

Shifting the IRB discourse: Culture Centered Interrogation of the Health Communication Literature and the Implications for Theory and Praxis

This study is a critical analysis of the literature concerning IRBs and Health Communication, with a focus on Critical Health Communication (CHC) from 2005 to 2019. The analysis is foregrounded in the Culture-Centered Approach (CCA) (Airhihenbuwa, 1995; Dutta, 2008) that sheds light on the linkages among power, structure, and agency in communicative and social contexts. Three broad themes emerged from the analysis: narratives of frustration among health communication scholars as a result of IRB bureaucracy, shifts from the protection of human subjects to the protection of academic institutions, and an emergent call for the modification of IRB processes. Furthermore, we offer recommendations for navigating IRB hurdles and conclude with the implications for theory and practice in CHC.

Keywords: Institutional Review Boards; Culture-Centered Approach; Critical Health Communication

Introduction

The Burgeoning Interest in IRB Discourse and its Significance

Institutional Review Boards (IRBs) wield enormous power in the conduct of research across universities in the United States. IRBs influence individual and collective knowledge through their regulatory roles and, in so doing, simultaneously privilege certain ideologies while silencing others, thus setting standards that are used to assess quality in the field. Their decisions influence the design, implementation, and assessment of research, which is then calibrated as standard knowledge across disciplines. Such standards serve as criteria for funding of research, which in turn inform policy in government circles. The privileging of a particular way of inquiry may skew the discovery process and ultimately impact policies that govern multiple facets of academic inquiry. We attend to this in greater detail in the discussion section of this paper.

Utilizing the Culture Centered Approach (CCA) to critically interrogate a set of texts, this paper offers a culture centered analysis of the literature on Institutional Review Boards (IRBs) in health communication, with particular focus on scholarship within Critical Health Communication (CHC) studies, wherein we examine the dominant themes in literature from 2005 to 2019. Culture centered analysis is a crucial scientific endeavor that offers an opportunity for critical reflexivity in the body of literature. A CCA approach to the IRB is distinguished from existing approaches in that it questions the meaning of the narratives concerning IRB interactions and the implications for

1 the field as a whole; this approach interrogates taken-for-granted assumptions
 2 about a given subject and generates critical insight that advances the field. This
 3 is crucial, since the mere reproduction of narratives about IRBs without critical
 4 interrogation can be problematic and may result in unforeseen consequences
 5 (Wall, Stahl, & Salam, 2015). Against this background, the Culture-Centered
 6 Approach (CCA) is adopted as a theoretical framework to examine discourse
 7 surrounding the culture, structure, and agency of IRB processes, as articulated
 8 by scholars who seek to engage with disenfranchised populations. IRBs’
 9 asserted objective of protecting human subjects, with particular emphasis on
 10 safeguarding vulnerable populations, and the themes that emerge from health
 11 communication literature that conflict with this overarching narrative, provide
 12 an entry point for reflecting on the ways in which the three tenets of CCA may
 13 shed light on reproduced power dynamics for CHC scholarship within IRB
 14 processes.

15 During the last three and half decades, the discourse surrounding IRBs and
 16 their traditional regulatory processes across universities in the United States
 17 has become an area of interest to scholars, particularly with regard to CHC
 18 (Lincoln & Tierney, 2004; Tierney & Corwin, 2007; Shelton, 2009; Schrag,
 19 2010; Annas, 2001; Noland, 2012). Traditional IRB processes, in this paper,
 20 refer to the processes that require researchers to submit research protocols,
 21 including interview questions for research participants for approval prior to the
 22 commencement of the projects. Strict protocols that require researchers to
 23 submit interview questions prior to project commencement violate the iterative
 24 principle of engaged projects of social change (we engage with this in greater
 25 detail in the discussion section of this paper). The currency of IRB is visible in
 26 the growing number of articles published on the subject. For instance,
 27 increasing interest in IRBs led to the publication of a special edition of the
 28 *Journal of Applied Research on IRBs* (*Journal of Applied Research*, 2005). 36
 29 of the 57 articles published in the special edition contained negative views
 30 about the board (Koerner, 2005). Although the special edition was not solely
 31 devoted to CHC, it provides insight into the body of literature concerning the
 32 board across universities in the U.S.

33 A recent review of the body of work on IRBs yielded 10 articles from over
 34 45 scholars. Topics studied have included the bureaucracy that often results in
 35 delayed approval of research protocols (Fossey, Kochan, Winkler, Pacyna,
 36 Olson, Thibodean, and Cobb, 2018; Schrag, 2010); inaccurate assessment of
 37 risks (Noland, 2012; Cross, Pickering & Hickey, 2015; Lincoln & Tierney,
 38 2004); denial of approval for sensitive topics (Fossey et al., 2018; Henderson,
 39 2018; Noland, 2012; Cross, Pickering, and Hickey, 2015); arbitrary decisions
 40 and abuse of power (Dougherty & Kramer, 2005b); the shift from the
 41 protection of human subjects to the protection of the institution (Annas, 2001;
 42 Flicker & Guta, 2008; Henderson, 2018; Office for Human Research
 43 Protections, 1993; Solomon & Piechowski, 2011); and infringement of
 44 academic freedom (King, Bivens, Pumroy, Rauch, & Koerber, 2018; Schrag,
 45 2010).

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Limitations of current IRB discourse

An inquiry concerning IRBs and critical health scholarship is crucial; however, researchers seeking to broaden the discourse on the subject have been limited to unfavorable narratives in response to IRB which serves the purpose of protecting human subjects from abuse in research. Our review, for instance, revealed that out of 10 articles, only one held a neutral opinion of the IRB process (Yonas, Jaime, Barone, Valenti, Documet, Ryan, and Miller, 2016). Our review of the literature is by no means exhaustive, in terms of IRBs and CHC, but rather is an attempt to distill the reoccurring themes that have characterized IRB discourse over the last 15 years. The unfavorable perception of the IRBs' processes that prevails in CHC scholarship is a concern and warrants attention. The communication discipline elucidates the discourse between, or among, parties in social and other contexts. Negative narratives and the frustration articulated by CHC scholars also have significant impact on their scholarship (Koerner, 2005). While there may be legitimate grounds for concern about some of the cases reviewed, the purpose of this paper is not to undermine the significance of the body that seeks to protect human subjects from abuse, nor to merely rehash the IRB debate. Instead, we argue that the negative discourse surrounding IRBs creates an aporia that brackets our understanding of IRBs and, in other ways, creates additional barriers to entry for CHC scholarship.

Against this background, this paper has the following goals: (a) to critically review the literature on IRB from the period 2005–2019 to identify the dominant themes and identify a trend; (b) Interrogate the meanings and discuss the implications of these themes for the field; (c) offer suggestions for navigating institutional review boards; and (d) argue that a shift in the IRB discourse can advance how researchers approach IRB-related issues.

This paper contributes four insights to the existing CHC scholarship: 1. it shifts the discourse surrounding IRBs and identifies a trend over the past 15 years; 2. it offers recommendations for CHC scholars in terms of strategies for navigating IRB processes; 3. it illuminates the challenges faced by critical health scholars in obtaining IRB approval; and 4. it makes a case for the inclusion of IRB as a methodological question in CHC. Overall, this paper expands the scholarly work and empirical literature on IRB. We begin with a historical review of the purpose of IRBs and subsequently discuss their significance while offering recommendations before concluding with the implications for CHC.

IRB: Power and Roles

There is considerable literature on the history of IRBs, and we do not intend to rehash this well documented history here. However, we will highlight two incidents that contributed to the prominence of IRBs in the United States. The first is the infamous Tuskegee syphilis study that deceptively injected Black men with syphilis in Tuskegee, Alabama between 1932-1972. The purpose of the study was to develop treatment programs for syphilis, and for

this to be successful, researchers needed to establish the effects of untreated syphilis over time. The revelation of this aberration contributed to the National Research Act, which ensures federal oversight of research involving human subjects in the United States. These developments consequently led to the Belmont Report, which stipulates ethical guidelines for the conduct of research involving human subjects in the United States. The three key elements in the report include (a) respect for persons, which emphasizes the autonomy of research participants; (b) beneficence, which places emphasis on the benefit for research participants; and (c) justice, which emphasizes fairness to research participants. For these reasons, IRBs wield significant power and can make or mar a research endeavor, particularly those that involve vulnerable populations. Without the approval of the board, no research involving human subjects can proceed.

Method

Culture Centered Analysis as a Scientific Endeavour

Broadly speaking, literature review is an important scientific endeavor that provides a qualitative and quantitative summary of the discipline in question. Narratives tell stories about the trends that characterize the discipline, whereas meta-analysis provides a quantitative summary of the issues that characterize the discipline. These forms of review identify key trends, theories, and methods, as well as highlight areas that require further study. However, narrative literature reviews do not challenge or problematize key assumptions; thus, they are unable to generate deep critical insight about the subject matter. Conversely, CCA provides empirical evidence about a trend and challenges taken-for-granted assumptions that are revealed. For example, researchers may consciously or unconsciously propagate certain ideologies by building literature. The reproduction of ideology without critical interrogation can be problematic and result in the creation of blind spots that, if unchecked, may lead to unintended consequences in which voices go unheard, as well as outcomes that are detrimental to academic inquiry. To counteract this, CCA provides an avenue for critical reflexivity within the body of literature concerning IRBs and health communication scholarship, which is invariably tied to the work of critical health communication scholarship.

Culture Centered Analysis

In this study, CCA is used to analyze the literature concerning IRBs and CHC. This analytic strategy helps to shed light on the themes and trends that have characterized the literature over the last two decades. Culture centered analysis examines how language can reveal the relationships between interpersonal and social interactions (Dutta, 2008). In this instance, it helped to uncover the relationship between the researchers and the IRBs. A culture-

centered analytic approach is a critical inquiry that includes coding, sorting of categories, identification of themes and relationships, and the drawing of inferences that can answer research questions.

Culture Centered Interrogation

CCA conceptualizes culture as fluid yet constant, as the intersections of culture, structure, and agency consistently influence the choices and arenas in which CHC scholarship can flourish. The three tenets of CCA are, briefly, as follows: a) culture refers to a multitude of shared understandings among any particular group, including the group's values, practices, meaning, and contexts that give purpose to why a given context is agreed upon; b) structure refers to broader organizational mechanisms that design the patterns that constitute the processes to which agents within a particular structure are expected to adhere; and c) agency refers to the autonomous choices that agents enact when faced with the cultural and structural landscapes that shape the context in which choices must be made. Emerging themes problematize the ways in which IRB processes reinforce hierarchies of power that may further marginalize the very populations that IRBs seek to protect. With respect to the purpose of this study, we critically reflect on the collision of IRB culture, structure, and agency within its own landscape, with particular focus on the discourse provided by scholarship that largely influences CHC. The results also illuminate ways in which agency within CHC scholarship can provide an entry point for deconstructing IRB processes, such that CHC may continue to embed its work in frameworks that cultivate reflexivity on such power dynamics. CCA advances theorizing in health in that it helps researchers to understand the complexities and intricacies of power, context, and voice in the field. It has been adopted by scholars to unearth the reproduction of ideology (see Acharya & Dutta, 2012). The authors unearth how HIV/AIDS campaign planners in Koraput, India privilege a biomedical approach that is incongruent with cultural factors, ultimately erasing the voices of local communities in anti-HIV/AIDS projects. Relatedly, Sastry (2016) reveals the exclusion of truckers from HIV/AIDS programming in India.

Similarly, Dutta and Basnyat (2008) interrogated Entertainment Education (E-E), the method of using entertainment platforms such as music and radio, among others, to propagate behavior change concerning family planning in Nepal. The authors reveal the absence of community voices and inattention to contextual factors, as well as the use of Western metrics as indicators of success.

Building upon the works of these scholars, we conducted a CCA investigation of IRBs and CHC. Through our critical examination, we hope to unearth how the persistent rejection of CHC research protocols is justified through the language of “unscientific, ungeneralizable, lack of scientific rigor, inadequately theorized” (Lincoln & Tierney, 2004). The representation of alternative epistemologies in such ways simultaneously silences critical scholarship as unscientific and traditional protocols as scientific. Through our

critical examination, we engage with the implications of the ideological assumptions inherent in the actions and inactions of IRBs.

The CCA-interrogations and articles cited in the literature inspire and inform our analysis in three important ways. Specifically, we draw upon Acharya and Dutta's (2012) interpretation of power. The authors' deconstruction of the unequal power between HIV/AIDS program coordinators in Koraput, India provides guidance for our interpretation of the unequal power relationship between critical researchers and IRBs. We draw upon their interpretation of power in our analysis of the relationship between researchers and the boards. Dutta and Basnyat's study (2008) provide additional inspiration for our analysis. The authors point out that the absence of Nepalese citizens' voices in the Entertainment Education programs emblemizes marginalization. Furthermore, they argue that the discussion of family planning in the programs took place outside of cultural context. Specifically, we invoke their logic about the absence of Nepalese voices in the Entertainment Education messages and the inattention to context in our analysis. For example, in our analysis we reveal that the assessment of CHC scholarship through a postpositive lens is faulty, in that it places it out of context. Second, we also point out that insistence on participants' anonymity in all CHC projects ignores and undermines the unique contexts within which CHC projects unfold. Relatedly, we draw upon their argument in our assertion that IRB's insistence on the submission of research protocols, including research questions, prior to the commencement of the project constitutes a misinterpretation of the context within which CHC projects unfold.

Data and Analysis

The data used for this analysis include the corpus of literature that was published from 2005 to 2019. We limited our analysis to this period due to the preponderance of CHC published within this timeframe. We searched databases (e.g., Google Scholar, EBSCO) for articles using the keywords "IRBs and health communication" and "IRBs and critical health communication"; our search yielded approximately 50 articles. We eliminated any duplicates from the body of literature, and each author conducted a close reading of the articles to identify any emerging themes. During our weekly telephone conferences, both authors shared the emerging themes that they had identified from the data. Next, we developed a categorization scheme detailing the themes, examining repetitions and relationships within the scholar's discussions of the culture, structure, and agency of IRB processes.

Additional Analytical process

Reflexivity

Reflexivity not only allows readers to evaluate the rigor of a study, but also acts as a tool for uncovering biases for deconstruction. The purpose of reflexivity is essentially to examine the impact of the positionality, perspective,

1 and presence of the researchers while decisions are made throughout academic
2 scholastic inquiry (Finlay, 2002).

3 Thus, in addition to analyzing the corpus concerning IRB and CHC, we
4 also reflected upon our personal experience in navigating IRBs across three
5 institutions in the past 10 years. Reflexivity is an important tool in CCA in that
6 it helps the researcher to stay true to the data and bring his/her subjectivity to
7 the table. It is one of the features that distinguishes CHC scholarship from
8 traditional communication research that primarily uses anonymous surveys and
9 other measuring tools to answer research questions that purport to measure
10 objective truth (see Dutta, 2008; Dillard, Anaele, Kumar, and Jamil. 2018;
11 Sastry, 2016). Our 10 years of experience across three universities in the U.S.
12 informed our decision to conduct this analysis and our interpretation of the
13 corpus.

14 *Authors' Backgrounds and Interests*

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17 Our epistemological stance in critical scholarship and our experiences with
18 IRBs across three institutions informed our interest in this inquiry. The two
19 authors of this research adopt a critical approach to the study of health
20 communication, asking “how” and “why” questions, with particular interest in
21 the ways in which structural systems shape the lived experiences of vulnerable
22 populations. Our overarching research methodology is qualitative, utilizing in-
23 depth interviews, focus group discussions, participant observations, and
24 reflexive journaling, instruments that are best suited for the kinds of questions
25 that critical scholars ask: “how” and “why” questions reveal the “inner world
26 of human” (see Chesebro & Borisoff, 2007; Noland, 2012). Furthermore,
27 consistent with the critical paradigm, we believe that the process of listening to
28 the experiences of cultural members, transcribing this data, and translating it
29 into a metanarrative of knowledge constitutes a crucial scientific endeavor.
30 However, gaining access to cultural members can be daunting, considering the
31 barriers that often originate from within dominant paradigms and which shape
32 the cultural and structural landscapes that cultural members encounter
33 (Henderson, 2018). For these reasons, securing IRB approval can be
34 challenging. We elaborate on this in the navigational tips section of this paper
35 and share our experiences in navigating IRBs across different institutions in the
36 United States. This paper emerged from our formal and informal reflections on
37 completing CHC work over the last decade and our experiences in securing
38 IRB approval or abandoning research efforts on several projects. We initially
39 began by documenting and sharing our experiences in navigating IRBs in many
40 instances, examining the similarities, differences, and lessons learned.
41 However, on reviewing the literature, we identified several thematic trends that
42 were supported by reoccurring narratives concerning IRB processes. This
43 informed our decision to conduct a culture centered analysis of the literature, in
44 the hope that it will shift dialogue surrounding IRB and CHC.

45 46 Scenario 1

The excerpt below presents an interaction that took place between us and which illustrates how we practiced reflexivity in the process of writing this manuscript:

First author (F): Hello S. Did you see the call for submission for the special edition on methods?

Second author (S): Oh my God, I did. It's a perfect opportunity for us to write the IRB piece we have been talking about.

F: I completely agree. So, what is going to be the focus? How shall we structure this manuscript?

S: I think we can share our experiences navigating IRBs. Then we can use examples to engage with broader issues of culture, structure, and agency.

F: In terms of structure, we can present this as case studies or scenarios. I mean, you can present your experiences, and I will present mine. Then, we can contrast our experiences and tease out the similarities and differences, and relate our experiences to the tenets of CCA, culture, structure, and agency.

F: So, our next step will be for us each to write up our experiences, and post them on our shared drive before our next phone conference. Second, I think we should each review at least ten articles on the subject, and post these on our literature folder on the shared drive.

The conversation presented above took place following the call for submissions to a special edition on methods in critical communication research. It is important to note at this point that the authors became acquainted with one another while attending graduate school at a research institution in the Midwest, where we were both mentored by the same advisor. Since then, we have collaborated on different projects, including a large grant that worked with African Americans in two states in the Midwest. The projects engaged with African Americans to gain a better understanding of complicated heart conditions and the side effects of cardiovascular pills and engaged Black youth in the prevention of heart disease. At present, the authors are professors at different universities in the U.S. Evident from our brief phone conversation presented above is our decision to document our experiences with IRBs across the different universities and the process by which we determined the manuscript's structure.

Scenario 2

Here is another instance of reflexivity in the development of our manuscript:

F: Hi, S, I have read your narrative about your experiences shared on the drive. Did you also look at mine?

S: Yes, I did. We have had similar experiences. I mean, the stories are similar.

F: Did you get a chance to look at the literature?

S: Oh yeah, that's the next thing I was going to say. There is so much written about this. A lot of scholars have written about their experiences with the board. I am not sure if we should proceed with our initial plan?

F: How about we do a literature review instead of sharing personal experiences?

S: Sounds like a good idea, but I am not keen on literature review because it does not touch on critical issues.

1 F: How about taking a critical approach in our review? So, how shall we frame
 2 this paper? How is it going to be different from what is out there? How will it
 3 make an impact?

4 S: How about we review the literature and see what we find? That will inform the
 5 focus of our paper.

6 F: Perfect. How about we post articles and initial themes on the Dropbox before
 7 our next meeting?

8
 9 Two inferences can be drawn from the excerpts above: (a) the shift in our
 10 research focus occurred as a result of reflexivity and (b) the quest to contribute
 11 to critical inquiry influenced our interpretive lens. Evident from the above
 12 reflection is the shift in the focus of our manuscript. As presented in scenario 1,
 13 our initial intent was to share our experiences in navigating IRBs, but upon
 14 review of the literature, we both found that a slew of experiences with IRBs
 15 had been published by other researchers. This discovery prompted us to rethink
 16 our initial concept. It is also clear from our reflection that our epistemological
 17 stance in critical inquiry informed our methodological approach. For example,
 18 we jettisoned the plan to conduct a conventional literature review, which would
 19 have offered a summary of the trend without critical interrogation. Our critical
 20 interrogation of the contribution of our work emblemizes Dutta and de
 21 Souza's (2008) argument regarding the utility of reflexivity in discovery: that
 22 reflexivity provides a lens through which to examine how the decisions we
 23 make as scholars impact communities. For example, in our reflection we
 24 ponder how our proposed manuscript will contribute to the production of
 25 tangible knowledge that will impact the field. Furthermore, it echoes their
 26 argument regarding the usefulness of reflexivity in directing the gaze toward
 27 ourselves and allowing us to bring our biases and subjectivities to the table.
 28 Our recognition of the redundancy of our original idea for the paper's structure
 29 prompted a reflection that is reminiscent of Kuhn's argument about the
 30 influence of a paradigm in the inquiry process. In his controversial book, *The*
 31 *Structure of Scientific Revolution*, Kuhn argued that scientists within a given
 32 worldview (paradigm) will adopt its methodologies in their inquiry process, a
 33 process he called mob-psychology (Kuhn, 1970). It can be inferred that our
 34 critical approach to the study of communication informed our interpretive
 35 framework (see also Monge, 1977; Zoller & Kline, 2008). For example, our
 36 grounding in critical work inspired us to focus on institutional and bureaucratic
 37 processes that perpetuate inequalities in the creation of knowledge. Reflexivity
 38 provides us with the space to engage in dialogue about the ways in which our
 39 deconstruction exercise will transform the bureaucracy that characterizes the
 40 relationship between CHC and IRB.

41 *Infographic representation of data*

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 44 To provide visual representation of information, we created two tables that
 45 represent the corpus, including the names of authors, title, and year of
 46 publication in chronological order. Each article was selected using the selection
 47 criteria identified in the methods section. Table 1 presents the articles in

chronological order, displaying the articles' breadth over the 15-year span employed in this study. Table 1 also provides details into the range of journals in which this topic emerged, including at least 45 researchers, and issues that surfaced across numerous publications. Table 2 provides additional information about the codes driven by the tenets of CCA, emergent themes, names of authors, and year of publication. Further, we pulled excerpts from select narratives from the literature to enunciate the themes. The table below provides infographics of the articles and the themes identified by our analysis in chronological order.

Table 1. Analysis of IRB References Chronologically

Year	Author(s)	Journal/Publisher	Issues Identified
2005	Dougherty & Kramer	Journal of Applied Communication Research	Shift from protection of human subjects to protection of academic institution Arbitrary decisions Lack of regulations of the excesses of institutional boards Bureaucracy of IRB processes
	Dougherty & Kramer	Journal of Applied Communication Research	Abuse of IRB power Extensive delays in legitimate research Delayed approval of research protocols Restricted access to legitimate research Researcher frustration Coercive compliance Changes in research methodology or process
2010	Schrag	John Hopkins University Press	Threats to academic freedom and discipline Lack of knowledge in differences between social sciences and biomedical research
2012	Noland	Journal of Research Practice	Denial for approval of sensitive topics (perceived assumptions) Changes in research topics Compromise of research process (less rigor quality of research as of result of barriers)
2015	Cross et al.	Critical Sociology	Exacerbated ethical challenges Limitations of traditional IRB

			<p>processes</p> <p>Shift from protection of human subjects to protection of academic institution</p> <p>Silencing of community voices in IRB processes</p> <p>Lack of respect for community voices in IRB processes</p> <p>Discrepancy between IRB versus community ethics</p> <p>Timing of IRB approvals (Delayed approval of research protocols)</p>
	Stellefson, Paige, Alber, Berry, and James	American Journal of Health Education	IRB focus of protection only on autonomous individuals with no consideration for community
2016	Yonas et al.	Journal of Empirical Research of Human Research Ethics	IRB focus of protection only on autonomous individuals with no consideration for community
2018	Fossey et al.	Journal of Personalized Medicine	<p>Delayed approval of research protocols</p> <p>Denial for approval of sensitive topics (perceived assumptions)</p>
	Henderson	Journal of Law, Medicine & Ethics	<p>Denial for approval of sensitive topics</p> <p>Shift from protection of human subjects to protection of academic institution</p> <p>Timing of IRB approvals (Delayed approval of research protocols)</p> <p>Silencing of community voices in IRB processes</p> <p>Researcher frustration</p> <p>Lack of respect for community voices in IRB processes</p> <p>Compromise of research process (less rigor quality of research as of result of barriers)</p>
	King, Bivens, Pumroy, Rauch, and Koerber	Health Communication	Threats to academic freedom and discipline
Total	46 authors	9 Journals/10	22 Themes

 article

Findings

We identified three broad themes that characterize the discourse surrounding IRBs: (a) narratives of frustration with traditional IRB processes, (b) shifts from the protection of human subjects to academic institution, and (c) increasing calls for the modification of traditional IRBs to include voices of cultural members. The table below provides infographics of the themes identified using the tenets of CCA in reference to IRB culture, structure, and agency, as asserted by health communication scholarship. We present these themes in the following paragraphs.

Table 2: *Analysis of IRB themes with emerging CCA tenets*

Theme	Issues Identified	Author(s), Year	Examples
IRB Cultural considerations	Shift from protection of human subjects to protection of academic institution	Dougherty & Kramer, 2005a Dougherty & Kramer, 2005b Henderson, 2008 Schrag, 2010 Nolan, 2012 Cross et al., 2015 Stellefson et al., 2015 Yonas et al., 2016 Fossey et al., 2018 Henderson, 2018	<ul style="list-style-type: none"> • Delegitimization of alternative rationality • Coercive compliance • Lack of knowledge in differences between social sciences and biomedical research • Denial for approval of sensitive topics • Limitations of traditional IRB processes • Lack of respect for community voices in IRB processes • Discrepancy between IRB versus community ethics • IRB focus of protection only on autonomous individuals with no consideration for community
IRB Structural considerations	Bureaucracy of IRB processes	Dougherty & Kramer, 2005a Dougherty & Kramer, 2005b Cross et al., 2015 Fossey et al., 2018	<ul style="list-style-type: none"> • Lack of regulations of the excesses of institutional boards • Extensive delays in legitimate research • Delayed approval of research protocols
IRB Agency considerations	Power to approve or deny	Dougherty & Kramer, 2005a Dougherty & Kramer, 2005b Schrag, 2010 Nolan, 2012	<ul style="list-style-type: none"> • Arbitrary decisions • Abuse of IRB power • Silencing of community voices in IRB processes

Cross et al., 2015
Henderson, 2018

Researcher Agency considerations	Threats to academic freedom and discipline	Dougherty & Kramer, 2005b Schrag, 2010 Nolan, 2012 Cross et al., 2015 Henderson, 2018 King et al., 2018	<ul style="list-style-type: none"> • Researcher frustration • Changes in research methodology or process • Changes in research topics • Exacerbated ethical challenges • Compromise of research process (less rigor quality of research as of result of barriers) • Researchers call for modifications in IRB processes
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Frustration, bureaucracy, and infringement

From 2005 to 2019, we reviewed approximately 50 articles and encountered an overwhelmingly negative discourse about IRBs. From these articles, we selected a representative sample. Negative comments about IRBs were noted in the body of literature reviewed. A seminal book, *Ethical Imperialism: Institutional Review Boards and Social Sciences* (Schrag, 2010), articulated the threat that IRBs pose to academic freedom and the independence of the discipline, particularly in non-medical research. Similarly, the Journal of *Applied Communication Research* published a special edition about IRB-related issues in 2005. The special edition featured stories of researchers' frustration with IRBs, delayed approvals, denial of approvals, and changes in research topics. For instance, 36 of the 57 articles published in the special edition contained negative views about the board (Koerner, 2005). Although the special edition was not solely on CHC, it provides insight about the body of literature concerning the board across universities in the U.S.

Here is an excerpt from Noland (2012) that provides additional evidence about the frustration encountered by CHC scholars in securing approval from IRBs.

Many people doing research on topics pertaining to sex or sexuality have reported difficulties obtaining IRB approval. When faced with sensitive research topics, many IRBs recommend the use of anonymous surveys, rather than face-to-face interviews, to protect subjects. However, vital qualitative insight that could be gained from in-depth interviews is lost (Noland, 2012, p. 4)

Three key issues are evident from the excerpt: (1) the persistent rejection of protocols that do not conform to traditional expectations/standards of research that uses survey instruments and measuring scales, (2) frustration of scholars as a result of such criteria, and (3) delegitimization of alternative rationality. From a culture centered lens, the insistence on certain instruments misses the importance of context. Qualitative instruments, including interviews and focus group discussions, allow the researcher to understand different

1 perspectives on an issue that are not visible in the use of anonymous scales (see
 2 Chesebro & Borisoff, 2007). Also evident from the excerpt is the assessment of
 3 CHC grounded research through a medical lens. Missing from this line of
 4 assessment is the importance of context. The context in which CHC grounded
 5 research differs from medical or traditional research is different and should be
 6 evaluated accordingly. One of the key arguments of CCA is that top-down
 7 research projects that are devoid of context have resulted in the formulation of
 8 policies that are incongruent with local contexts (Dutta, 2008; Airhihenbuwa,
 9 1995). For example, the lived experiences of individuals about sex and topics
 10 related to sexuality are a complicated phenomenon and cannot be pigeon-holed
 11 or restricted to categories provided by anonymous survey instruments. The
 12 denial of CHC projects exemplify CCA's argument about structure, the
 13 institutional schema that shape and influence societal operations. In addition to
 14 the frustration encountered by CHC researchers in securing approval on such
 15 sensitive subjects, IRB's insistence on a particular way of investigation results
 16 in the reproduction of ideology. This ideology is that traditional research that
 17 uses survey instruments is the holy grail of the field. The excerpt above is
 18 emblematic of CCA's argument about agency, the inherent ability of
 19 individuals to challenge structures. The reflection articulated by the authors
 20 brings to public attention actions of the board that inhibit understanding of
 21 human phenomena. In this way, CCA helps researchers to understand the
 22 intricacies of structure, power, and voice.

23 Here is another excerpt from Noland (2012) that sheds additional light on
 24 the frustration of CHC scholars in obtaining IRB approval:

25
 26 As a sex researcher, like many other sex researchers, I am continuously denied
 27 approval or asked to compromise my research process so radically that the
 28 original study becomes untenable. While I fully acknowledge that the IRB is an
 29 important entity and that research subjects ought to be protected, I contend that
 30 when it comes to sensitive topics, many IRBs err on the side of caution, to the
 31 detriment of research quality (Noland, 2012, p. 2).

32
 33 The context here is health. According to the author, the purpose was to
 34 understand the lived experiences of participants regarding sex. Evident in the
 35 opening sentence is the frustration encountered by the author due to frequent
 36 denial of his protocols by the board. The narrative about consistent denial of
 37 protocols is telling and corroborates the frustration uncovered in the literature.
 38 CCA is averse to social and institutional structures that undermine the agency
 39 of populations at the margins. It can be inferred that the consistent denial of
 40 such protocol is due to IRB's lack of knowledge of this line of inquiry. In this
 41 context, IRB represent an institutional barrier to discovery that is rooted in
 42 alternative epistemology. The quote, "I am continuously denied approval or
 43 asked to compromise my research process so radically that the original study
 44 becomes untenable, Noland, 2012, p.2." eloquently captures the frustration of
 45 CHC scholars. Here, the language of non-compliance with IRB process is
 46 employed to delegitimize CHC research that seeks to provide alternative ways
 47 of discovery. CCA provides the tool to change the status quo by providing a

1 theoretical lens for CHC scholars to highlight the inherent weakness of
2 traditional IRB approval process.

3 Below is an additional instance of frustration shared by Bach:

4
5 Narrators argue that the perceived role and function of the IRB is often broadly
6 defined. Narrators suggest that a board's span of control ranges from its members
7 believing their role is to critique the theory and methods of projects under review,
8 rather than ascertain the risks to the subjects involved, to taking an inordinate
9 amount of time to review proposals. Of particular note is Narrator 14, who reports
10 that the approval process involved nine applications to the board, approximately
11 500 pages of emails to board members, and 11 months from submission to
12 ultimate approval of the project. Other narrators lament that it is almost
13 impossible for students enrolled in research methods courses to gather data since
14 the review process takes longer than one semester (Bach, 2005 p. 261)

15
16 The narrative above sheds light on the frustration of CHC researchers
17 regarding IRB bureaucratic processes, including the enormous amount of time
18 required to secure approval for projects grounded in alternative rationalities.
19 The author discusses barriers to entry that stem from ontological approaches to
20 academic inquiry that impose subjective criteria on theoretical slants and
21 methods. This becomes particularly important when applied to CHC
22 scholarship, which is often approached as alternative to the "norm". Even IRB
23 approval to teach research methods courses are limited in access to real world
24 data collection due to time constraints. The excerpt exemplifies IRB's (a)
25 overwhelming power in influencing what counts as valid knowledge, (b)
26 structure, social and institutional processes that dictate how things are done in
27 society. For instance, the action of IRB in the excerpt delegitimizes certain
28 research methodology, in this case non-biomedical research, as a valuable
29 method of inquiry. In this instance, it is logical to argue that the action of the
30 board is a structural barrier that inhibits access. Overall, CCA serves as a lens
31 to unearth the complicity of IRB in advancing/privileging the biomedical
32 research paradigm as a valid method of inquiry over CHC. The health
33 communication field is replete with the limitations of postpositive research that
34 does not reflect the complexity of a phenomenon (see Dutta, 2008;
35 Airhihenbuwa, 1995).

36 There is additional evidence about the frustration experienced by CHC
37 scholars. Dougherty and Kramer (2005) present scenarios that reveal the
38 frustration of CHC over IRB bureaucracy. Here is an excerpt from their article
39 published in the trailblazing special edition of *Journal of Applied*
40 *Communication Research on IRBs*:

41
42 There is little room to appeal what at times appear to be arbitrary decisions and
43 directives. For example, IRBs claim to have the authority to tell researchers to
44 destroy previously collected data although doing so does not protect those
45 subjects since any harm would have already occurred. It is certainly important
46 that IRBs should not be influenced by powerful administrators asking them to
47 allow research that harms human subjects. But researchers appear to have no
48 recourse if they disagree with IRB decisions or directives other than appealing to

the same IRB that made the decision. The time delays of such appeals may not be worth the effort even if the appeal is ultimately successful (p. 187).

The excerpt instantiates structure, CCA's argument about social and institutional structures that influence the way systems operate in different contexts. The phrase, "there is little room to appeal what at times appear to be arbitrary decisions and directives." Implicit in this phrase is the finality embedded in the decisions of the board in many instances. Another inference drawn from the phrase is the frustration of CHC in such circumstances. The phrase, "But researchers appear to have no recourse if they disagree with IRB decisions or directives other than appealing to the same IRB that made the decision." The fact that researchers whose protocols are denied have little choice but to go back to the same board echoes CCA's argument about how social and institution structures undermine the ability of populations at the margins. In this instance, it demonstrates how IRBs may undermine CHC-grounded research. Also visible from the excerpt is the enormous amount of time required to navigate IRB bureaucracy, "The time delays of such appeals may not be worth the effort even if the appeal is ultimately successful." The above phrase corroborates the frustration of scholars about the enormous amount of time reported in the literature. The excerpts presented in the paragraphs reveal the frustration of CHC researchers in the hands of IRBs and bring to the forefront the board's bureaucratic processes that inhibit alternative knowledge discovery processes.

Shift from the protection of human subjects to institutions

The literature also revealed IRB's shift from the protection of human subjects to the protection of institutions, compelling researchers to change their research protocols and methods (Dougherty & Kramer, 2005; Noland, 2012; Annas, 2001). The researchers noted that there are no institutional structures in place to challenge IRB decisions. Changes in research methods have major implications for the production of knowledge. It legitimizes one way of knowing over another. We attend to the implications in the discussion section. Below is an excerpt that eloquently captures this theme:

Irony #1: IRB Protecting Human Subjects or Protecting Institutions?

The first irony involves the protective focus of the IRB. During the approval process, our proposal was sent to the university general counsel—the university's legal authority—to determine whether the IRB should have oversight. It is ironic that the ultimate decision-making authority over human subject oversight was not the IRB, but the legal counsel in charge of protecting the university. The purpose of IRBs is to protect human subjects, a purpose to which we readily agree. Our situation reinforces the observations recorded elsewhere that the focus of IRBs has moved from protecting human subjects to protecting institutions (Annas, 2001; Dougherty & Kramer, 2005, p. 185.)

The excerpt is a part of their recollection of the bureaucratic process of securing approval for the special edition of *The Journal of Applied Communication Research* on IRBs. Apparent in the excerpt is the shift from the protection of human subjects to the protection of the institution. The shift documented above instantiates CCA's argument about institutional structures that inhibit the agency of populations at the margins. In the backdrop of this shift, CCA provides a lens for deconstruction of this shift.

Here is another excerpt from Koerner (2005) that echoes the shift from the protection of humans to the protection of institutions.

Scholars reported that their IRBs were motivated by an interest in protecting the university or otherwise pursuing their own agendas unfavorable to certain research methods or subject matters for research. For example, a number of narratives reported that IRBs were micromanaging research projects, including proofreading IRB applications or suggesting trivial changes in consent forms (p. 235).

Again, conspicuous in the excerpt is the shift from the protection of human subjects to the protection of the institution. Such a shift in the focus of the board signifies a bureaucratic process that hampers the conduct of research by CHC scholars. It emblemizes CCA's argument about the ways that structural barriers inhibit agency. In the first instance, for example, the language of illegality is employed to delegitimize CHC protocols. The excerpt exemplifies the collision of culture, structure, and agency. IRB's culture is to regulate research. One way it operationalizes such regulation is through the language of illegality to describe protocols that are incongruent with its stipulations of scientific rigor. Such descriptions serve as criteria for rejection. The interrogation of such criterion by CHC scholarship signifies agency, the autonomous choices that communities enact when they are impacted by contexts (in this case, the actions of IRBs). The excerpt in many ways shows the linkages across the challenges encountered by CHC scholarship. For instance, delays in the approval process are linked to bureaucracy, which automatically leads to the frustration of researchers. In sum, the excerpts presented in this theme elucidate the complicity of the board in the protection of institutions rather than human subjects, a trend that poses a significant challenge for CHC researchers and to the discovery of knowledge.

Modification of IRBs/Configuration

An emergent theme that we identified in our review of the IRB literature is the call for the modification of the traditional IRB configuration, particularly for critical health projects that are grounded in Community-Based Participatory Processes (CBPR). The body of literature suggests the need to include cultural members in the protocol review process (Grignon, Wong, & Seifers, 2008; Shore et al., 2011; Oglala Sioux Tribe, 2013). Proponents of this modification argue that it will strengthen ethically grounded research and provide better protection for communities in that decisions, once agreed upon, cannot be

thwarted by any authority. They also argue that such modifications will enhance the benefits to the community (see Albert Einstein College of Medicine, 2012; Durham Community Research Team, 2011; Macaulay, Delormier, & McComber, 1998; Oglala Sioux Tribe, 2013). This body of work also posits that the proposed modification should include guidelines to assist researchers in managing any conflicts of interest that may arise during the research process. Significantly, they note that modifying traditional IRB processes will address issues that the former did not, including long-term risks to the community as well as the researchers' cultural competency.

Below is an excerpt that echoes the need to reconfigure IRB boards: Cross, Pickering, and Hickey, 2015:

The traditional, biomedical model of research places the community and potential participants outside the interactions between researchers and IRBs and the attendant discussions regarding ethical principles in research. The traditional IRB review model complies with a 'top-down' model of research, where the discussion of research design and ethical human subject participation occurs within a circumscribed dialogue between the IRB and the researcher with the Belmont and 45CFR46 informing the IRB's perceived role (p. 1011).

Three inferences emerge from the excerpt: (a) exclusion of populations at the margins from research decisions; (b) perpetuation of power inequities in research; and (c) disconnect between traditional IRB processes and the nature of phenomena, hence the call for reconfiguration of the boards. The excerpt above reveals the exclusionary tenets of traditional IRB that paradoxically marginalize cultural members they purport to protect. The non-inclusion of cultural members completely negates their input in decisions that concern them (community members). CCA is averse to theoretical processes that undermine the voice of those impacted (see Dutta, 2008; Acharya & Dutta, 2012). The excerpt also echoes CHC's argument about the exclusionary tendencies of traditional IRBs and disconnect from contemporary problems. Connected to this is the power connotations inherent in the actions of the board. Implicit in the excerpt is the point that traditional IRB protocol reinforces existing power relationships, which define researchers as experts and cultural members as objects (Cross, Pickering, and Hickey, 2015; Dutta, 2008; Anaele, 2019). The excerpt echoes the argument among CHC scholars about the disconnect between traditional health communication and CHC in terms of social change. Explicit in the excerpt is the point that traditional IRB processes are out of sync with contemporary arguments about voice and diversity. The excerpt demonstrates the missing voice of cultural members who are supposedly impacted by the decisions of the board. Their exclusion from the process of authenticating or approving research processes is problematic. CCA centralizes the voice of populations at the margins in processes of social change. However, the excerpts show the conspicuous absence of cultural members, whom IRB purportedly seeks to protect.

Here is another excerpt that echoes the need to reconfigure traditional IRB approval processes:

For example, some CBPR projects find that participants want to be identified in order to receive credit for their accomplishments or to be a resource to others working on similar issues. This desire to depart from the convention of anonymity is a challenge to the typical IRB policy rule, requiring confidentiality and/or anonymity in order to minimize risk – a purported ethical rule that, as noted above, cannot apply to all research scenarios. In cases like this, fully informed and engaged participants see little risk and instead see benefit in being named. When the IRB enforces the rule of anonymity without respect for the community's wishes and the actual risk, it undermines the will and values of the community without improving the quality of the research or reducing risk (Cross, Pickering, and Hickey, 2015, p.5).

The authors offer additional insight in the following excerpt:

To address these conflicts, CBPR scholars and communities have been calling for modifications in IRB/REB practice and procedures (Grignon et al., 2008; Shore et al., 2011). Aboriginal and Tribal Nations have been leaders in managing ethical research by developing their own research review boards that have authority to approve research and to modify the requirements of research imposed by outside IRBs (Macaulay et al., 1998; Schnarch, 2004). For example, the Oglala Sioux Tribe Research Review Board (Cross, Pickering & Hickey, 2015, p. 1012).

The first part of the excerpt is telling and provides a counter narrative about anonymity in CHC grounded research, the idea that participants should remain anonymous. This is an important criterion that leads to the rejection of research protocols that violate the rule. The excerpt above calls into question the utility of this criteria in all research projects. The use of anonymity as the standard for all research projects is incongruous with the emergent nature of human enquiry, especially collaborative research projects grounded in the principles of community-based Participatory Research (CBPR). Cultural members now require recognition, a sense of agency. They want to be recognized for their participation. They want their contributions and roles in research to be acknowledged. The revelation is analogous to CCA's argument about dismantling institutional structures that perpetuate hegemony. IRB's insistence on a certain kind of anonymity represents hegemony because protocols that are incongruous with such are rejected. Second, the articulation here symbolize agency, the inherent ability of marginalized populations to challenge structures and processes that keep them at bay in the realm of decision-making. For instance, the narratives bring to the fore the inherent weakness of traditional IRBs' insistence on anonymity of participants on all research projects.

Also explicit in the second part of the excerpt is the call for the reconfiguration of traditional IRBs. The call is foregrounded in the inadequacy of the conventional IRB position on anonymity that places the decision-making solely in the hands of the board, an approach that excludes cultural members from participating. Other scholars draw attention to the ways in which traditional IRB processes lack inclusivity with respect to voices from marginalized populations within the internal review process , calling not only

for greater inclusivity of voice, but also for authoritative input that seeks to deprioritize institutional voices over community (Yonas et al., 2016). The narratives in this theme touch upon three key points: diversity and inclusion in research approval processes, interrogation of anonymity requirement in research, and the need for changes to current practice.

Discussion

Critical Interrogation: Implications for CHC Scholarship and Concluding Thoughts

The aims of this study were to critically review the body of literature concerning IRBs and CHC scholarship from the last two decades, to highlight the implications of the discourse surrounding IRB, and to offer recommendations for navigating the hurdles associated with IRB processes. Having reviewed the literature and discourse surrounding IRBs, in the following section, we highlight the implications. Specifically, we examine the implications of our findings as they pertain to two broad areas: (a) the implications of the traditional IRB processes for power and positionality in relation to cultural members and the implications for CCA; and (b) the implications for timing from multiple perspectives, including those of the cultural members, the researcher, and grant-funded programs. We foreground our discussion in terms of CHC, specifically the CCA.

Hegemony - IRB Power and Perpetuation of Inequality

The first theme that we will address is the perpetuation of power that is intrinsically tied to inequality. The CCA that forms the theoretical framework guiding our analysis disapproves of systemic structures that impede equity in processes of social change (Dutta, 2008). The discourse/narrative revealed in our analysis of the literature indicates that the IRB perpetuates an inequality that CCA seeks to deconstruct; for example, traditional IRB protocols that require CHC researchers to submit protocols with an *a priori* set of questions that will be asked of community members violate the equity principle that a CCA promotes. As the excerpt below reveals, “When faced with sensitive research topics, many IRBs recommend the use of anonymous surveys, rather than face-to-face interviews, to protect subjects. However, vital qualitative insight that could be gained from in-depth interviews is lost,” (Noland, 2012, p. 4). The insistence on a method rooted in measurement scales renders alternative methods invalid. This is the core of the argument of CHC scholars (see Airhihenbuwa, 1995; Lupton, 1994; Dutta-Bergman, 2004; Dutta, 2008; Shome & Hedge, 2002; Acharya & Dutta, 2012). This observation is significant because the method of discovery plays an important role in the knowledge that is produced both individually and collectively (Monge, 1977). Changes in research methods have major implications for the production of

knowledge; for example, traditional IRB processes that compel researchers to submit an *a priori* set of questions inadvertently legitimize a certain kind of discovery as the only method, a practice that undermines the key argument of CHC scholarship. The kinds of questions that researchers ask are interconnected with their epistemological stance as well as their method. In combination, these result in the knowledge that is produced both individually and collectively by the discipline (Monge, 1977). The reproduction of ideology, which in this instance is the validation of Eurocentric discovery methods, has been documented by CHC scholars (see Lupton, 1994; Airhihenbuwa, 1995, Airhihenbuwa & Obregon, 2000; Dutta, 2008; Dutta & Basnyat, 2008). Such a notion undermines the philosophy of CCA, the theory guiding our investigation. Escobar (2011) in his book, *Encountering Development*, eloquently documents the importance of developing solutions from within. In this context, the importance of paying attention to the articulations of CHC members on how CHC research unfolds merits attention. Dutta, Basu, Jones, Adams, and Ellis (2013) in their essay, *Negotiating Our Postcolonial Selves*, challenge reviews that compel them to cast knowledge in a certain way. The reviews are grounded in the assumption that Western knowledge rooted in “Western instruments” is the only standard for discovery of valid knowledge, a position that has been challenged by CHC. This line of argument is emblematic of Chakrabarty’s (2000) notion of history 1 and 11. The author uses the metaphor of history 1 and 2 to represent the perpetuation of Eurocentric knowledge systems, whereas history 11 represents knowledge that originates from the global South. Contextualized here, the persistent rejection of CHC protocols as unscientific and ungeneralizable by the board represent history 11, while the endorsement of biomedical and traditional protocols represent history 1, thus reproducing the ideology of post-positive research methodology.

Further, the determination of the questions prior to the engagement of cultural members in CHC initiatives evidently renders community voices irrelevant in the collaboration process. The excerpt below is useful, “When the IRB enforces the rule of anonymity without respect for the community’s wishes and the actual risk, it undermines the will and values of the community without improving the quality of the research or reducing risk,” (Cross, Pickering and Hickey, 2015, p. 1012). Such protocol advances Western science as superior to local articulations. Also evident from the narratives is that such rigid IRB protocols fall short of CHC and are culturally inappropriate; for example, in some instances, consent forms may reify the researcher community or impose a subject/object relationship. Again, structures and processes that perpetuate researcher/object dynamics in social change initiatives violate CHC tenets (Mustanski & Fisher, 2016; McGregor, Hensel, Waltz, Molnar & Ott, 2017). Culture-centered projects promote equity and humility.

Hegemony

The denial of approval to critical health research protocols that are incongruent with traditional IRB expectations is symptomatic of hegemony.

1 Hegemony is the domination of a thought pattern that has become accepted as
 2 standard operating procedure. In academia it is evident in the epistemological
 3 stance on how research questions should be framed (Foucault, 1970; Kuhn,
 4 1970). In the discipline, any framework that is contrary to the norm is
 5 discarded and regarded as invalid. Hegemony is perpetuated in the field
 6 because it becomes a standard of acceptance at elite journals. Conversely,
 7 research processes that do not conform to the standard are rejected. According
 8 to the body of literature, IRBs reject and disapprove research protocols that fail
 9 to conform with the dominant IRB framework for research questions. In this
 10 way, IRB hegemony limits the understanding of phenomena and becomes a
 11 roadblock for CHC scholars. However, we note that without such hegemony,
 12 advances in theory and practice will not occur. Highlighting such limitations
 13 opens the discursive space and facilitates scientific debate.

14

15 *Connecting the dots: Culture, structure, and agency*

16

17 In this section, we relate our findings to the tenets of CCA, the theory
 18 guiding our inquiry. The findings touch upon culture, structure, and agency, the
 19 tenets of CCA. We begin with an explication of the meaning of culture and its
 20 fluidity, complexity, and implications for theorizing.

21

22 *Culture*

23

24 Our findings shed light on the fluidity and complexity of culture. Culture
 25 is a collective agreement of values and norms within a specified group that is
 26 consistently in flux and static in response to the structures that shape tangible
 27 boundaries while responding to the agency of members that may or may not
 28 subscribe to those cultural norms. The World Health Organization (WHO) in
 29 its 2017 report acknowledged the centrality of culture in health theorizing and
 30 praxis (Napier, Diepledge, Knipper, Lovell, Ponarin, 2017). Our interpretation
 31 of culture is foregrounded in CCA, which is our overarching theory. Culture is
 32 central in CCA and serves as a lens for deconstructing how certain ideologies
 33 are perpetuated while others are simultaneously erased. For instance, our
 34 analysis reveals how IRB's culture of endorsing research protocols that
 35 conform to its *a priori* standard has become the yardstick for rejecting
 36 protocols that are incongruent with its culture. What becomes apparent here is
 37 the perpetuation of Western/Eurocentric discovery methodology as superior to
 38 CHC protocols. The body of CHC scholarship challenges the taken-for-granted
 39 assumption inherent in such contexts. CHC scholars draw an analogy between
 40 culture-centeredness and culture sensitivity (Dillard et al., 2018; Dutta, 2008).
 41 The former denotes authentic engagement of cultural members in projects of
 42 social change, whereas the latter describes the rhetoric and cosmetic
 43 application of culture to justify top-down initiatives as culturally grounded.
 44 Dillard et al. (2018) interrogate the cooptation of culture in community-based
 45 projects that perpetuate top-down ideologies. In this analysis, we unearth how
 46 culture is employed to justify the rejection of CHC protocols, thus illuminating

the complicity of IRBs in advancing Western ideologies about what counts as knowledge.

Structure

The rejection of CHC research protocols on the grounds that they are unscientific instantiates CCA's argument about structures---social and institutional processes that influence decision-making in specific contexts. CHC scholars have documented the different ways structure inhibits the participation of cultural members in decision-making in health and other contexts (see Escobar, 2011; Freire, 1970; Airhihenbuwa, 1995; Dutta & Basnyat, 2008 Acharya & Dutta, 2012). Our findings here represent the subtle ways in which IRB boards reproduce inequality in the realm of what counts as credible research. Inherently embedded in the board's decision to approve or reject protocols is power. This embodies the unequal position to make decisions on a subject. CCA foreground the importance of paying close attention to power inequity. In this context, it refers to the authority of the board to approve and reject protocols.

Agency

Agency embodies the ability of populations at the margins to challenge the structures that keep them at bay in the realm of decision-making. The currency of CHC narratives in the literature symbolizes agency. For instance, we reviewed over 50 articles that challenge the actions of the board. In addition to revealing the linkages among culture, structure, and agency in the CHC and IRB body of literature, we echo the argument that the processes articulated by CHC scholars are by no means inferior to the ideologies being propagated by post-positive research tradition that is immensely supported by the IRB boards, hence the need to calibrate the ideas as standard for evaluating credible research. CHC scholars have written about agency (see Escobar, 2001 Dutta, 2008; Lupton, 1994; Freire, 1970). Dutta and Basnyat (2008) note that acknowledging the missing voice of Nepali communities in reproductive health entertainment education was a *sine qua non* for impactful E-E programs. Their argument is a counter narrative to top-down E.E that ignores the context and culture in which family planning decisions occur in Nepal. Connaughton et al., (2017) document the importance of agency in the health promotion. They document the role of local leaders in the prevention of the spread of Ebola in the global South (See Connaughton, Kuang, & Yakova, 2017). The success of the Oglala Sioux Tribe Research Review Board further concretizes the inclusion of local communities in the IRB boards. In the project, cultural members participated in the approval of protocols and this resulted in an impactful program (Cross et al., 2015). Our interrogation of the meanings and taken-for-granted assumptions about the narratives in the IRB and CHC literature is consistent with CCA's commitment to create equitable dialogic spaces among culture, structure, and agency. Structure in this context refers to

1 IRB's strict traditional processes that purport to protect vulnerable populations,
 2 whereas culture represents the CHC narratives about the nature of CHC
 3 research.

4 *Implications of Timing*

7 Another implication of the discovery is the importance of timing. Timing
 8 is a crucial element in CHC initiatives, as it touches upon different aspects of
 9 critical health scholarship (King et al., 2018). Timing is crucial for researchers
 10 on the tenure clock in that delays may have a negative impact on them. The
 11 researcher's productivity is measured in terms of publications in peer-reviewed
 12 journals. As such, delays in the approval of CHC initiatives undermine the
 13 growth of the scholar. Furthermore, the timing of IRB protocols has
 14 implications for the collaborative process. CHC initiatives that are
 15 foregrounded in the principles of equity and respect for cultural members seek
 16 their input in all aspects of the project, including IRB approval. Therefore,
 17 seeking IRB approval before their engagement violates the principle of equity
 18 upon which such projects are foregrounded. Furthermore, timing is also crucial
 19 in that the timely engagement of cultural members from the start of the
 20 program embodies authentic engagement. Therefore, traditional IRB processes
 21 that negate this undermine the significance of cultural members in the overall
 22 research project. Research projects that decide upon the protocols before the
 23 engagement of cultural members relegate the contributions of cultural members
 24 to the background. Timing is also important in that community needs are time-
 25 sensitive and wanton delays in the approval of research protocol are an affront
 26 to community needs and antithetical to CHC tenets. In the context of grant-
 27 funded projects, timing is key. Grant-funded projects are time-bound and
 28 delays may result in the loss of grants, which may in turn negatively impact the
 29 community. The narratives reported in the special edition of the *Journal of*
 30 *Applied Communication Research* are consistent with those identified in the
 31 present review. The following section offers some suggestions for navigating
 32 IRB hurdles.

35 **Tips for Navigating IRB**

37 Drawing upon the literature, case studies, and the authors' experience of
 38 navigating IRBs on multiple CHC projects across three institutions, we offer
 39 some recommendations aimed at helping CHC scholars navigate IRB processes.
 40 We have led complex research projects that involved back-and-forth
 41 communication with IRBs. Here, we present two such experiences. The first
 42 was a multi-year grant that adopted the use-inclusive approach to build peace
 43 in communities at the margins. Although the scenarios and contexts were
 44 volatile, our approach called for dialogue between opponents. The conflicts
 45 ranged from chieftaincy tussles between royal families, land disputes between
 46 communities, and conflicts between communities and students to disputes

1 between corporations and communities over compensation to community
 2 members. Some of the conflicts resulted in the deaths of cultural members
 3 from opposing factions. Our overarching research method is to promote
 4 inclusive participation. This involved bringing the disputants into a dialogue
 5 with the aim of peacefully resolving a conflict. The issues and the contexts had
 6 the propensity for violence; thus, the navigation of IRB processes was
 7 particularly complex.

8 9 *Provision of Culturally Appropriate Letters*

10
11 One strategy that the authors have utilized in the past is the presentation of
 12 culturally appropriate letters from faculty, practitioners, and reputable cultural
 13 members from the research site. These letters attest to the cultural
 14 appropriateness of the research methodologies and have, in many instances,
 15 allayed the IRB's concern about any potential harm to the cultural members.
 16 Through this process, we realized that IRB members are sometimes unfamiliar
 17 with the cultural contexts of the research projects, thus, their actions are
 18 inconsistent with cultural reality. In many instances, the ability to produce
 19 letters from colleagues who have experience in global research helps to clarify
 20 any misconceptions that may lead to disapproval of protocols.

21 22 *Timely and Informal Consultation*

23
24 Timely and informal consultation with IRB staff members and the
 25 committee is another practice that may help to minimize delays in the approval
 26 of research protocols. During face-to-face meetings with IRB staff and
 27 committee, we shared our draft IRB applications and supplementary materials
 28 for feedback (supplementary materials include consent forms and recruitment
 29 information). These steps may minimize the back-and-forth communication
 30 that typically characterizes the CHC IRB application process. Timely
 31 consultation is crucial in view of the large volume of applications reviewed by
 32 IRB offices. IRBs are often understaffed, undertrained, and underfunded,
 33 particularly at smaller institutions. The combination of these factors can
 34 negatively impact an IRB's turnaround and efficiency.

35 *Being Proactive*

36
37 Another important strategy in navigating the IRB hurdles in CHC
 38 initiatives is the adoption of a proactive approach. To this end, we encourage
 39 CHC scholars to anticipate the board's questions and to offer answers before
 40 these questions arise. This helps the scholar to frame the issues for the board.
 41 In the peacebuilding initiatives presented above, the research team anticipated
 42 the board's questions about insecurity and the safety of the cultural members
 43 who participated in our project and provided comprehensive narratives.

Future Directions

While our culture-centered interrogation of the CHC and IRB literature contributes to understanding of the intersections of culture, structure, and agency, it has some limitations that provide opportunities for future research. For instance, negative bias by scholars who had negative experiences with their boards may have influenced their perception of IRBs. We recognize that there may be legitimate grounds for some of the denials reported in the literature. For this reason, additional research will strengthen this timely and relevant topic. We also acknowledge that our epistemological grounding in CHC may have influenced our reading of the texts. For this, we call for more research in this relevant topic.

Conclusion

Drawing upon the literature presented in this paper, we echo the argument for a paradigmatic shift in IRB processes. We advance the argument for a shift in the configuration of IRBs. The changing landscape of social change requires an inclusive body to review research protocols. The inclusion of community members in the IRB has been successful in many documented instances (Henderson, 2018; Yonas et al., 2016); for example, Aboriginal communities actively participated in IRB processes, and the results have been encouraging (see Cross et al., 2015; Grignon et al., 2008; Shore et al., 2011). The Oglala Sioux Tribe Research Review Board is a prime example (see Macaulay et al., 1998; Schnarch, 2004; Cross et al., 2015; Albert Einstein College of Medicine, 2012; Durham Community Research Team, 2011; Oglala Sioux Tribe, 2013). The examples cited here lend credence to the benefits of this shift. The findings also echo the importance of changes to traditional IRB approval processes across institutions.

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