
Fundamental Researcher Attributes

**Reflections on ways to facilitate
participation in Community Psychology
doctoral dissertation research**

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Through their research efforts, many scholars from different disciplines have made it their mission to address blatant health disparities present in today's society. Apart from raising social consciousness and directing attention to gaps in the quality of health care available across various marginalised groups in communities, these researchers have dedicated part of their life's work to making a difference by attempting to ensure equal access to health services, as well as support from public health policies, for often ignored and underprivileged populations. They have added a new dimension of social relevance to their work by incorporating egalitarian perspectives and reparative justice values in the purpose, design, methodology and outcome of their research.

Over the years, as more scholars realised that efforts to bridge the gaps in the availability and quality of health services between the community's marginalised and privileged were a means to promote altruism through research, many of them began to search for approaches that would complement their new-found purpose.

One such approach was participatory research, which emerged from the context of the structural crises of underdevelopment in Africa, Asia and Latin America of the early 1970s (Wallerstein & Duran 2008). Despite its many changing versions along the way, many adherents remained faithful to the tradition of what is now commonly referred to as Community-Based Participatory Research (CBPR). As an alternative research paradigm integrating education and social action to reduce health disparities, CBPR proved to be an orientation to research that focuses on relationships between academic and community partners, with principles of co-learning, mutual benefit and long-term commitment that incorporates community theories, participation and best practice in research (Wallerstein & Duran 2006). Because CBPR facilitated collaborative, equitable partnership in all research phases, and involved an empowering process, its principles became a good fit for studies that aimed to address social inequities such as health disparities. Since it

promoted co-learning and capacity-building among all partners, CBPR logically stood a better chance of influencing many social determinants of health that affected marginalised communities (Israel et al. 2008).

As interest in CBPR as an orientation increased over time, published literature on how its principal tenets could actually be tapped to achieve better outcomes correspondingly increased. Chung and Lounsbury (2006) discussed the dynamic nature of participation by community stakeholders in the research process. They noted that participation from the community comes in different forms and that both the amount of time participants devote to studies and their degree of involvement in them may waver or increase at any given period in the process as it unfolded. A few articles discussed the impact of community member participation levels on the outcomes of research efforts (Cornwall & Jewkes 1995), as well as the relevance of evaluating these levels of participation (Butterfoss 2006).

In their attempts to increase participation levels in CBPR, some researchers introduced different strategies to facilitate involvement by community stakeholders, particularly those from the marginalised groups affected by health service provision inequities. A distinct strategy some researchers found promising was identifying obstacles to facilitating participation by community members of disadvantaged subpopulations. In their review of CBPR through the assessment of partnership approaches to improve public health, Israel and colleagues (1998) identified challenges such as lack of trust and respect, inequitable distribution of power and control, differences in perspectives and priorities, conflicts in concepts of representation, imbalance between action and research, and competing demands and expectations of partners. In her article on defining ways to introduce participation in participatory action research, Montero (2000) described obstacles to initiating community member participation such as old practices of exclusion and the reintroduction of traditional ways of researching, knowing and learning. By identifying such challenges to the implementation of CBPR, these researchers hoped to find ways of overcoming issues before they became insurmountable problems to increasing participation. However, despite the identification of such challenges that would serve as a road map during the research process, many scholars still encountered numerous difficulties along the way as documented in certain peer-reviewed journal articles (Arieli, Friedman & Agbaria 2009; Chung & Lounsbury 2006).

Novice scholars new to the CBPR approach and the concept of increasing participation levels in community engagement no doubt experience even greater difficulties with the obstacles associated with practising participatory research. As fledgling researchers, doctoral students often encounter specific challenges even prior to the incorporation of CBPR principles in their initial research practice compared to their seasoned counterparts (Bowen

2005; Spriestersbach & Henry 2010), and are likely to find the challenge of increasing participation from the community even more difficult. Dearth of funding, institutional barriers specific to graduate-level students, personal time constraints, shortage of manpower and support, lack of skills and experience, stricter internal deadlines and scarcity of technical resources are among the many challenges doctoral students encounter when conducting their dissertation research, even before they attempt to include elements of CBPR in their process (Golde & Gallagher 1999; Stoecker 2008).

Apart from general strategies recommended to assist university and other institution-based researchers seeking to begin community partnerships (Wallerstein et al. 2005), there has been scant published literature that specifically addresses how doctoral students can adopt a CBPR approach to conducting a dissertation research effort (Khosbi & Flicker 2010), let alone any to suggest how to increase participation levels from their target community and reap the benefits of participatory and emancipatory research. However, doctoral students who seek to address health disparities in their dissertation research projects still have the option of taking into consideration and extrapolating lessons from principal propositions presented in CBPR literature.

In this article, I analyse the value of specific CBPR concepts such as levels along a *participation continuum* (Chung & Lounsbury 2006) and examine certain *fundamental researcher attributes* recommended in CBPR literature that doctoral students can possibly utilise, develop and hone in their efforts to advance health equity for the benefit of marginalised groups in the community. To accomplish this, I use my own experience as a Community Psychology doctoral student conducting research on the potential impact of legislation on the success of Gay-Straight Alliances and other community-based interventions addressing the mental health and wellbeing issues of lesbian, gay, bisexual and transgender (LGBT) youth in Waterloo Region, Ontario, Canada, as an empirical framework for grounding my analysis. I also propose new researcher attributes I have discovered after critical reflection on the challenges and small triumphs I experienced during the conduct of my early dissertation research process. It is my hope that these will stand as equally viable characteristics that graduate students can cultivate in their efforts to successfully address social inequities. Lastly, I pose questions doctoral students may find useful to consider in their attempts to incorporate CBPR elements in their future research. It was with the invaluable guidance and support of my dissertation research supervisor/adviser (and co-author in this article) that I am able to share my critical reflections on my experiences as a doctoral student and early career researcher.

DEVELOPMENT OF MY RESEARCH STRATEGY

In order to establish my early doctoral dissertation research experiences as the empirical framework for my analysis, I will first

describe the context of my research focus and original strategy, and how it was meant to address a health disparity in the larger community. I will then identify my social position by describing my role as a researcher and member of the community to place my location in the scheme of the research praxis. From that point, I will share my reflections on how my early engagement with the community brought about changes to my process and methodologies; how my position evolved within the community; and how, later in my analysis, I came to surmise that openness to implementing CBPR orientation elements, such as the concept of participation continuum levels and recommended researcher attributes proposed in CBPR literature, can bring about better dissertation research outcomes through increased participation.

My doctoral dissertation research was primarily focused on examining factors that affected advocacy for the mental health and wellbeing of LGBT youth in publicly funded schools in Ontario. This focus was inspired by the rise of mental health issues and other dire consequences from bullying of LGBT youth in high schools, which has become very alarming in recent decades. Research conducted on the ill effects of bullying of LGBT youth has shown that LGBT students are at increased risk of poorer academic performance, truancy, dropping out, delinquency, physical and verbal abuse, risky sexual behaviours, problematic substance use, depression, suicidal ideation and suicidality, when compared to their heterosexual counterparts (Almeida et al. 2009; Birkett, Espelage & Koenig 2009; Hunter 2007; Nichols 1999). In an attempt to explore ways to counter these ill effects, scholars have discovered that student-led after-school organisations composed of LGBT youth and their allies, such as Gay-Straight Alliances (GSAs), have a positive impact on the mental health and wellbeing of its members. A number of researchers have documented the benefits of other community-based interventions, either together with or apart from GSAs. Szalacha (2003) underscored the finding that sexual diversity climates supportive of marginalised non-heterosexual youth were highest in schools that simultaneously implemented GSAs, professional development training on LGBT issues for school personnel and anti-homophobic school policies. Griffin and Ouellette (2002) pointed out that, although GSAs are very important, they should only be part of a much bigger picture in which change in a school's organisational setting to help LGBT students requires the involvement of school personnel and policies, community stakeholders and, most importantly, legal mandates and legislation that increase the chances of systematic implementation of and compliance with set programs.

In the context of all Waterloo Region publicly funded schools, the mandate to support GSAs and other LGBT-inclusive strategies was established with the passing of *The Accepting Schools Act* as law by the Ontario government in June 2012 (Ontario Legislative Assembly [OLA] 2012). As a means to explore the dynamics of this context, and how to possibly address the health disparity between the mental health and wellbeing of LGBT high

school students and their heterosexual counterparts, I decided that the focus of my research would be on exploring the perspectives and feelings of the population I believed the legislation would affect the most in my community – the GSA members and teachers of Waterloo Region.

My original research methodology was to conduct semi-structured, one-on-one interviews with the GSA students and teachers who belonged to schools affiliated with the Waterloo Region District School Board (WRDSB). I would accomplish this under the auspices of the Equity, Sexual Health and HIV (ESH-HIV) Research Group of the Centre for Community Research, Learning and Action (CCRLA) at Wilfrid Laurier University (WLU) and its connections with the OK2BME Program. OK2BME, a program that links all the GSAs affiliated with the WRDSB in a network with services specific to LGBT youth and their allies, is a project of the KW Counselling Services, a multi-service agency located in Kitchener, Ontario, Canada, that provides individual, family, group, parenting and outreach support to the communities of Waterloo Region. Both KW Counselling Services and the WRDSB Equity and Inclusion Office are community partners of the ESH-HIV Research Group. Because of my affiliation with the ESH-HIV Research Group, I was fortunate to have the opportunity to make use of the group's collaboration and strong ties with the community.

As a relatively new academic researcher in the field of Community Psychology about to embark on my doctoral dissertation research, I knew I still had a lot to learn about the practicalities of applying Community Psychology principles. I was confident in my researcher skills, but knew that I needed to tread cautiously and not proceed with too much confidence. What gave me some solace, however, was that I would be doing research on something that I was passionate about, as well as knowing that I would be engaging with a community that I could relate to and feel accepted by as an 'insider'. Not only could I identify with bullied LGBT students, but also even at my altered station in life, I still felt like one of them. It was an epistemic privilege that I believed I had earned for having experienced the same torment LGBT students today experience in their schools; a privilege I hoped would help me be a better researcher in my chosen focus of study.

With guidance from my dissertation adviser and a few minor amendments, it did not take me long to get my research proposal approved by the WLU Research Ethics Board (REB). In retrospect, I realised early on that, despite receiving support from KW Counselling Services in putting up posters for the study, it was probably not a good idea to have started study recruitment at the beginning of the summer as most, if not all, of the students, teachers and school personnel were already on vacation and in full holiday mode. A few students responded to the recruitment posters, but I had no success getting interviews for some weeks as the youth who expressed interest kept rescheduling. A couple of

the students rescheduled as many as four times and eventually cancelled. I lost interviews due to conflicts with personal schedules, youth getting lost trying to find the interview location, and illness. It was frustrating to receive initial interest that did not translate into actual interviews.

However, after three weeks, I was eventually able to interview three participants, two GSA students and one teacher. The interviews were rich and informative, but more than that, my first engagements with members of the community were quite illuminating. I learned many things both from the interviews and from my interaction with the participants after their interviews. From the participants' feedback, I learned that the positive impacts that legislation can have on the success of GSAs and the positive effects that GSAs can have on the mental health and wellbeing of LGBT youth had a lot to do with the cooperation of the other members of the Waterloo Region publicly funded school system. This meant that the support of other community stakeholders, such as school administrators, school board staff, superintendents and trustees, was equally important to the success of the implementation of the new legislation mandating the formation of GSAs. It also meant that, apart from the cooperation of members of the WRDSB, the support of their counterparts at the Waterloo Catholic District School Board (WCDSB), who were also publicly funded, was just as imperative in implementing the mandates of the new act. In terms of my study, this meant that I also needed to hear from the school board administrators, staff, superintendents and trustees from both the WRDSB and the WCDSB who were just as invested in discovering how the *Accepting Schools Act* could be used to help LGBT youth in Ontario schools. Lastly, since KW Counselling Services was responsible for the creation of the OK2BME Program that prompted the GSA to network with the WRDSB (and later the WCDSB), their voice needed to be included in my research as well.

During my interactions with the participants outside of the recorded interviews, I also recognised, in retrospect, other steps that I should have considered earlier for my engagement strategy: I needed not only to reach out to members of the community in a way that they would appreciate, but also to take anthropological and ecological approaches to finding ways to immerse myself within the community. It was not enough that I had the epistemic privilege that I believed I had and that I thought would help me relate to my target population; I needed first to get them to agree to participate and engage in the research. The youth also gave me very practical tips on how to reach more students even at the peak of summer. They told me to put up recruitment posters outside KW Counselling Services and in places LGBT youth and their allies frequented. This meant putting up posters where they would 'hang out' such as burger joints, billiard halls, day clubs, places where they would have their haircuts, and camps they would go to for the summer. They told me to take more advantage of social media by posting recruitment flyers on the GSA Network website, the

Facebook pages of clubs they belonged to, and online links that would be viewed by their older friends who could tell them about the importance of the research. They also told me that to sustain interest among youth correspondence with them need not be so formal in email messages, and that I should communicate with them through texting/Short Messaging Services (SMS) and other Multi-media Messaging Services (MMS). Most importantly, the participants recommended that I should have greater visibility in the community that they were comfortable with, in order to increase my recognisability and so that youth would be able to identify me as one of their own. After fruitful exchanges of ideas, I also asked the participants if they would refer other students and teachers to me who they believed might have more to share on the GSA study.

Heeding the advice of the GSA students and a teacher who gave me feedback in the first three interviews, I sought and gained REB approval for the changes to my recruitment strategy. I placed recruitment posters where they would be seen by GSA members and sponsors in the Waterloo Region, both online and in the cities' establishments. Apart from this effort to recruit more by strategic information dissemination, I also followed their recommendation to keep correspondence with interested youth more relaxed, and began text messaging. In order to immerse myself in the community and increase my profile, I volunteered to be part of a neighbourhood Steering Committee whose goal was to establish the first LGBT Community Centre in Waterloo Region. In this grassroots movement group, I not only met the adult movers and shakers of what was touted as the 'rainbow community' of the region, I also engaged with a few youth leaders, some of whom were members of their high schools' GSAs. All these efforts became productive and helped lead to increased participation in my study. After each interview, I deliberately made greater efforts to exchange ideas with the interviewees on how to facilitate participation, and started to devise means to share study findings with the community through OK2BME activities.

Another aspect of the strategy I developed was to reach out to school administrators, as well as staff, superintendents and trustees from both the WRDSB and WCDSB. Through old-fashioned investigative work using the Internet and local publications, I searched for key informants from the two publicly funded school boards who had keen interest in promoting GSAs and the welfare of LGBT youth in the community, as well as established affiliations with OK2BME. Using previously established networks of OK2BME, I wrote to them personally and sought indication that they would be agreeable to participate in interviews. I received sincere interest from representatives of both school boards, and was able to interview participants from different levels of the boards, such as staff members, superintendents and trustees, who were either primarily or indirectly involved with GSAs. I also received interest from the staff at KW Counselling Services, who I contacted at the

same time as the school board representatives. After conducting each of the interviews, I continued the practice of engaging participants for an exchange of ideas, consulting each of them for 'off the record' feedback on how to improve the research process, as well as attempting to facilitate new participant referrals. This practice allowed me to report new information to my dissertation adviser and gain guidance on how to make subtle but important changes that would increase community participation in terms of knowledge generation, degree of influence on process and, possibly, sharing some research outcomes, such as the dissemination of accrued data in the form of a GSA conference presentation.

CRITICAL REFLECTIONS AND LESSONS LEARNED

Upon critical reflection on my early doctoral dissertation research experiences, particularly as an empirical framework for analysis, I recognised and learned several important practical lessons. One such lesson is that implementing only a number (as opposed to all) of the elements found in the CBPR published literature can still prove very beneficial to studies attempting to promote equity and social justice. In the case of my own research efforts, it was helpful to know that some research studies promoted the belief that there were benefits to increasing levels of participation by the community, even if these levels were not necessarily at the point that ensured maximum participation at all stages of the research (Cornwall & Jewkes 1995; Rifkin, Muller & Bichmann 1988). In their study on the role of power, process and relationships in CBPR, Chung and Lounsbury (2006) proposed an adapted *participation continuum* that starts from *compliant participation*, and then moves on to *directed consultation*, *mutual consultation* and, finally, *empowering co-investigation*. They described the advantages of research participants moving forward through this continuum as power structures and imbalances are progressively acknowledged and adjusted along the way. They also described that participation may begin at one level, progress to another as trust builds, and end up at a completely different level (Chung & Lounsbury 2006). When this concept was applied to my early dissertation research, as I implemented efforts to increase the quantity and quality of stakeholder participation, the benefits of achieving *mutual consultation* in the form of deliberate, respectful exchanges of ideas became evident, although the progress did not reach the level of *empowering co-investigation*.

Reflecting further on the first several months of my experiences in the community, I also came to realise that there were certain *fundamental researcher attributes* described in the peer-reviewed CBPR literature that I unconsciously adopted in order to respond to the challenges I encountered in the process. Tervalon and Murray-Garcia (1998) first proposed the concept of *cultural humility* as an attribute that was better suited than cultural competence as a goal in multicultural medical education. They claimed that *cultural humility* incorporates a lifelong commitment to self-evaluation and self-critique in redressing power imbalances

and in developing mutually beneficial and non-paternalistic clinical and advocacy partnerships with communities on behalf of individuals and defined populations. *Cultural humility* has since been recommended in CBPR literature as an attribute for researchers to develop, not only for its value in reference to race and ethnicity, but also for its importance in helping understand and address impacts on other cultures with different socioeconomic status, religion, gender or sexual orientation (Minkler 2005; Minkler & Wallerstein 2008). During my interactions with prospective participants from the community, I learned that it was not enough that I was openly gay and sympathetic to community members for me to develop a meaningful connection with them. I realised that I needed to show *cultural humility* so that I could establish equity and collaboration between the participating LGBT youth and teachers from the Waterloo Region high schools and myself, as an academic researcher. I needed to accept the fact that they knew the best ways for me to reach more GSA members, as well as other community stakeholders, and that it would serve me best to acknowledge that I did not truly have the ‘insider’ status I thought I had. Moreover, with *cultural humility*, I came to recognise the aspects of my own ‘insider-outsider’ position within the research context in which I was embedded (Humphrey 2007). I realised that I had to acknowledge that I did not truly have as much of the ‘insider’ status that I thought I had from being a gay man with experiences of being bullied in my youth, and instead accept my ‘outsider’ status since there was a distinct culture in the community I was engaging with that I still had to learn about, understand and embrace.

At that point, I recognised too that genuinely acquiescing to a state of *shared vulnerability* with the community while working through the struggles of developing my relationships with them was a means of establishing trust and respect. Engaging the community with the attribute of *shared vulnerability* meant having the willingness to examine my deeply held beliefs and new ways of thinking about heteronormativity and oppression (Maguire 2004). This meant that for me to develop a truly reciprocal relationship with the participants, I needed to relinquish all my preconceived notions of what I believed their experiences to be and be open to learning what they were willing to share with me regarding what made LGBT students in Waterloo at that time susceptible to mental health issues resulting from heterosexist bias-based harassment.

In hindsight, there were two other researcher attributes I recognised as characteristics I adopted when I began to make changes in my research design and strategy to facilitate participation. I recalled adopting *reflexivity* and *methodological flexibility* almost concurrently, after noting the necessity to make adjustments to my strategy. *Reflexivity*, an attribute of the CBPR orientation that is also a central tenet of the feminist research approach (England 1994; Letherby 2003), is awareness that the researcher and the objects of study affect each other mutually and continually during the research process (Alvesson & Skoldburg

2000). In order for me to be able to elicit more responses from prospective participants in the community, I needed to be reflexive about their frame of mind and circumstances at the onset of the process. Since I started recruiting GSA students and teachers at the beginning of summer, it was necessary for me to find better and more appropriate ways to reach them when they were away and preoccupied with vacation activities. I discovered that I required the perspectives and feedback of other stakeholders from the community in addition to GSA students and teachers, so I needed to be reflexive in order to expand the variety of my study participants. The concept of reflexivity involves bi-directional flow and an alternating cause and effect pattern. If I wanted to produce effects that would be beneficial to my study process, I needed to be reflexive to the challenges caused by the circumstances I encountered in the conduct of my research. Out of these necessities, I had to conduct my process with *methodological flexibility* and use methods that were tailored to the changing purpose of the research, as well as the context and interests of the community (Dockery 1996). I had to adjust my recruitment strategy from a single form to multiple forms of information dissemination. From initially employing purposive sampling only, I had to later adopt a snowball sampling method as well. I pursued different leads that could possibly help recruit more participants based on interviewees' suggestions and referrals to individuals and community gatekeepers. Such efforts afforded me better results, not only in terms of facilitating participation, but also in terms of obtaining richer and more informative interviews that were substantiated by the concept of data triangulation (Denzin 1989; Kimchi, Polivka & Stevenson 1991), whereby information derived from sources with different roles at different levels of the school board validated the participant responses.

NEW RESEARCHER ATTRIBUTES

After much contemplation, I recognised that there were two other researcher attributes that I adopted, which are not necessarily specifically found in CBPR literature: *academic assiduity* and *creative resourcefulness*. If researchers remained assiduous and diligent in their scholarly work and pursuit of social equity, they would demonstrate persistence, which could potentially impress and win over reluctant prospective participants. As an example, during the recruitment phase of my research, once a week I conscientiously emailed prospective participants who seemed 'on the fence' about being interviewed, composing carefully thought out personal messages that directly responded to their concerns and needs. I also kept in mind the specific suggestions I obtained from the exchange of ideas with participants I had interviewed and consistently followed up on these suggestions. One teacher recommended that I ask the OK2BME program of KW Counselling Services for the names of teachers and administrators who had been staunch GSA supporters over the years. It took several follow-

ups before I received a list of names, but it was worth the wait as I eventually secured more participants from it.

In conducting the study with *creative resourcefulness*, not only did I learn to better correspond with prospective participants in the medium of their preference (i.e. email vs. mobile phone communication vs. online instant messaging), I also learned to provide more latitude in terms of scheduling meetings, such as conducting interviews early in the morning, late in the afternoon and even on weekends. I also gave participants the option to select interview venues of their choice as long as the location afforded privacy and confidentiality. I met participants at my office, their office, KW Counselling Services, the local LGBT Community Centre and other locations, even if it meant an hour-long drive for me. I patiently rescheduled interviews even if the prospective participants had postponed repeatedly, and I followed up with them as long as they continued to express some interest in being interviewed. Another concrete example of my creative resourcefulness was doing voluntary work with community organisations, which allowed me to spend more time with prospective participants and for them to get to know me better. Adult chaperones were occasionally needed to supervise community-sponsored activities such as afternoon movies and game nights designed to provide opportunities for LGBT students to socialise amongst themselves and their allies. I volunteered as a chaperone for these activities as a way to support the youth activities and at the same time attract prospective study participants, both students and adult advocates. I believe that adopting these fundamental researcher attributes was vital to the recruitment process for my study and contributed significantly to participation in my interviews.

CONCLUSION: QUESTIONS TO CONSIDER

Obviously, not all doctoral dissertation research studies can adhere to all CBPR principles applicable to their study when attempting to explore, and even address, health disparity issues. But efforts to increase participation and progress through the participation continuum are still commendable, especially in the context of graduate student level limitations and challenges. In an attempt to enhance the possibility of positive outcomes and the emancipatory effect of one's research, graduate students can ask themselves certain questions so they can move forward and closer to these goals. How does the focus of my research aim to explore social inequities? What vital attributes can I consciously adopt as a researcher to augment my efforts in facilitating participation by community members and progressing further on the participation continuum? What principles and tenets of the CBPR orientation are applicable to and useful for my study so that I can increase the participation of my prospective participants, especially if I believe I cannot achieve maximum participation in all the phases of my research? Have I exhausted all possible modifications or adjustments to my research approach and process in order to

facilitate participation in my study despite my limitations and challenges?

These are just a few questions to seriously consider not only at the start of a PhD dissertation research study, but during its entire process. It is most important to believe that, even at the graduate training level, the effort to instil applicable elements of the CBPR orientation in doctoral dissertation research is still a laudable endeavour that new researchers can consciously and courageously take on early in their respective careers.

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