

October 2020

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### Recommended Citation

Kerekes, Katherine and Palmer, Jane (2020) "Obstacles in Recruitment for Sensitive Research on Intimate Partner Violence," *Journal of Community Engagement and Scholarship*: Vol. 13 : Iss. 1 , Article 11.  
Available at: <https://digitalcommons.northgeorgia.edu/jces/vol13/iss1/11>

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## Obstacles in Recruitment for Sensitive Research on Intimate Partner Violence

By Katherine Kerekes

I watched “Home Alone” hundreds of times during the spring semester of my junior year of college while working for a research study on how to improve the housing assistance intake process for survivors of intimate partner violence (IPV). It always struck me as odd that a movie about a sense of home played repeatedly in the lobby of the central intake office for residents seeking housing assistance. As a recruitment assistant, my job was to screen potential participants to see if they fit our study’s criteria and gain their contact information to schedule a future interview. Potential participants were given a pink sheet asking a basic screening question with their other paperwork.<sup>1</sup> If they checked “yes,” a recruiter approached them while they waited to speak to a case manager and asked if they were interested in learning more about the study. If interested, we would take the potential participant to a private room to ask more questions about their IPV experience to determine eligibility.<sup>2</sup>

Over the course of the semester, I realized how vital planning of the recruitment phase is in studies, particularly for sensitive research involving vulnerable populations and community partners. As an RA, I witnessed the importance of creating a flexible and sensitive recruitment protocol and the types of obstacles common in recruitment. In this essay, I will outline how to improve recruitment strategies in sensitive community-based research by examining the ethical, logistical, and emotional challenges I encountered as a recruiter.

In a community-based research approach, the research includes and takes direction from the community. Therefore, recruitment protocols and research designs should be structured to suit

the needs of the community. As recruitment is the potential participants’ first introduction to the study, care must be taken in the design and wording of any written materials (Kavanaugh, Moro, Savage, & Mehendale, 2006). Yet, there is a lack of research on how the intersection of multiple vulnerabilities can impact the recruitment process, and concrete strategies are needed for dealing with unexpected obstacles during recruitment.

Although all research requires an ethical foundation and careful planning, research on sensitive topics places extra burdens on the researcher. Our research was considered sensitive due to the participants experiencing insecure housing status and IPV. In recruiting participants for IPV research, it is crucial to consider participant safety. It may be difficult to establish a confidential and reliable method to keep in touch with a participant due to the potential lack of consistent access to a cell phone or email, as well as privacy concerns. In addition, voice messages or emails sent may need to be censored of any language about IPV to protect the safety of the participant.

Although recruiting seemed simple to me initially, I quickly found that recruitment is a difficult task, with ethical, logistical, and emotional challenges. Our recruitment protocol had a few built-in weaknesses that hindered the pool of people we could screen, potentially impacting the study’s validity. One issue was that we could only recruit English speakers. Although several recruitment assistants, myself included, spoke Spanish, there were no interviewers with the language skills required for an in-depth interview. This prevented us from approaching an entire subsection of the population, denying them their chance to share their experiences. Particularly in Washington, DC, which has a significant Spanish-speaking population, this was a frustrating obstacle that could have been avoided with a bilingual interviewer.

A second issue with the protocol design was the color of the initial screening paperwork. Our

<sup>1</sup>The sheet reads: “There are many reasons why people need help with housing. Are you here today because someone you were involved with or previously involved with (partner, boyfriend, girlfriend, child’s parent, sexual partner, husband, wife, spouse) made it difficult for you to stay where you were living?”

<sup>2</sup>The screening form reads: “You checked ‘yes’ to the question (see footnote 1). Can you tell me more about that experience?”

forms were bright pink. Although our study was open to people of all gender identities and the wording of our questions reflected that openness, the color of the sheet may have counteracted that inclusivity. Historically, IPV is seen as a women's issue—an issue of men committing violence against women. Yet, members of the LGBTQ community also experience abuse in romantic or sexual relationships and are less likely to have access to appropriate resources (Messinger, 2017). By using the color pink, one could make a subconscious assumption about the kind of situation for which we were screening. Choosing the correct aesthetics for recruitment materials is an important decision and I wish that I had expressed my concern over the color choice earlier in the recruitment phase.

The largest ethical consideration encountered during recruitment was the issue of mandated reporting. Halfway through the recruitment process, we were made aware of a law that required all research team members to be mandated reporters. While mandated reporting is designed to protect children from neglect and abuse, in cases of IPV it can have unintended consequences. If, for instance, a participant disclosed they slept outside with their child to get away from their abuser, then the researcher may be obligated to report child neglect. This dampens trust and creates a tension between the researcher and the participant, as there is a power imbalance that can have profound effects on the participant's ability to access services or fully participate in the study. This protocol change caused several members of the research team to consider leaving, as they felt they could no longer ask the questions required of rigorous research without potentially having to make a report.

Related to this issue was the presence of children, as potential participants were frequently accompanied by children. During the initial approach in the waiting room, the participant was told only that the study focused on the intake process, and the words "IPV," "domestic violence," and "abuse" were not used. Once they agreed to additional screening questions and asked about an IPV situation, they might feel uncomfortable disclosing that information in front of their children. This concern may have caused several potential participants to either censor their situation or to decline to complete additional screening.

When approaching potential participants who were accompanied by children, we found that an effective method was to have an additional recruiter occupy the children with some paper and

markers while the parent disclosed information. This strategy minimized distractions for the recruiter and parent. However, this did not entirely address the issue of a child's ability to listen to the conversation. Study protocols should have a plan for child care while research staff are discussing the study with the potential participant. These logistical and ethical factors may have also affected the generalizability of the results, as the population recruited may not fully represent the population of IPV survivors requiring housing assistance.

On a more personal note, volunteering as a recruiter resulted in emotional challenges and compassion fatigue. Listening to the experiences of the people we screened, including those who were not eligible, was emotionally draining and I found it challenging to do multiple screenings in a row. These feelings of exhaustion and fatigue are common among those who research various forms of trauma, and can negatively impact a researcher's personal life outside the study through feelings of distress, exhaustion, sleep disturbances, and anxiety (Coles, Astbury, Dartnall, & Limjerwala, 2014). As recruiters, we were unable to follow up with the participants or their families after our initial conversations. This lack of closure led me to feel like I was not helping the survivors or giving them the assistance they required. Months later, I still wonder what happened to the young boy who drew a picture of the house he had to leave, the mother who sang lullabies to her infant in the lobby, or the woman who could quote "Home Alone" by the end of the day.

Much of the literature on emotional exhaustion and compassion fatigue is geared to more experienced researchers, not student assistants, and there are fewer opportunities for debriefing and proper training for students. Supervisors can support students by discussing the emotional work involved before the study begins, setting a maximum number of interviews, creating opportunities for formal and informal debriefs, and, if possible, providing access to a counselor (Coles et al., 2014; Palmer, 2015). To prevent compassion fatigue among recruiters, there should be short recruitment shifts and a deep roster of recruiters to help lessen the burden, particularly for more inexperienced students. It is also essential that students are shown how to balance the duties of a researcher while showing compassion. One strategy that worked well for me was role-playing different scenarios with other recruiters to help develop compassionate language we could then use to respond as participants shared their

experiences with us. Other useful strategies were to intentionally engage in self-care activities after recruitment sessions and to write reflections. I was fortunate to have a background in sensitive research from prior projects, strong faculty support, and appropriate training. However, even with experience and a grounding in the dynamics of IPV, it was still emotionally draining for me to screen participants.

Overall, I am grateful for the opportunity to assist on this project. My few months as a recruiter have given me a newfound appreciation for the recruitment process, an awareness of the kinds of obstacles found in sensitive research, and some strategies for addressing hurdles. Careful, intersectional planning with the community as a guide, as well as a flexible attitude and research protocol, are necessary to ensure positive research outcomes reflective of the community's needs. As I conclude my undergraduate years and embark on my postgraduate and professional career, I am reminded how vital it is to not only develop relationships with a research community but also to find a support system that works to address the emotional challenges of sensitive research. Community-based research cannot be successful unless the researchers themselves have access to a supportive and caring community of their own. My hope is that future research studies reliant on student recruiters pay close attention to their recruitment protocols and the impact that recruitment has on student assistants, and that they engage in the same level of care for students as they do participants.

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## About the Author

At the time of writing, Katherine Kerekes was an undergraduate student at American University pursuing degrees in history and international studies and a certificate in community-based research.