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Researcher Reflections on Early Childhood Partnerships with Immigrant and Refugee

Communities

Co-authors

Rebecca Georgis, Postdoctoral fellow   Rebecca Gokiert, Associate Professor

Community-University Partnership, Faculty of Extension, University of Alberta

Anna Kirova, Professor

Department of Elementary Education, University of Alberta

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The increased diversity in early learning and care settings in Canada and other immigrant receiving countries has deepened the need to engage immigrant and refugee families in research concerning their children's well-being. By conducting research *with* rather than *on* diverse communities, the research process and outcomes become culturally appropriate, relevant, and meaningful (Cargo & Mercer, 2008; Chavez, Duran, Baker, Avila & Wallerstein, 2008). In this chapter, we draw on our participatory research experiences in early childhood and discuss key learning from working collaboratively with immigrant and refugee communities in Western Canada. We begin by positioning community-based participatory research (CBPR) as a promising approach to research when working with culturally diverse communities and, through comparison with traditional forms of research, highlight some of its defining characteristics. We then draw on two case studies to provide and analyze examples related to the role of the researcher as a collaborative partner, and issues of power, ethics, trust, and community participation. The first case study examined cross-cultural approaches to screening and assessment and the second involved the development of an intercultural early learning program. Both case studies explored research questions related to cultural influences on learning and child development, were cross-sectoral collaborations, and involved working in an intercultural research space. We conclude with a summary of critical considerations for researchers who want to utilize CBPR to engage with immigrant and refugee communities.

Societal Context

Canada's foreign-born population constitutes 20.6% of the total population, the highest proportion amongst G8 countries (Statistics Canada, 2011). This diversity is reflected in the early

childhood population. Of children aged 0-5, 29% have at least one parent who is foreign-born

(Government of Canada, 2011). In the province of Alberta, where the two case studies took

place, 15% of kindergarten-aged children speak a first-language other than English (Early

Childhood Mapping, 2014).

Newcomer families with young children experience many challenges in accessing early

education opportunities for their children (Kirova, 2010). These include transportation

challenges, rigid income criteria which exclude families that struggle financially but do not meet

the income cut-off, language and cultural barriers that prevent parents from utilizing available

programs, lack of understanding of the realities of families dealing with multiple vulnerability

factors, and limited availability of culturally-responsive programs that honor children's first

language and culture (Ford & Georgis, 2011; Georgis, Gokiert, Ford, & Ali 2014; Isik-Ercan,

Demir-Dagdas, Cakmacki, Cava-Tadik; & Intepe-Tingir, 2016; Kirova 2010; 2012). Early

education programs are often modeled after majority culture expectations and tend to consider

differences in culture and lack of English language as a deficit rather than an asset (Kirova,

2010; 2012).

These deficit perspectives of immigrant and refugee children and families are reflected in

research. Research is a tool for understanding society, and as such, it can further marginalize or,

alternatively, empower communities. While much knowledge has been gained from research *on*

immigrants and refugees to-date, this body of knowledge is mostly reflective of dominant

societal perspectives. In challenging the knowledge gained from traditional research that

excludes the voices of immigrant communities, Ngo, Bigelow, & Lee (2014) note that

"frequently, immigrant groups are positioned as simply passive 'subjects' of a study, objectified

as heroes, framed as needy or to be pitied, or framed through deficit perspectives (e.g., lacking in

knowledge, skills, and resources)" (p. 2). CBPR provides an alternative approach to research that can critically challenge and counterbalance these deficit narratives by actively involving communities in co-creating knowledge that reflects their lived realities.

Community-Based Participatory Research

Rooted in Lewin's action research and Freire's anti-oppression tradition (Cargo & Mercer 2008; Cahill, Sultana, & Pain, 2007; Israel et al., 2008; Wallerstein & Duran, 2008), CBPR emerged as a research paradigm to bridge the research-practice gap and address social disparities. Unlike traditional research, which emphasizes researcher objectivity and value-neutral evidence, CBPR places emphasis on socially, culturally, and historically situated knowledge (Wallerstein & Duran, 2008). As an approach to doing research rather than a methodology, CBPR can encompass a variety of designs, methods, and tools (Cargo & Mercer, 2008; Israel et al., 2008). Participatory approaches have many defining features that set them apart from traditional research; three are highlighted below, as they are particularly salient in the two case studies.

Equitable partnerships

At the heart of CBPR is the notion of equitable partnerships between researchers and communities through a democratic process of engagement. Traditional research approaches place the researcher in a position of power as the expert holder of knowledge and communities as passive participants with little to contribute to knowledge generation. CBPR challenges these power disparities by placing value on experiential knowledge, active engagement, and inclusion of diverse worldviews. Community members or organizations are recognized as experts in their own lives, the people they serve, and the culture and context of their community. Thus, their

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involvement in the research is perceived as strengthening rather than threatening rigor (Cargo &

Mercer, 2008; Horowitz, Robinson, & Seifer 2009).

Community participation

CBPR approaches require researcher-community collaboration throughout the entire

research process, from conception of the research question(s) to data collection, interpretation,

and dissemination. Collaboration is founded on principles of co-learning, utilizing each

partner's' unique skills, and a commitment to mobilizing knowledge for action (Israel et al.,

2008; Wallerstein & Duran, 2008). In the formative stages of the research process, community

members participate in decision-making related to the research questions and design by

complementing the researcher's methodological expertise with their deep knowledge of

community priorities, protocols, local context, and cultural appropriateness of the research

methods/tools (Horowitz, et al., 2009). It is often the case that community members are hired as

research assistants, translators, or community liaisons to support data collection (Castleden,

Morgan, & Lamb, 2012). During data analysis, community participation enhances the

interpretation of findings by contextualizing community experiences in relation to systemic,

structural, and sociocultural community factors. An additional focus of CBPR partnerships is to

mobilize the findings beyond traditional forms of research dissemination (e.g., presentations at

academic conferences and peer reviewed publications) to inform practice or policy (Israel et al.,

2008; Wallerstein & Duran, 2003). Aligned with the equitable nature of the partnership,

community members often participate in the dissemination of knowledge as co-authors or co-

presenters (Horowitz, et al., 2009). It should be noted that each CBPR project is unique and

participation of community members/organizations in the different phases of the research

process may vary depending on available resources, trust, and relevance of the research.

Relational community ethics

Ethics is central to any research process; however, differences exist between participatory ethics and institutional ethics, which are often set in place by university Research Ethics Boards. Institutional ethics tend to place emphasis on protocols that protect individual participants with far less attention given to relationships between the researcher and the community (Cahill, Sultana, & Pain, 2007; Flicker, Travers, Guta, McDonald, & Meagher, 2007). While that is sufficient in most forms of traditional research (for relational ethics in qualitative research see Ellis, 2007), it becomes problematic in CBPR, which is founded on trusting relationships between the researcher and the community. Participatory ethics is about "doing research informed by an 'ethic of care' in its most profound sense as a deep respect for relationships and humanity" (p. 306; Cahill, Sultana, & Pain, 2007). Once relationships are built, they must be maintained throughout the research and, often, tend to extend beyond the life of the project (Israel et al., 2008). This requires long-term commitment from the researcher and community and the ability to adapt to the changing nature of the relationship over time (Ellis, 2007; Israel et al., 2008).

CBPR with Immigrant and Refugee Communities: Case Studies

In the two case studies that follow, we provide examples of how CBPR principles are operationalized in collaborative partnerships with immigrant and refugee communities. We borrow the concept of *contact zones*, which was used by Pratt (1991) in literary scholarship, to define the complex space where academic and community worldviews meet. According to Pratt, contact zones are the "social spaces where cultures meet, clash, and grapple with each other, often in contexts of highly asymmetrical relations of power, such as colonialism, slavery, or their aftermaths as they are lived out in many parts of the world today." (p. 34). Through a process of

reflexivity,we unpack our experiences in the research contact zone and reveal how we negotiated power, ethics, roles, responsibilities, and methodologies.

The first author, Dr. Georgis, was involved in both case studies while still a doctoral student. She was a research assistant, who supported data collection, analysis, and dissemination. Dr. Gokiert was the Principal Investigator (PI) in the first study and Dr. Kirova was the PI in the second study. Both studies involved other collaborators from academia and community. Dr. Gokiert and Dr. Kirova both had existing working relationships with many of the study partners–in particular the immigrant-serving agency described as the primary partner in both case studies−through collaboration on previous research projects, committees, or community initiatives. Building on this relational foundation, Dr. Gokiert and Dr. Kirova were approached by community partners to be the lead researchers on each study, given their respective expertise in assessment and early learning. Researchers and community partners shared values and worldviews related to facilitating research participation of immigrant and refugee families and bringing their experiences from the margins to the center of the research process, working collaboratively, and envisioning and creating intercultural spaces and equitable practices in early childhood. Trust was strengthened over time through respectful working relationships, a commitment to social-justice, responsiveness to each partner's needs, as well as acknowledgment of each partner's strengths and limitations operating within and outside the partnership (e.g., time, resources, organizational mandates).

Case Study 1: Cross-cultural Screening in Early Childhood

The aim of this study was to examine the cross-cultural validity of a developmental screening questionnaire, the *Ages and Stages Questionnaire* (ASQ; Squires & Bricker 2009), for use with immigrant and refugee children (Gokiert et al., 2010). The study complemented a

larger, 3-year project, *Preschool Developmental Screening* (PDS), funded by the regional health authority in a culturally diverse urban community in Western Canada (Gokiert et al., 2010). Rooted in the acknowledgement that positive early experiences are important determinants of long-term health outcomes, seventeen partners in health, children and family services, and education established an integrated developmental screening program to increase access to screening at 18- and 36-months, intervention and assessment, and maximized resources for families.

Early in project implementation, one of the partners−an agency serving immigrant and refugee families−raised concerns about the cultural appropriateness of the ASQ and barriers (cultural, economic, language) that may influence the participation of culturally diverse families in the screening process. Thus, partners decided to examine the cross-cultural validity of the questionnaire. Three communities were chosen to participate in the study to reflect the demographics in the larger PDS project: Chinese, Sudanese, and South Asian. To follow, are key reflections on the partnership milestones pertaining to the planning, implementation, and dissemination phases of the research.

Methodological choices

When determining the most appropriate participants for this study, we relied heavily on the insights of our community partner. They emphasized that the best informants on the cultural appropriateness of the ASQ would be parents and cultural brokers who worked closely with parents in the PDS project to support access to services and mediate cultural and language barriers. As one of the agency representatives noted, we needed to "make visible the invisible" cultural knowledge and parenting practices of immigrant and refugee parents. They further explained that systems (e.g., Health and Education) and screening instruments favor a Western

developmental perspective, which positions a parents' cultural knowledge as inferior to Western views of child development (Gokiert et al., 2010). For this reason, we chose to interview parents (primarily the mother) and cultural brokers from the three ethnocultural communities as expert informants on the validity of the screening tool. The objective was to reveal, through a qualitative method, culturally relevant perspectives on child development. This was in contrast to most studies of cross-cultural validity in early childhood measurement, which use quantitative methodologies and statistical analysis to determine bias in questionnaire items and constructs. By choosing parents/cultural brokers as expert informants, we began to shift our narrow definition of expertise as it relates to traditional research conceptions of validity, which place value on experts with professional credentials or specialized training. In our study, expertise signified experiential knowledge, lived experience, and cultural understanding. This choice of methodological approach allowed for multiple voices to come together and for cultural knowledge systems to co-exist within the research process. Although this was definitely a shift for us as researchers trained in traditional validity research, it led to rich and relevant data that captured community voices and parent perspectives, and made visible the multiple, often implicit, ways culture influences views of the developing child. Ultimately, the qualitative study of the screening questionnaire (see Gokiert et al., 2010) complemented other quantitative findings, obtained through the larger PDS project, and contributed to enhanced interpretation of the developmental outcomes of immigrant and refugee children in the project.

Ethics of participation

Speaking in first language is a right of participants and as community-based researchers we have an ethical responsibility to not only minimize harm, as is the standard of research ethics, but to facilitate genuine participation by addressing exclusionary barriers. In conversations with

our partners, we came to realize the hidden layers of power imbalances that permeate our traditional research ethics process of obtaining individual written consent and collecting data in participants' second language. While it is typical for researchers to translate consent forms or use interpreters when conducting interviews with immigrant and refugee participants, discussions with our community partners revealed that translation/interpretation does not address the fears and concerns immigrant and refugee parents have about the research process. For instance, some of the refugee parents in our study had negative pre-migration experiences with signing official documents and were uncomfortable signing a document they could not read or understand because of limited research experience. Thus, we submitted an amendment to the university Research Ethics Board to allow us to obtain oral consent for this study. An information letter was shared by a cultural broker in participants' first language and participants verbally stated whether they wanted to participate or not. The cultural broker and/or research assistant would then write the participants' name on the oral consent documentation form, along with the date and time consent was obtained, the name of the person who obtained consent and/or interpreted, and the research assistants' signature. This process addressed participants' fear of written consent and provided written documentation to the ethics board that participants were indeed informed about the study's risks/benefits and their right to refuse participation. We were fortunate in that our University Ethics Board was familiar with CBPR processes and research involving marginalized groups, thus, getting the approval for oral consent was not an issue.

In addition to language and trust concerns, our partners noted other cultural dynamics, embedded in gender roles and community protocols, that needed to be addressed to allow for respectful participation of parents from the three ethnocultural communities. For instance, some of the parents in our study adhered to gender protocols and were only comfortable with a female

interviewing the mother (mothers were often the primary caregiver and were in the best position to answer the interview questions). In other instances, the head of household, often the father, was, from a cultural point of view, the person who needed to give permission for the family to participate in the research. To address these barriers, cultural brokers who were intimately familiar with cultural and community protocols and had existing relationships of trust and speak participants' first language, were in the best position to obtain consent and interview the parents rather than the researchers. Choosing to conduct the interviews and engage parents in a language other than English while embodying participatory ethics of care also meant that we had no direct control over the interview process. It required us to step outside of our traditional roles as project leaders, and relinquish power to our co-researchers. Much like parents trusted the cultural brokers, we had to also trust the process and that cultural brokers, as our co-researchers, adhered to principles of systematic inquiry as needed for trustworthy research, while at the same time allowing for a culturally appropriate process of data collection.

Building capacity and sharing knowledge

The need to involve community partners as data gatherers and co-researchers for reasons outlined above (ethics, trust, and language) raised a number of practical questions for us as researchers, such as how to ensure that cultural brokers have the research skills necessary to carry out the proposed research plan. Together with the partnering agency, we developed and offered research training over the course of 3 days with a specific focus on qualitative interviewing techniques. Seeing the value of this training to build the capacity of their staff for the current and future research projects, 18 of the agency staff participated with 3 cultural brokers conducting the interviews with parents for this study. Each cultural broker was

compensated for their time, and received acknowledgement of their participation in the training by the University.

In addition to building core research skills in informed consent, confidentiality, interviewing, recording and transcribing, the training opened up a space for a cross-cultural dialogue around research practices. This increased our own learning, as academic researchers, around protocols of ethical research conduct in diverse communities. Armed with this learning and a keen desire to create a tool that could be used to inform other organizations, funders, and researchers as they work with immigrant and refugee parents, we developed and distributed a community practice handbook on early childhood screening and approaches to research and practice (Chow, Gokiert, Parsa, & Rajani, 2008). While not a peer reviewed publication, which is the more traditional method of knowledge mobilization, this handbook, as a knowledge translation tool, has been one of the most impactful outcomes from the project. Over 5,000 copies of the handbook were distributed to researchers, practitioners, policy-makers, educators, and parents. The handbook was made available online for download, developed into a short article for a health audience (Gokiert, Georgis, Chui, & Chow, 2012), and was used as a tool for presenting the findings of the project – often together with one of our co-researchers – at large health, early childhood, and educational meetings and conferences. Furthermore, two early childhood development diploma programs formally included it as part of their curriculum, and a local early childhood conference included 500 copies in each delegate's package. Committing the amount of time and energy it took to develop and mobilize the handbook was definitely at the expense of traditional academic outputs that would be expected of a University researcher, and would not be typically rewarded by a faculty evaluation committee. However, the contribution to

academic and community knowledge of early childhood screening in diverse cultures in the areas of practice, education, training, and research, is significant and impactful.

Case study 2: Intercultural Early Learning Program

The overall purpose of this project was to develop and implement an intercultural early learning program intended to provide cultural and linguistic continuity for refugee children. The program was first designed to include children from three vulnerable refugee communities−Kurdish, Sudanese, and Somali−because they had already begun to form intergroup relationships through a parenting group program provided by one of the partnering immigrant-serving organizations. The partnership also included stakeholders from the provincial government, a school board, and other not-for-profit agencies, all with varied levels of involvement and decision-making capacity (Dachyshyn & Kirova, 2011). In order to create a shared vision amongst stakeholders, a set of principles were jointly developed and reviewed regularly as the program evolved (see Kirova 2010; 2012). The program was offered 4 half-days per week, with instruction time and activities divided equally between English and the children's home languages. The classroom team consisted of an English-speaking preschool teacher and three classroom facilitators who each spoke one of the first languages of the children. Additionally, cultural brokers from these same three cultural communities provided wraparound support to the families outside the classroom, connecting families to a broad network of settlement, health, and other supports, both within the mainstream services and the cultural communities themselves (see Ford & Georgis, 2011). We reflect on our experience navigating hidden and transparent power structures within the research and highlight how we engaged with parents and leaders from the three communities to co-create the intercultural curriculum and pedagogical approaches used in the program.

Negotiating roles

The program began as a collaborative endeavor with the intent that members from the three ethnocultural communities−including parents, community leaders, and cultural brokers −would contribute their knowledge and cultural perspectives of child development and education to co-create the intercultural curriculum. Early on, however, we realized that despite our intentions to actively engage parents and community members as equal voices in program planning, they viewed their role and ours quite differently. They felt that we, as the academic researchers, were the experts on early childhood education and therefore our role was to tell them what their children should learn in the program. As one of the cultural brokers indicated, parents "do not think they have anything worthwhile to contribute" (Kirova, 2012, p. 29) to the program.

Through these conversations, we came to realize that the views expressed by immigrant parents were associated with power disparities and culturally different perceptions of school held by the families. On the one hand, parents had internalized the common belief that their children would do better in Canada if they speak English even at home and attend early learning contexts based on Western views of development and modes of socialization. This view is rooted in assimilationist models of child development and reflected in systemic practices that perpetuate deficit views of the immigrant parent as lacking the right knowledge and skills to instruct their children (Ali, 2012; Bernhard, 2012). On the other hand, most parents held culturally-shaped views of parent-teacher relationships, with teachers being the authority figure in their child's education (Chavajay & Rogoff, 2002; Georgis et al., 2014). It took almost a year for the researchers and classroom staff to gain parents' trust in our sincere interest in their cultural knowledge as foundational to their children's learning before they began to value their knowledge and to share it more openly. Several factors contributed to trust building over the

course of the program including intentionally seeking parents' input through informal and formal opportunities that respected their daily realities; communicating in their first language with the help of cultural brokers; and responding to their hopes and input by making changes to program activities to include their culture and ways of caring for their children. Such activities were as small as celebrating in a culturally meaningful way the arrival of a new baby in the family, inviting parents to cook with the teachers and the children in the program and sharing the jointly prepared meals or singing songs from their childhood that were then included as part of program activities. Parents' demonstrated their trust by more eagerly participating in program and research activities and expressing their appreciation for the unique opportunities the program provided for them to participate in their children's early learning.

Since we reject the notion that knowledge is an individual asset (or deficit) and see the child as situated within a network of interconnected relationships and interactions, we needed to collect the communities' wisdom on child development. Focus groups were conducted with parents, elders and leaders from the three communities to explore cultural expectations of how young children learn, and discuss ways in which the program could provide experiences that would support their cultural identities in the classroom (Kirova & Paradis, 2010). Without this deep acknowledgement of the power and cultural dynamics that permeated our relationship with the families and communities, we would not have been able to genuinely engage in co-construction of knowledge.

Responsive engagement

The trust that was developed with parents and community members was reinforced when they were able to see their views and input being used in a timely fashion to inform program development. Often times, research ends with just *listening* to the perspectives of communities,

without *acting* upon what was heard. In this project, because there "was a real place for these to be implemented, made the participants feel that, for the first time, there is a chance for our voices to be heard for real" (Kirova, 2012, p. 21). To maintain this trust and the continued participation of parents in research and program activities, it was important to also acknowledge and respond to their broader social, economic, and political life circumstances as newcomer refugees to Canada. Our partners from the immigrant serving agency often reminded us that as partners/researchers, we have the ethical responsibility to acknowledge parents' daily realties and respond with a sense of care and urgency to their needs, hopes, and desires. By working in a holistic way, cultural brokers were able to provide wraparound support to parents in ways that responded to their settlement needs, leveraged their strengths, and addressed power disparities between parents and systems that further marginalized their voices. To honor this holistic way of working with families, research activities were designed in a similar way. For instance, focus groups were organized during evenings or other times that were most convenient for parents with food and child care being provided.

Acknowledging and responding to parents' life circumstances were important to facilitate their continued participation in the program, however, it felt somewhat unsettling for us. We felt, at times, that we were contributing to the "paradox of good intensions" (Urban, 2016, p. 405). By taking on such obligations, and assuming the role of a "helper" were we perpetuating the very oppressor-oppressed relationships—justified by the former's privileged imperative to intervene and the latter's position as the passive recipient—that we were trying to negate? In order to break down the cycle of historically-determined power relations, we had to actively confront our own position of privilege by leveraging the strengths of parents. Defining our relationships with them in terms of these strengths and the co-learning possibilities embedded in knowledge co-

generation was the strategy that allowed us to break the cycle of privilege and power we held as experts in early childhood education and development and as university researchers.

Co-constructing knowledge

Finding the balance between recognizing and responding to families' circumstances and truly honoring community worldviews and parental knowledge was essential yet challenging. Not only because of our own privileged position as university researchers but also because of the power imbued in the dominant (Western) discourses of child development that position community/cultural views of learning and child rearing practices as inferior to the Western models. While we entered this work aware of the need to create a space where multiple worldviews of early learning and child development could co-exist, we were overly optimistic about how easy it would be to change practice and our own−and other stakeholders'−ways of thinking about immigrant and refugee children when operating within existing systemic structures. Working in the intercultural research space meant that we had to let go of our professional knowledge of the discipline, dominated by theories of developmentally appropriate practice as the only legitimate knowledge system, and accept that there are other ways of being and learning that are socially and culturally meaningful to the children in the program as well as their parents. Cultural brokers were instrumental in animating and interpreting children's behaviors and learning in the classroom from a cultural lens. For instance, observation and participation in daily home activities such as cooking was natural for many of the children in the program, some of whom had limited exposure to many of the play items found in a traditional early learning classroom (see Hennig & Kirova, 2012; Kirova 2010 for a description of play and cultural artifacts in intercultural early learning).

Co-learning opportunities and exchange of knowledge between partners were continual in the program and facilitated by both focused and spontaneous conversations, primarily with cultural brokers but also with parents and community members. Our deep immersion in the field included a weekly planning meeting with the research team, a monthly meeting with all program stakeholders, parent evenings, and prolonged fieldwork in the classroom. These research activities contributed to relationship building and knowledge exchange that was deeply reflective of the complex nature of our work. What became obvious through these interactions was not only the contradictions between the dominant and community views of how young children learn, but also cultural similarities and differences between each community's approach to working with children. This intercultural dialogic exchange was transformational for us, cultural brokers, and other partners, as we together developed the intercultural program from the ground up in ways that can truly challenge colonization and dominant views of child development and genuinely reflect intercultural values and sociocultural perspectives of early childhood.

Considerations for CBPR with Immigrant and Refugee Communities

Working in the research *contact zone* (Pratt, 1991) in partnership with immigrant and refugee communities yields ethical, methodological, and relational challenges as well as opportunities. Through a CBPR approach, the two case studies addressed a fundamental question in cross-cultural early childhood research about what constitutes valid knowledge and provided examples of how typically excluded cultural knowledge systems can be integrated in the research process so that multiple views of early childhood can co-exist in research and generate new practice-based knowledge. Two critical considerations for future research can be drawn from the two case studies. First, researcher flexibility, humility, and reflexivity are integral to the cross-cultural participatory research process to effectively challenge dominant perspectives that

perpetuate the marginalization of immigrant and refugee communities. Working in the CBPR space of the two case studies, we had to acknowledge the limitations of our professional knowledge of early childhood development and research expertise and allow for the community voices to shape the research process and outcomes. As researchers we were challenged in our privileged role as experts and lead investigators and had to re-evaluate who is considered a researcher, what is meaningful community engagement, how cultural knowledge systems can co-exist in practice, and what counts as impactful research output in authentic partnerships with communities. Through intentional knowledge mobilization such as the handbook mentioned in case study 1 and the creation of an intercultural program exemplar in case study 2, which continues to serve as a valued alternative model of early education locally, the two case studies not only contributed to new knowledge of intercultural practices for assessment and early learning but leveraged this new knowledge to inform practice. The commitment of CBPR to such knowledge creation rooted in community worldviews and social change is often challenged within existing institutional ethics and academic reward systems, yet, it can be transformational for both researchers and communities.

Second, both studies relied on cultural brokers as liaisons to build trust, respectfully engage immigrant and refugee families in the research process, and address language and cultural barriers that may prevent research participation. The involvement of cultural liaisons, however, made the nature of relational ethics more complex and added another layer to how culture is perceived, communicated, and acted on within the research space. As researchers of CBPR with immigrant and refugee communities, we recognized the need to develop and maintain trusting relationships not only with communities/participants but also with cultural liaisons. In this three-partner relationship, trust is multidirectional and cultural understandings

become more fluid. Communities/families must trust liaisons before agreeing to participate in the research, liaisons must trust the researchers' intentions and ability to respect community voices and honor community/cultural ethics before inviting families to participate, and we, as researchers, must trust liaisons to adhere to research protocols when engaging with families and to be trustworthy communicators of cultural knowledge between families and researchers. However, we must also acknowledge the limitations of this process of engagement as it relies on pre-existing relationships with community members and may not always be representative of the community.

As evidenced by the two case studies, CBPR holds potential for genuine and respectful engagement of immigrant and refugee communities in research. A pre-existing trusting relationship between the researchers and the communities contributed to a successful collaboration and those relationships still exist today. While both research projects are complete, we continue to partner with the agency and cultural brokers on other research projects and/or community or scholarly activities, demonstrating both partners' long-term commitment to the partnership and the pursuit of social justice.

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