maintain professional, invested staff for program continuity. All findings from this project were shared with Pathways staff and administrators and will be used to strengthen and continue to grow the program in feasible and meaningful ways. Additionally, the findings were shared with a larger audience of practitioners and scholars at a national conference in order to promote culturally grounded programs that serve AI communities. Due to the structure of the larger grant that supported the work, the collaboration between the researchers and the community partner is ongoing, and another project with Pathways is currently underway.

Limitations and Future Research

Pathways is a relatively small after-school program, in a singular location, serving specific tribal youth. Therefore, generalizability of findings is limited, but it is likely that the large overarching outcomes of this specific project are transferrable to other populations (i.e., the resounding strengths of the program are the cultural and health components, the committed staff, and the accessibility of the program). The limitation of non-generalizability and issues with replication are not unique to this program as these are characteristic of both Indigenous and culturally grounded programs. Similarly, while the response rate was relatively high for the survey, additional strategies could have been used to increase the number of parents/caregivers that completed the survey. For example, the social event hosted by the research team facilitated the completion of the surveys so additional events spread out over time may be a useful strategy for more data collection when working with community members.

Additionally, Pathways was not originally designed as a culturally grounded prevention program as it originated well before this term was readily used, and it was created by individuals within the community organization (no researcher/academic involvement). It also functions as a non-traditional after-school program. Thus, while it includes programming and curricular components associated with culture and prevention, it also incorporates free play, games, and academic tutoring/homework assistance. Still, it currently meets criteria for being considered a culturally grounded program because "methods are used in which curricular components evolve from the 'ground up'… and therefore look and sound familiar to the participants" (Okamoto et al., 2014, pg. 5; Marsiglia & Kulis, 2009). Additionally, Pathways has transitioned from being a strictly defined Indigenous program to a culturally grounded program through its collaborative efforts with researchers. Other partnerships that develop between academics and strictly defined Indigenous programs may also encounter a transition into a culturally grounded program if the

community partner seeks a collaborative relationship that focuses on evidence-based evaluations of their existing prevention program.

As described throughout this paper, this project focused on parent/caregiver perceived strengths and weaknesses of the program as evaluated through a three-phase process. While this information is valuable, it does not provide an evidence-base for the efficacy of the prevention curriculum. Future research, if the community organization is so inclined, should work toward direct assessment and evaluation of the curricular components of the program. As Okamoto et al. (2014) explain, culturally grounded prevention programs have some inherent challenges in regards to evaluation because it forces the program developers to be cultural experts who simultaneously are able to develop age-appropriate prevention curriculum. Typically, individuals involved in the development of a program have expertise in either cultural competency *or* age-appropriate curriculum. This is an area where the partnership between academics and community organizations can provide value-added by combining areas of expertise. This is a difficult feat, but critically important for "at-risk" populations, such as AI youth, who have a long history of health disparities and can benefit from an effective prevention program.

IMPLICATIONS AND CONCLUSION

The research collaboration between Pathways and the academic team using a community-engaged approach produced a successful first-step evaluation of the program, which highlighted parent/caregiver satisfaction with the programs commitment to promoting cultural identity and healthy lifestyles amongst AI youth. The transition of Pathways from a strictly Indigenous approach to a culturally grounded approach has created the opportunity to further strengthen the program with the incorporation of evidence-based practices and evaluations via ongoing partnerships with researchers/academics. Pathways provides a much-needed service to the AI community by seeking to prevent adverse health outcomes in youth through participation in an after-school program that fosters a deeper connection to their culture and people.

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