

**Third Cross-Cultural Health Care Conference:  
Collaborative and Multidisciplinary Interventions, February 8-9, 2013**

— Invited Speaker —

## **Community-Based Participatory Research (CBPR) with Native and Pacific Populations: Addressing Cultural Competency Issues**

Joseph Keawe‘aimoku Kaholokula PhD

The principles/aims of community-based participatory research (CBPR) are well-suited to address cultural competency in research for the following reasons: It accounts for the culture/diversity of a population when developing research ideas and conducting research and it ensures that the research has real-world applications and meets the target population’s socio-cultural/linguistic needs. The goals of CBPR and cultural competency directives share key aspirations, which include social justice and health equity, appreciation for diversity, critical thinking, open communication and dialogue, cooperation, and successful conflict resolution. CBPR approaches can also avoid the stereotyping of racial/ethnic and socially disadvantaged populations and account for important within-group differences and contextual factors (eg, socio-economic circumstances). A “best practice” model of CBPR in Native Hawaiian and Pacific Islander communities has emerged from the community-academic partnership of the PILI ‘Ohana Project (POP). The POP partners are the Department of Native Hawaiian Health at the University of Hawai‘i at Mānoa,

Hawai‘i Maoli of the Association of Hawaiian Civic Clubs, Kula no nā Po‘e Hawai‘i, Ke Ola Mamo, and Kōkua Kalihi Valley Comprehensive Family Services. POP’s mission is to eliminate obesity and obesity-related disparities in Hawai‘i. POP developed two culturally-relevant, community-placed, and evidence-based interventions: The PILI Lifestyle Program and the Partners in Care diabetes self-management program. Factors contributing to POP’s success are the shared vision, mission, and values of the community and academic partners, a co-equal and co-learning research environment, and mutual respect amongst the partners. As a result, the partners built the capacity, social capital, and critical consciousness necessary to effectively address their community-driven health concerns.

Conflict of Interest  
The author reports no conflict of interest.

Author’s Affiliation:  
- Department of Native Hawaiian Health, John A. Burns School of Medicine, University of Hawai‘i at Mānoa and Co-Director of the PILI ‘Ohana Project, Honolulu, HI