Explicating Transformative Participation and Contributions of Black Youth in Heart Disease Campaign

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Scholarly research and government reports reveal that heart disease is the leading cause of death in the US, and African Americans bear a disproportionate burden due to socio-economic, political, and health disparities. Despite this burden, there is limited qualitative communication research addressing the engagement of Black youth in heart disease prevention and the interpretive frames used by Blacks to discuss participation. This research seeks to help close this gap in communication theory and practice. The research documents the enactment of participation among Black youth engaged in a Culture Centered Approach (CCA), heart disease prevention campaign at a high school in Indiana. In doing so, the research highlights the important role of communication to understand the enactment of participation, the distinctions between authentic and inauthentic participation, and the utility of CCA. Data gathered using participant observation, a reflexive journal, and in-depth interviews with 20 Black teenagers, and 3 external collaborators revealed that authentic participation is distinct and transformational, and is characterized by collective ownership of the process.

Introduction

Despite the recognition of participation as important in communication scholarship, literature that focuses on the enactment of participation is limited (Airhihenbuwa and Obregon 2000, Dutta-Bergman 2004a, 2005, Dutta 2008, Dillard et al. 2018). A substantial body of communication research focuses on descriptions of the messages and strategies used in the dissemination of such messages (Dutta 2007, Freimuth and Quinn 2004). Simultaneously, minimal attention has been paid to the interpretive frames used by Blacks to talk about participation. There is also general underrepresentation of Black students in research in America (Mastin et al. 2007, Shavers et al. 2012). Such underrepresentation led Ruffin and Flagg-Newton (2001) to call for more research on the health of Black students. Since the call, there has been some effort by researchers to bring issues concerning African American youth to the forefront. Topics studied have included disparities faced by African American youth in the areas of mental health, HIV/AIDS, and asthma (Dutta et al. 2018); (in) equitable access to health care services (Dutta and Kreps 2013). (In) equitability is variability in how individuals who suffer from similar health conditions receive treatment based on their ethnicity, income, gender, and socio-economic status (Dutta et al. 2018). Other topics studied include disproportionate burden of cardiovascular disease among Blacks (American Heart Association 2018, Dutta and Kreps 2013).

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The body of work concerning African Americans document racial disparities and highlight the outcomes of interventions geared toward African American youth. Mayer-Davis et al. (2012) analyzed data sets from a multi-center data base that provide information about diabetes diagnosis and reported that 60% of the African American youth diagnosed with types 1 and 2 diabetes were from low-income families. Also, Resnicow et al. (2005) reported that a church weight control program for overweight African American adolescent females yielded little success. The focus on the outcomes of interventions limit our understanding of the transformative potentials of Blacks, who have been historically represented as voiceless. This is a void that the present research seeks to fill. A research that document the engagement of black youth in addressing heart health conditions will (a) advance our understanding and the merits and demerits of engaging Black youth in addressing a health problem, and (b) identify ways of engaging black youth in ways that are rooted in their cultural values. We consider this research as an opportunity for building community communication infrastructure.

Therefore, we extend the research on African American youth and respond to Newton's call with a qualitative study that uses the Culture Centered Approach or CCA (Airhihenbuwa 1995, Dutta 2008) as a lens to document *transformative Participation* among Black teenagers engaged in a heart disease communication campaign in a high school located in Indiana. This research is part a larger ethnographic study documenting the engagement of Black teenagers as equal partners in the collaboration process. From this larger data set, we focus on the enactment of participation. We conducted thematic analysis of the data, and foreground our argument in CCA, which promotes equity and social justice as vital for sustainable social change (Dutta 2008).

Transformation embodies change in appearance. In the youth project, transformation involves a change in the status quo in terms of who decides how black youth should be reached with heart health information. This project is transformative because it ruptures the communicative inequality that characterizes dominant communication projects (Dutta et al. 2016). We complicate the notion of transformation, and contend that transformation involves explicating the role of Black teenagers in their own health; writing Black youth back into history, and problematizing the process that leaves them out; unpacking the silences; and using the neglected past to ask pertinent questions about the present.

Research that explicates how participation is enacted will contribute to knowledge about the role of communication in equitability in social change processes. Furthermore, it will balance a theoretical understanding of communicative phenomena with an applied case, and will allow researchers to understand the dynamics and nuances of participation, especially in underserved populations. Additionally, the discourse about participation, and the *how* of participation in a communication project merits attention, because of the discrepancy in the rhetoric of participation and the reality of participation in community driven interventions (Dutta and Basnyat 2006, 2008a, 2008b).

The nature of the present research, preventing heart disease among black teenagers in an inner city high school, makes it especially important to document the enactment of participation, in that the failure to do so may reify cosmetic

narratives of participation that critical communication scholarship seeks to inverse. This research contributes three key insights into the participation literature: (a) It provides a concrete case that illuminates the distinctions between in-authentic and authentic participation; (b) It establishes the importance of narrative paradigm in understanding participation; and (c) It demonstrates the utility of CCA in understanding participation. Specifically, it shows how CCA scholarship offers a distinctive vantage point for understanding participation.

Project Description

This research is based upon a Youth Heart Initiative (HHIYI), which is part of a $20,000 collaborative grant involving a large university in the Midwest, a local nonprofit, and a high school. The objective of the grant was to prevent heart disease among Black teenagers in Marion county, a place that is characterized by high mortality linked to cardiovascular diseases (Indiana State Office of Rural Health 2012). The project began by listening to the narratives of heart disease among the teenagers and their ideas about culture-centered ways of addressing the problem. The description of the outcomes of the HHIYI is beyond the scope of this manuscript. We focus solely on the enactment of participation in the project.

Culture Centered Approach

A Culture-Centered Approach avoids top down approaches to disease prevention that ignore local articulations. CCA instead provide level playing field between academic experts and cultural members to address health and social problems. By legitimizing local narratives, CCA alters the communication theory and ruptures the representation of local narratives as unscientific (Dutta 2008). CCA embodies three pillars: Culture, Structure, and Agency. (a) Culture is the local articulations and meanings that shape and influence the behavior of indigenous populations as they negotiate daily living. (b) Structure is the institutional barriers that undermine the ability of indigenous communities from participating in policy circles where decisions about them are taken. (c) Agency refers to the abilities of cultural members to identify problems and corresponding solutions (Dutta-Bergman 2005, Basu and Dutta 2007, Dutta 2008, Dutta and Basu 2007). Through these pillars, CCA theorizes how community members negotiate their lived experiences amid disparities (Dillon and Basu 2013). CCA projects strive to legitimize the narratives of minority populations, because it holds that such narratives open possibilities for alternative knowledge. Furthermore, CCA holds that the development of interventions accounting for the unique circumstances of Black minority teenagers is contingent upon scholarship that focuses on patterns of communication within the group. Given the centrality of participation in CCA projects, the two questions this research seeks to answer are:

RQ 1: What does it mean to participate in a culture centered health project?
RQ 2: What is the nature of participation in a culture centered health project?

Culture Centered Discovery Method

This research was a partnership among a local non-profit, an academic institution, and a high school in the Mid-West. The partnership was aimed at creating a culturally centered strategy for listening to the articulations of black youth in addressing heart disease. The non-profit was formed after the release of Hecker report that revealed disparities between minority and white populations in the state. It serves as advocate for addressing minority health in the state. This includes coordinating local minority coalitions, working with legislators on minority issues, monitoring minority-related issues. The non-profit facilitated our access to the community and engaged in the co-construction of the project. Culture centered discovery places high premium on collaboration building among partners over a period. In culture centered discovery, special attention is placed on reciprocal relationship among partners in ways that are non-hierarchical. Culture centered discovery also fosters inclusivity, and practice reflexivity in the interaction among the collaborators.

At first sight, one might argue that CCA discovery is no different from other forms of engaged scholarship, because quality engaged scholarship share some of the listed commitments (Dempsey and Barge 2014, Simpson and Seibloid 2008). Culture centered discovery embodies and extend these principles. In particular, CCA discovery places priority on equitable, non-hierarchical, sustainable and ethical relationship among the community and academic partners. Second, it also requires the researcher to reflect upon the processes and goals. In this project, we did this by asking questions about our actions and goals throughout the process (Collier and Lawless 2016).

We draw on qualitative data collected throughout the collaboration. Focus groups, observations, and one-on-one interviews were selected as the most appropriate research methods for this project. CCA projects begin by providing space for dialogue among the collaborators. We organized weekly dialogue among the collaborators. Participants included Black teenagers at the high school, the school representative, the media partner, representative of the nonprofit, and the author. Audio-recordings of the meetings, notes taken by a student volunteer, and reflective journals constitute the data sets for this manuscript. The meetings were useful in that it provided a space for the partners and the students to listen to the different perspectives during the collaboration. Such experiences are considered salient for grasping human communicative actions (Lindlof and Taylor 2002).

Data Collection and Analysis

Data Collection

We collected the data for this project in three phases. Phase 1 included minutes of meetings between the nonprofit and the academic partner. The purpose of the meetings was to decide upon the school selection criteria, the signing of the Memorandum of Understanding (MOU) that provides specific details of the

expectations from the partners. Phase 2 included focus group discussions with the teenagers about the meaning of heart disease. The academic partner framed the meeting as a gathering to understand their meaning of heart disease and for the teenagers to collaboratively propose culturally relevant solutions. Data collected included ten focus group discussions with 5-6 students in each, in-depth interviews with 20 students, participant observations during the weekly campaign tailoring workshops. Phase 3 data included post evaluation in-depth interviews with student volunteers that emerged peer leaders, who spearheaded the planning and execution of the campaign, the school representative, representative of the non-profit, and the school representative. The interviews lasted between 30-90 minutes. 20 persons were interviewed. Questions focused on their experiences in the campaign, their roles, challenges, strengths and strategies that were employed to overcome such strategies. Additionally, the questions also allowed participants to contrast their experience in the Young at Heart campaign to other projects in the past.

Data Analysis

The data were organized chronologically, and inductively analyzed. Through an iterative process that involved multiple readings of the data sets, the author manually identified patterns (Tracy 2013). Initial analysis focused on emergent themes, using a constant-comparative method to compare the data for each code and refine and modify codes (Charmaz 2006). A second round of analysis focused specifically on rereading the data to address the research questions on the meaning of participation.

Findings

The two overarching research questions driving this research are: what does it mean to participate in a culture centered project? and what is the nature of participation in a culture centered project? The two themes that emerged from analysis of the data (Strauss and Corbin 1998) are (a) participation as having a strong voice, and (b) participation as transformative.

Theme 1: Participation in Culture-Centered Project--Meaning and Experience

The first theme is the meaning of participation. We present the narratives of voice and freedom to make decisions in the planning and execution of the project. Participants talk about how they made decisions in different aspects of the project.

Megan is from a mixed racial background and served as one of the co-chair leaders of the project. The three Chair leaders served as the interface between the peer leaders and other partners. Her father is black, while her mum is white, but she identifies herself as black, hence her participation in the project. Here is how Megan communicates participation:

It means getting active in everything that is going on; getting involved in every step not just coming in, sitting there and do nothing. [She compares her experience in other projects thus,]… It was all different. I have not done a project like this before. I made a schedule of everybody's email addresses, expressed my opinion freely, contributed to the discussions, and made obstacle crossing, marked many things; I think I made a pretty good contribution to this project. I helped the DJ, helped set up stuffs and was master of ceremony during the event sometimes, and ensured everything worked perfectly. I spoke and got people involved.

Shumain is another Black youth who participated in the project. Shumain is a sophomore and co-chair of the peer leaders. She is the oldest of four siblings and lives with her mum and step dad. She desires to be a neuroscientist, or mortuary scientist, because of her family's experience with brain-related conditions. Her cousin suffered brain damage from drug related problem, a condition she feels could have been treated. Similarly, her grandmother died of brain damage Shumain's meaning of participation resonates with Megan's articulation: I get the understanding that participation is participating in a work or project and not waiting to be involved until the last day; it means contributing so, you can earn for example, a deserved credit for a job done and not waiting to be credited for what you did not do. I participated in this project. I was one of the people who helped, other than Megan. We did the extra stuffs. We had some people who were in some of the meetings but did not do anything. But I was not like that. I contributed to the discussions. I was involved till the last day. That is what I mean by extra stuffs.

Shumain's meaning of participation is similar to the articulations by Megan. She says: This project was student driven, that was the big difference. In sports, it is the coach who decides and tells you what you need to do. But here, we make our own inputs. We worked on everything together, talked about everything and agreed before we adopted such as our decision. For example, the names, logo, who will be in it was a whole team decision.

The analogy between participation in sports and CCA is salient and depicts the equal partnerships between cultural participants and external experts in culture centered participation.

Keira is 17-year-old black and a junior. She is the oldest of four siblings and lives with her father and step mother. Keira was recruited by her Physical Education teacher who shared information about the project and invited her to attend one of the meetings. Keira was the secretary of the group. She was appointed by her colleagues at the inaugural meeting as Secretary. She took notes during weekly meetings, circulated the notes to her peers and partners via email. The weekly meetings served as spaces for the co-construction of ideas about the project. The task of writing meeting minutes and circulating it to the entire team was daunting and requires commitment.

For Keira, participation means: "being involved actively. Like I participated in the different stuffs. I went to the meetings and gave opinions, as well as helped in the carnival. I took notes, suggested ideas. I enjoyed that writing aspect and the privilege of suggesting some ideas; really, being heard". Keira is 17, and a junior. She took notes during weekly meetings, circulated the notes to her peers and

partners via email. The meetings served as spaces for the co-construction of ideas about the project.

Daren is 17-black teenager and a senior. Daren and her younger sister live with their mother. Like Megan and Shumain, Daren also has a family history of heart disease. Daren's father died from heart attack "my dad passed away when she was one" (referring to her younger sister). She tells me "I think he had heart problem but did not know about it. He was just playing basketball when he had a heart attack and passed on". Darion desires to become a pediatrician to correct negative impression about pediatricians. Daren's friend lost her infant sister to a medical mistake and has since developed animosity towards pediatricians. For other participants such as Daren, participation entails:

> Coming up with ideas and just helping to plan the meetings; taking leadership roles, making inputs, helping put the carnival together. We handled stuffs and participated actively rather than just watching others do it all. All the ideas came from us, like we thought out the logo, etc. Again, what becomes apparent here is participation as voice. The construction, "coming up with ideas, taking leadership roles" is synonymous with having a voice in the decision making in the project. Daren's story illuminates a consistent pattern in the narratives of participants. The construction "we" and "actively participated" corroborates CCA's commitment to collective decision-making processes in a CCA project.

Like Megan, Shumain, and Daren argues that participation involves active engagement in the process of a program, "It means having a voice and your voice being heard. It means suggesting ideas, and your ideas being accepted and integrated into the planning and execution of the project" Onye's narrative about participation is not different from her peers. Onye is not a designated officer of the team, regardless, she was committed. She frames participation this way: It means being involved, working and being active in something. I did some of the drawings, sketches and the blueprint; took notes and stuffs like that.

Onye draws an analogy between teacher-guided and culture-centered projects in the following statement, I think in a class project, a teacher would give us a specific part or plan to achieve. But this one was beyond a class project. I can compare this to my US History project. We basically had to describe the lyrics in a song and why it was important. We had to make a movie or power point presentation. But this gave us the freedom to be more creative.

Apparent in the discourse is the independence and freedom that characterizes culture centered participation. She notes that whereas other class projects are teacher directed, the youth culture-centered heart campaign was student directed and provided spaces for creativity among her peers.

Tekia is another member of the team. She is 16 year- old black and a sophomore. Unlike her peers, Tekia does not have family history of heart disease. She is the oldest of four siblings. She tells me, "I have two brothers and a sister. One of my brothers is 12, and the other four, and my sister is 14 years old". Tekia wants to become a Pediatric Nurse. Her interest in the nursing career is connected to her family's background in healthcare services. She frames participation this way: It means to do something or be a part of it. I participated because I helped

and I was dedicated to it. I helped come up with ideas; everybody did. It was our idea and whatever we said was what we did.

For Keila, participation means giving equal opportunity for cultural members to share their views on how to plan and execute a project. Keila says: Participation is everybody having equal opportunities. Like giving your opinions about a project. I participated by coming to the meetings and actively involving in its planning and actual execution of the project. We had the meetings like every week; I think twice or so; Mondays and Wednesdays. We all contributed and were actively involved and some of our decisions were taken into consideration. Like the names and logos. We thought since the name has something to do with the heart, we had a picture of a heart and some designs around it.

Berth wore the hat of instructor as well as co-participant. For her, participation involves active engagement in a project. This is how she describes it, Participation means being involved in an activity whether is listening to someone that is speaking at a time, whether is communicating with youth giving ideas verbally or writing things down. It just means being actively involved in whatever that is going on. She describes the student's participation this way: Yes, they did a good job participating. I mean there were some days when some were just sitting and not saying a whole lot, and there are other days that they are constantly communicating and participating throwing out an idea here, changing an idea here. I mean participation for the most part was pretty good.

The narrative here sheds light on participatory processes as well as features of participation. The construction about the dynamics of participation is symbolic. As the construction depicts, participants were diverse and exhibited varying levels of participation. On certain occasions, they were very participatory, while on some others, they were passive.

Like Berth, Kelly wore hat as an outsider as well as a participant. She is the community organizer for the youth heart health project. She shares her impressions about participation and her experience in the project, "It means involvement. It also means actively interested in something; and probably investing in the form of time or money. It requires activity or involves in facilitating a project".

Kelly narrates her experience: I will say, yes, the students participated in the project. The students participated because they were present and whether, or not their ideas were taken, they were part of it; either with each other or just something that shaped the project. Even though it was a side conversation, it still means they were all engaged.

With respect to the nature of participation, Kelly paints the picture this way: As you know, everybody is not going to go the same way; there are bound to be smaller voices. Like there was this girl who wanted to say something, but she would not say it loud and in the next second, someone says it loud and she would say, wow that was my idea. It was interesting to find someone who could be the leader of the pack.

Someone whose voice would be so loud it is heard. Things like that you cannot control, especially where you have to wait on the students to respond to the last question.

The narrative here depicts the characteristics of participation. Apparent in the dialogue is the heterogeneity in participation as well as the role of time and relationships in participation. Heterogeneity means difference. In this context, it refers to the diverse identities of the participants. It reveals that not all participants are vocal as such, and CCA practitioners should pay attention to the nuance of participation, or else undermine the equity that is the hallmark of culture centeredness. The dialogue below is an example of participation in the youth project. In this instance, the dialogue focused on identifying the project name. It began with a question asked by Ms. Crick, the P.E. teacher, who was our primary contact at the school. She asked:

> Crick: have you come up with a project name?
> Peer Leaders: We could do that next week
> Crick: So how are we going to have a logo without a name?
> Peer leaders simultaneously: No
> Crick: Here is my suggestion, draw out couple of project names and they can make logo based on whatever we draw out right now, heart you know.
> All: laughter
> Following the laughter, one of the peer leaders, Megan suggested a name.

Apparent in the dialogue are the multiple voices contributing to the ideas, turn-taking, collective agreement, and commitment to the cause. In place of expert directives, ideas are co-created with all contributing to the dialogue. This is direct opposite of unilateral decision making in dominant communication projects.

Here is another instance of participation. The dialogue here centers on the order of activities during the campaign launch. The conversation begins with a progress report from the media partner TJ, and dovetails into dialogue. The dialogue is worth quoting in its entirety:

> TJ: Would you want a DJ or announcer or anybody to open this event up and then introduce the doctor?
> Peer leaders: Yeah
> TJ: And then the doctor talks and then introduce Nicky, and Nicky talks about healthy eating, and getting people pumped up to get on the wall, so I need some advice from you guys
> M: I like him
> All peer leaders: Yeah, we want him…

The dialogue reveals the multiple voices contributing to the campaign decisions. These include the media partner, the peer leaders, and the P.E. teacher, who is our primary contact at the school, and the researcher. The centering of the voices of the teenagers in the decision making here is a quintessential example of a culture centered stance on equity in academic community partnerships. The second theme that emerges from the depictions is the convergence of response in participation. The discourse reveals the agreement in the responses of the teenagers to the suggestion by one of the participants. While the participants agree to the idea in this instance, there are instances where they disagree. The lesson from the convergent and divergent views is that participation is not a linear

process, and culture centered projects should pay attention to the aggregation of ideas in terms of who gets what, or whose ideas are adopted in decision making.

Here is another instance of participation in the youth project. In this instance, the workshop focused on the various activities executed on the campaign launch date. Starting with suggestion by the P.E. teacher about the stations on the launch date, here is how the dialogue unfolded:

> Crick: Here is the doors, and this is the lobby. So, we said we were gonna pull out these set of right seats, how about that, so we are saying like the speaker here, and the cooking demo right behind, so this will be like the stage in the area.
> M: Are we having like a stage thing?
> Others: No.
> Crick: Speaker/cooking over there so all that door that, now we have these whole open space over there, okay we have to designate enough space for the climbing wall
> Onye/Kelly: I think that should go by the door.
> Kriech: Like over here?...

The dialogue above depicts participation in a CCA project. Participation here is characterized by dialogue, voice, collective agreement, turn taking, power, and multiple voices contributing to the decision making.

Theme 2: Participation as Transformative

The second theme is the articulation of participation as transformative. In the introduction of this manuscript, we discussed the erasure of Blacks from discursive spaces where policies that impact their health are taken. The infusion of teenagers' voices here is transformative because it disrupts the status quo of dominant communication campaigns often scripted by outside experts (Airhihenbuwa 1995, Dutta 2008, Dutta-Bergman 2005). Transformation also emerges here as individual level changes that occur because of participation in the project. The trio, including Keira, Megan and Shumain describe their experiences as transformative.

This is how Shumain frames her experience in the project: "It taught me how to work with other people and appreciate the different skills and gifts people have, including the different attitudes of people when it comes to group assignment or work". According to Shumain, the project provided space for identifying the strengths and capacities different participants bring to the table. She also talks about the lessons learned about team work. Noteworthy in the construction is recognition of the "skills" co-participants exhibited in the planning and implementation of the project. The discourse serves as counter narrative to the dominant representation of underserved populations as agency-less.

Like Shumain and Keira, Onye says: For instance, when we figured out what the carnival would be like, I gave opinion on who is going to speak and for how long the person would speak. As a young person, I knew what we want to do and do not want to sit there for too long. I gave my opinion as to the type of people who should be there as well as who should address them; who should speak and for how long, what we would need in the big carnival and all that.

What emerges from these narratives is transformation at the individual as well as structural levels. At the structural level, the changes are also salient. For

instance, centering voices of the peer leaders in the campaign decision making reverses the expert versus community relationship that dominates traditional campaigns. Locating decision making in the hands of Black teenagers changes their representation from voiceless to a group that has voice and agency. The construction, "privilege of suggesting some ideas; really, being heard", is poignant. On one hand, it reveals the voicelessness of black youth in other projects. On the other hand, it depicts their voice in the youth project. The construction, "really being heard" embodies transformation from their previous representation as agency-less.

Narratives of transformation are also visible in Daren's story. She says: I think it was overall an excellent experience, because for us to inform others about heart health, and probably something they never knew before. Tell them how to handle heart issues and how to prevent it too.

Apparent in the discourse is the sense of power located in the hands of the teenagers in driving the project. The construction, "us to inform others about heart problem" is poignant. What emerges from the construction is instead of being told how to prevent heart disease by external experts, they (peer leaders) are engaging their peers on how to prevent heart disease.

Briana was elected by her peers as the contact person for the peer leaders on day one of the project. She received information from the instructor and media partner and disseminated same to her peers. Brianna's interest in the project is also connected to her family's experience with heart condition. Her grand mum had a bypass surgery. Briana echoes Daren's argument in the following excerpt, "We decided most of what we did. Basically, we took charge. I think everybody's ideas were put to use". Again, apparent in the discourse is the location of power in the hands of the peer leaders. The depictions here signify transformation in that the peer leaders took charge of the decisions reached in the project, a gesture that reverts the power inequity that often characterize dominant projects (Airhhienbuwa 1995, 2007, Dutta 2008, Lupton 1994).

Transformation is also apparent in the format and dialogic pattern of the workshops. The workshops served as dialogic spaces for the co-construction of campaign ideas. Here is one example. In this instance, the conversation focused on setting the ground rules of our engagement. Starting with a comment by the researcher, here is how it unfolded:

R: Our project, the adolescent heart health project, is working with you the youth to identify the key problems related to heart disease in minority populations, specifically African American community. We work with the theory called Culture centered approach, which basically feels that the communities know what the problem is. They have the power to identify the problem. They also have the power to propose solutions, so you are going to be the boss in this. After a short while I am going to take the back seat and you will drive, so that's the idea. I am not coming here to tell you what to do, you will tell us the issues you want to address and how you want to address them, so I just want to make that clear, so that's the core of our message here today. Sound good?
Peer leaders: Ehe, signifying agreement.

What we witness here is a transfer of decision making into the hands of the teenagers. The constructions, "I am not coming here to tell you what to do, you will tell us the issues you want to address and how you want to address them", and "so you are going to be the boss in this" are poignant depictions of the power reversal that characterizes CCA. The reversal of the power equation in the project is consistent with the culture centered commitment to address power inequities that characterize dominant projects (Airhihenbuwa 1995, 2007, Dutta 2008). As we have elaborated in previous paragraphs, power inequity perpetuates disparities. The dialogue presented took place during the inaugural workshop, where we lay bare the underpinnings of CCA. As depicted in the narrative, we transferred decision-making power into the hands of the teenagers.

Here is another instance that corroborates the transformation in the youth project. In this instance, the conversation focused on the heart health carnival, which emerged as the creative strategy for engaging their peers. Starting with my recap of previous conversations, here is the dialogue:

> R: So what we are doing here is we are trying to speak to the youth about best ways we can reach your peers on how to prevent heart disease so that they don't get heart disease when they get old. You are the boss so that's why we want to listen to what you think we can do, that's in a nutshell what we are doing. We have had two meetings, today is the 3rd.We started out by listing all the problems that cause heart disease among the youth. We listed a lot of things but last week we narrowed it down to 3 key problems. When I say we, I mean the team, this group of people that came together here. Now my question to you is have you had a change of mind from last week till now? I think that is the starting point for us. Are we still on track?
> Peer leaders: Yes.

Again, what we witness in the dialogue is a shift in power. Here the decision to move forward with the plan rests squarely on whether the peer leaders saying yes or no, again portraying them as drivers of the project. Again, the construction, "You are the boss so that's why we want to listen to what you think we can do, that's in a nutshell what we are doing", appears here as a constant thread depicting the power of the peer leaders in driving project decisions. Evidently, the location of decision making in the hands of the peer leaders alters the hegemonic structure that characterizes dominant projects (Airhihenbuwa 1995, 2007, Dutta 2008).

Here is yet another example. In this instance, the goal was to review sample materials developed by the media partner. Having listened to the ideas of the teenagers, the media partner developed concrete marketing and promotional materials reflecting the ideas that were brought back to the teenagers for review and endorsement. Starting with the progress report by the media partner, here is how the conversation unfolded:

> TJ: just so you guys know what we are doing is I took your ideas and this is the part where we create the process, so today I want to tell you your ideas and show you what we have done so far. What we do is we do just enough to show you what's going on so you can make changes, so don't expect these to be complete. I like to have a final version by next week, so that I send them off and get them

printed. Based upon what you were talking about we came up with a logo that incorporated Crispus Attucks tiger, has a heart inside. First thing I need to know is what you think about this logo since it was based on your idea.
Onye: We could do the other one, the one that is on the box spot.

Again, what we witness here is a reversed power structure. Here the power to approve or reject the samples lie in the hands of the peer leaders, hitherto presented as incapable of solving their own problems by dominant projects. The dialogue here is different from dominant spaces that are characterized by a hallowed expert seeking to enlighten uncivilized cultural members on how to act (Airhihenbuwa 2007). Here dialogue means the teenagers find communicative space where they articulate their needs as a group. Transformation also manifests at the individual level regarding food choices and life habits. Here is how Keira talks about transformation in terms of changes in her food choices: I have learnt about what could lead to heart disease. What can be done, like eating healthy and all that stuffs. I will say I now try to live actively and healthy, and try to manage my time a little better than I used to. I felt I was not really organized time-wise, but I try to get organized now.

What emerges in the narrative is individual changes resulting from participation in the project. Here, Keira shares specific changes made due to engagement in the project. During the execution of the campaign, the youth identified three major factors that negatively impact their heart health, including poor time management, poor nutrition, and a lack of physical activity. Against this background, the team proposed creative time management for their peers. It is this self-organization strategy that Keira alludes to in her narrative.

The narrative of individual transformation is not limited to Keira's story. Here is how Onye, another peer leader frames her personal transformation. She says: I now watch what I eat. I have been kind of on a health kick. I think at the beginning of the project, I was not worried about it because there were many things I did not know. I could not be concerned about something I did not know about. Now, basically, me knowing the dangers and what I should be concerned of, I can now do that. Like foods that we eat; sitting around in one place doing nothing, no exercise.

Narratives of individual transformation are also visible in the stories of another peer leader. This is how Megan describes personal changes: I feel I have gained a lot of knowledge on heart health, so much that I want to promote healthy living. So, it will be hypocritical not to live by it. It has empowered me too to live healthy daily. I have learnt what to eat and what not to eat. And, the reason I should abstain or eat. So, this is important to me as I live day by day. Like, time management skills. I exercise also. And, I used to drink soda two or three times a day. What I do now is if I want to drink one, I just put that in a refrigerator and drink that and after, drink water. I am making healthier choices for myself.

What emerges in these narratives is change in feeding habits as enactment of agency. The depictions here demonstrate agentic commitment to serve as role models to their peers. The construction, "it has empowered me to live a healthy daily", is fascinating. Here empowerment is viewed as access to communicative platforms where peer leaders engaged with peers and external

partners to dialogue about the problems that contribute to heart disease as well as corresponding solutions.

Discussion

This section elaborates on the themes and relates them to the assumptions of CCA and culture centered literature. Following this, we discuss the implications for culture centered scholarship.

This research sought to understand Black teenager's meanings of participation in the young at heart project. The themes that emerged from analysis of the data, namely, participation as voice and transformative potentials resonate with culture centered literature. The narratives are manifestations of the assumptions of CCA regarding community engagement. The CCCA meaning of participation (Airhihenbuwa 1995, Dutta 2008, Dutta and Basu 2008, Dutta-Bergman 2004a, 2004b, Ford and Yep 2003) differs from other interpretations of participation in that CCA, "foregrounds the voices and lived experiences of cultural members in seeking to establish how traditional approaches to health communication campaigns have contributed to the erasure of voices of marginalized communities" (Dutta et al. 2013). Apparent from the discourse is that CCA begins by rupturing the hegemonic structures that erases cultural voices from spaces of participation. CCA's ontological commitment to critical theory sets the tone for culture centered participation in that it centralizes equity.

The narratives in the young at heart project call into question traditional health communication scholarship that fails to recognize the capacity of underserved populations as capable of participating in decision making about its health. The narrative in this manuscript serves as an insurgent script that inverse the representation of blacks as voiceless. It lends credence to CCA's argument about the enactment of agency by underserved populations (Airhihenbuwa 1995, Dutta 2008). Theoretically, the narratives lend credence to the political agenda of CCA, which includes resurrecting unheard voices. The goal of challenging dominant health communication theorizing that erases marginalized voices and, importantly, creates entry points for introducing black voices into health communication narrative. The narratives of participants in the young at heart project puncture the representation of CCA as unscientific by traditional communication scholarship. The narratives serve as empirical data that substantiates CCA's postulation that true engagement of underserved communities leads to collective ownership, which is necessary for driving meaningful social change (Dutta 2008, Dutta 2011, Airhihenbuwa 1995).

The themes that emerged from the analysis also resonate with culture centered literature in that it touches upon the divide between CCA and traditional health communication with respect to persuasion versus dialogue as the preferred method of achieving social change (Dutta 2011, Basu and Dutta 2009). Traditional health communication focuses energy on persuasion efforts that primarily seek to change the behavior of underserved populations with information prepared by outside academic experts. The underlying assumption

of such persuasive approaches to social change is that information dissemination leads to individual level changes that consequently cascades into larger societal level changes. As such, considerable effort is put into identifying characteristics of cultural members to design messages that will change their behavioral intentions and actions (Dutta 2011, Kreuter and Haughton 2006, Melkotee and Steeves 2001). Popularly known as the Knowledge Attitude and Behavior Change (KAB) approach (Peterson and Gubrium 2011), this distinction remains a point of contention between CCA and approaches rooted in social scientific methodology.

The CCA shatters the scientific assumptions of traditional communication scholarship, and point out that it is incongruent with genuine social change. As a viable alternative, it encourages dialogic approach that centers community voices, and locates decision making in the hands of the community (Peterson and Gubrium 2011, Dutta 2008). The themes that emerged in the young at heart project exemplify the later. The youth in multiple narratives point to specific ways they shaped the design and execution of the project. The study echoes the importance of communication in culture centered projects. Specifically, the study reveals the micro and macro forms of dialogue that characterize the engagement of cultural members in the execution of a culture centered project of social change. Other CCA scholars point out the importance of communication in culture centering (Dutta et al. 2013). While the referenced scholars highlight the importance of communication in processes of social change, this study present minute details of communication in culture centeredness. Such a comprehensive presentation reinforces the commitment to two-way communication and or dialogue as a crucial element in culture centered processes.

Conclusion

The foregrounding of the voices of black youth in this project reconfigures expert's voice and processes that keep an underserved black population at bay in the realm of health programming and implementation. This project provides a shift from objective knowledge to authentic engagement with black youth (Dutta 2008). From this study, we see the transformative potential of CCA. For instance, black teenagers' articulations of a health campaign inverse dominant campaigns that advocate the individual-level persuasive messages used to promote heart health among underserved communities (Dutta 2008).

Another contribution of this study is the concretization of the ideology of resurrecting unheard voices. CCA advocates resurrecting unheard voices as a philosophical position that locates decision making power in the hands of underserved populations (Dutta 2008). However, the process through which this is achieved is scantily documented (Basu 2008). Dominant health communication scholarship interrogates the materiality of locating power in the hands of underserved populations, hitherto represented as agency-less. Often such critique labels the notion of resurrecting voices of underserved as idealistic. The step-by-step narratives provided here about how the young at

heart project evolved yield concrete evidence that counter the philosophy of resurrecting unheard voices as idealistic. This is an important contribution to the culture centered literature because it serves as an artifact that undermines the critique of cynics regarding the resurrection of unheard voices in the discipline of communication.

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