Pragmatic Action Research With 2 Vulnerable Populations Mexican American Elders and Formerly Incarcerated Women

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Eliminating health disparities involving minority groups is a major national priority. Action research, a response to this national priority, may be derived from different theoretical models. The purposes of action research are to involve key community stakeholders in developing knowledge and taking pragmatic action to solve problems. In this article, the authors examine how the model was put into action for 2 distinct programs of research, comparing and contrasting final results, one report primarily focusing on recruitment and retention of participants and the other focusing on a community faith-based action research with formerly incarcerated women.
Key words: *community-based research, community faith-based research, participatory action research, pragmatism, recruitment of vulnerable populations*

ELIMINATING health disparities is a major national priority.¹ Action research, a response to this national priority, may be derived from different theoretical models. This article focuses on pragmatism. The purposes of action research are to involve key community stakeholders in developing knowledge and take action to solve problems.

For example, numerous studies have been derived from Greenwood and Levin's^{2,3} pragmatic action research approach. In this article, the authors examine how the model was put into action for 2 distinct programs of research, comparing and contrasting final results, one report primarily focusing on recruitment and retention of participants and the other focusing on a community faith-based action research with formerly incarcerated women.

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GREENWOOD AND LEVIN'S PRAGMATIC ACTION RESEARCH APPROACH

Definition and description

C. S. Pierce founded pragmatism in 1878.⁴ The definition intertwined theory and practice in its worldview and for developing real-world strategies. John Dewey presented the pragmatic approach, action research.^{2,5} He claimed that conducting research and new knowledge were inextricably combined with action. Action research was described

as pragmatic because (a) it used existing resources, such as researchers' and community members' experiences and skills; (b) it was conducted within contexts that were available; and (c) it worked toward solutions that were "practical or practically useful," thus pragmatic.^{3(p150)} Pragmatic action researchers recognize the complexity of social problems, designing inquiry to comprehensively encompass issues within real-life situations rather than under-controlled, isolated, a-contextual conditions. Diversity, biologic and cultural, is viewed as "a rich social resource,"^{3(p71)} and diversity and conflict are seen as essential for improving situations.^{3(p61)}

Pragmatic action research is content-bound and holistic; researchers and community members cogenerate knowledge. The pragmatic action researcher is an involved "citizen" rather than a more objective, a-contextual empiric theorist. Diversity of experiences is valued; emerging meanings lead to social action and, conversely, response to action adds to meanings.

THE PRAGMATIC APPROACH WITH VULNERABLE POPULATIONS

Exemplar 1: Mexican American elders' underuse of home care services

The first community of interest in this article is Mexican American elders. A *community* is a group of people with common cultural and background meanings. For example, the community of Mexican American elders in the southern Arizona area shares a common historical and cultural background, frequently within an economic context that has had a strong impact on this group's health. The Mexican American elder community in this area was identified as vulnerable to the consequences of underusing home care services.⁶ This disparity exists, although functional and health problems are more prevalent in Mexican American elders at earlier ages. Alignment with action research would include not assuming that these elders merely preferred not to use home care services, thus perpetuating

a "false ideology of choice."⁷ The action researcher worked with the community to interpret and deconstruct Mexican American families' "underuse" of home care services and, finding it was indeed perceived as a disparity, collaborated to design interventions.⁸

Pragmatic action research can be described by 3 characteristics within existing systems. The characteristics are (a) construction of arenas for dialogue, (b) cogenerative research, and (c) the use of multiple methods.^{3(p134)} These characteristics are applied to the first exemplar, Underuse of Home Care Services by Mexican American Elders. Strategies and results, related to recruitment and retention, within this framework are provided in the following section.

(a) *Construction of arenas for dialogue* is a focus on creating a working relationship with the community that is dialogical, providing for mutual learning. To address the healthcare disparity, ENCASA (Elders' and Caregivers' Assistance and Support At-home) Community Advisory Council Mexican American community advisors ($n = 17$) helped design and create *telenovelas* (dramatizations of compelling stories in Spanish) and *cafecitos* (traditional small visits and informal discussions over coffee and pastries; in this case, guided discussions). (The term *encasa* means "in home" in Spanish.) Council members have met with the principal investigator quarterly for 10 years since its inception, ensuring that the research is focused on real community concerns. This assurance is an essential component of conducting research with minority and underserved populations.⁹ The exemplar program of research addressing underuse of home care services focused on various methods of recruitment of participants and community partners. Strategies for establishing and sustaining community partnership during these studies included asking partners to identify new partners (snowballing) and recognizing partners as the experts while explaining rigorous research and funding parameters.

Methods of engaging partners and participants were related to 2 issues. They were

recruitment strategies and locations for research recruitment.

Recruitment strategies

Strategies and their corresponding results for exemplar 1 are reported in this section. In “constructing an arena for dialogue,” the team became aware that target community members could be apprehensive about participating in research such as the *ENCASA* study. The bicultural, bilingual research assistants found that potential participants required being presented with an idea that was easy to understand, interesting, and rewarding to them.

First, recruiters ensured that the study itself was clearly understood, because some participants often found themselves confused by the project’s main goal, in other words, “What was the study really all about?” The team and *ENCASA* Community Advisory Council reviewed written flyers and verbal recruitment scripts. Concrete and basic, understandable language was chosen.

Second, recruiters found that they often needed to dispel the impression of being there to offer any type of service(s). This was after finding that people expected some type of service from the recruiters and data collectors, such as personal care, homemaker, skilled nursing, or other services. It seemed easy to associate the university’s College of Nursing with an institution that would offer services. To address this challenge, recruiters focused on presenting the study as having a future benefit to the community. They explained that the results of the study could offer the community and providers a better understanding of the Mexican American community in general and would help create better programs that could actually reach the people who really needed them. Besides reminding people that it would take only about 1 hour of their time and that the study personnel would compensate them with a small monetary gift, recruiters designed their invitation to make potential participants feel empowered and aware of their own ability to create change within their own community.

Recruiters encountered the barrier that community members were reluctant to participate in any activities that required giving personal information such as financial status, addresses, and phone numbers. The elders in particular displayed discomfort giving this information, especially if they had been the victims of some type of scam or if any family members did not approve of any personal information being given out. The participants who were low-income and currently receiving financial assistance from the government, often felt threatened that the benefits they received could be decreased. In the southwest United States’ context of racial profiling and border-crossing vigilance,¹⁰ recruiters wanted to prevent participants from feeling intimidated or potentially betrayed. Recruiters made sure that potential participants understood how their personal information was to be kept completely confidential and that it was not going to be shared with any governmental agencies. Helping the elder and family caregiver to be comfortable enough to share such delicate and private information was essential.

When recruiting potential participant(s), recruiters found that it was most effective to schedule appointments for interviews with elders and caregivers with specific times and places before the end of the recruitment process. If not, data collectors found it difficult to try to reconnect with these individuals days later. People in general seemed to lose interest or trust after the time passed.

To sustain the sense of partnership in this community during the interview process, data collectors always took time to connect with the participants in a more personal way than might seem time-efficient. Sharing friendly comments about participants’ and their own homes, families, and friends, data collectors were able to maintain participants’ level of trust in which they felt safe and cared about. This was especially important because participants’ sharing personal experiences provided a better understanding of their attitudes toward the use of home care services. Creating an environment in which

Table 1. Success of recruitment locations

	Number of participants recruited	Number of participants interviewed	% of recruits interviewed from category category	% of Total
Neighborhood centers	122	52	42.62	47.27
Health fairs	56	26	46.43	23.64
Community	18	18	100	16.36
Meetings	14	6	42.86	5.45
Churches	16	4	25	3.64
Clinics	4	2	50	1.82
Referrals	20	2	10	1.82
Hospital	10	0	0	0.00
<i>Total</i>	260	110		100.00

participants felt free and safe to share their true beliefs and fears about these types of services was necessary for participation and retention.

Locations for research recruitment

When attempting to recruit participants for research in the Mexican community, recruiters' face-to-face contact was the most successful approach. For example, in the *ENCASA* research study, in a variety of settings, techniques were used to identify potential dyads for the study. These settings are classified into categories (Table 1).

The "neighborhood centers" category represents locations, such as senior centers, where the recruiters could not only attend events but also visit regularly to find potential participants and speak to elders, caregivers, or both, directly. Similarly, the "health fairs" category refers to a setting or event in which a table or booth was set up and staffed by the recruiters themselves. These events were targeted either to the Mexican American community or in an area of town where the Mexican community was highly concentrated. These events allowed recruiters to speak directly to potential participants. Of the total study, 47% and 24% of the participants interviewed were recruited from neighborhood centers and health fairs,

respectively. Both of these recruitment techniques allowed for face-to-face contact and let recruiters speak to the participants directly. "Community" meant referrals from one participant to another (snowballing). Sixteen percent made it a lesser but worthwhile source of recruits.

These participation levels are in stark contrast to those within the categories "meetings," "churches," "clinics," "referrals," and "hospitals." The category "meetings" applies to meetings in which community agencies that served or otherwise came in contact with elders or the Mexican community were represented but in which the participants themselves did not attend. Recruits from these events accounted for only 5% of the participants. The category "churches" represents presentations made at local Catholic churches during Sunday morning services by recruiters and community advisory council members. Booths were available for signing up immediately after the service. We were surprised by the low response to this one-on-one presentation. "Clinics" applies to clinics in which fliers were left on countertops in plastic brochure holders. "Referrals" represents participants who were referred by colleagues, participants, or agencies. These techniques did not involve face-to-face contact with recruiters. Only 3.5% of the dyads recruited, who actually

participated, were from clinics and referrals. At "hospitals," recruiters made presentations at nursing department staff meetings, left flyers in waiting rooms, and visited nurses weekly. This approach, not a partnered endeavor, yielded no participants.

(b) *Cogenerative research* means that the researcher and the community members reflect on the research experiences to create the findings. Researchers and community members have mutual learning, determining the liberating outcome or redirecting if necessary. A key to this process is a leveling of power positions. The lay community partner is viewed as an expert concerning the community, whereas the researcher may be viewed as a resource about technical issues.

In this exemplar, qualitative interviews were conducted with Mexican American elders, Mexican American caregivers, home care providers, and ENCASA Community Advisory Council members to develop some of the questionnaires for use with Mexican American elders and caregivers.¹¹⁻¹³ Qualitative analysis of interviews supported existing dimensions and new items. Testing of the items supported content validity of instruments. Revised questionnaires were translated, back-translated, and tested for language equivalence by using correlational tests of Spanish and English versions, in partnership with the community advisory council. Through collaboration, bicultural/bilingual team and community partners refined instruments (eg, the Confidence in Home Care Services Questionnaire,¹³ Service Awareness Scale,¹² and a questionnaire measuring the quality of the elder-caregiver relationship,¹¹ all of which can be used to measure barriers to equity in healthcare services utilization by vulnerable populations). Community advisory council members also assisted in developing and pilot testing two culturally competent strategies: *cafecitos* and *telenovelas* to affect Mexican American elders' and caregivers' attitudes toward the use of home care services.⁸

(c) *The use of multiple methods* means that many theories and methodologies may be se-

lected by the researcher and community partners without deciding a priori the methodologies to use. Selection of methods depends on what is generated by continuous dialogue and reflection by all researchers and community members, within collaboratively decided upon objectives.

In this exemplar, various methodologies included ethnography, already briefly described,⁶ grounded theory,¹⁴ and model testing.¹⁵ Obviously, *retroduction*, going back to the community and conducting exploratory qualitative research when more quantitative studies made apparent the need for conceptual exploration and development, was sometimes appropriate.

For example, after quantitatively pilot testing *cafecitos* and *telenovelas* designed to increase the use of home care services,⁸ the authors went back to qualitatively identify key components of Mexican American families' decision-making processes. To ground future interventions in a stronger theoretical base, Mexican American elders and caregivers were interviewed to describe the decision-making process about the use of home care services. Caregivers' and elders' social processes shaped families' overt and covert negotiations about elder care management.¹⁴ Families together negotiated their decision to seek information about home care services, initiating a shift in the family's level of confidence and trust toward bringing "a stranger" (home care services staff) into the home. Elders eventually accommodated by coming to think of home care services staff as kin, using the culturally specific *personalismo* (Mexican American priority of establishing a personal relationship over the Anglo focus on a professional relationship). The authors then needed to test the culturally relevant findings as predictors of use of home care services, vis-à-vis other predictors found in the literature, and to develop relevant measures.

Then, predictors of home healthcare use were tested on recruited elders and caregivers data ($n = 140$ dyads). Confidence in home care services and service awareness significantly predicted the use of home care

services while preserving and promoting familism during the intervention, among other factors.¹⁵ Future interventions will support Mexican American families so that elders can continue to “age in place” without needing to relocate away from family and familiar surroundings.

Summary of exemplar 1

Through this community-partnered program of research, findings were that (1) Mexican American use of home care services should be increased; (2) effective procedures to ensure instruments are conceptually and language equivalent should be used; (3) elders and caregivers decide whether to use home care services through a family process; (4) a *telenovela* is a way to initiate and promote dialogue about the use of home care services; and (5) variables that should be addressed in an intervention to increase Mexican American elders’ use of home care services include service awareness, confidence in home care services, and the cultural norm, familism. Community partners can help evaluate and disseminate results to effect change.

A continued assessment of capacity, willingness to participate, equalized power, and timing, which cannot be predicted in advance, is essential.

Exemplar 2: Formerly incarcerated women

The second community of interest is formerly incarcerated women in a community faith-based program in southern California. Formerly incarcerated women share a common background of a life of chronic abuse/neglect and incarceration that has a strong impact on the group’s holistic health. These women are vulnerable to the consequences of not having comprehensive wraparound services following incarceration.^{16–18} Alignment with action research includes not assuming that these women prefer to return to a life “on the streets” and most commonly drug addiction and prostitution, thus perpetuating a “false ideology of choice.”⁷ The action re-

searcher works with the community to support their design of priority interventions.^{17,19}

As presented in the first exemplar, pragmatic action research can be described by 3 characteristics within existing systems. The characteristics are (a) construction of arenas for dialogue, (b) cogenerative research, and (c) the use of multiple methods.^{3(p134)} These characteristics are applied to the development of Welcome Home Ministries (WHM) a community faith-based program for formerly incarcerated women. Specific strategies and results, related to the comprehensive program, within this framework are delineated in the following section.

(a) As described in exemplar 1, *construction of arenas for dialogue* is a focus on creating a working relationship with the community that is dialogical, providing for mutual learning. The nurse researcher and chaplain met with 2 emerging leaders within the initial group of WHM’s formerly incarcerated women who had met the nurse chaplain in the jail. These meetings, to share and make decisions with the women in order to proceed with creating a working relationship with the nurse researcher, were pivotal to the success. Subsequently, with funding from Prison Fellowship Ministries, the specific action research methodology utilized was a future search conference. This is a planning conference, identified as a retreat, in which formerly incarcerated women, community volunteers, a nurse researcher, and a chaplain ($n = 29$) developed the initial program priorities and action plans that contributed to the development of the not-for-profit organization, WHM.¹⁷ The formerly incarcerated women led the initial action planning teams, took action in their programs, and met with the principal investigator and the nurse chaplain quarterly for the first year, ensuring that the research was focused on real community concerns, an essential component of conducting research with vulnerable populations.⁹ The exemplar program of research addressing community faith-based comprehensive services for formerly incarcerated women used various

methods to continue to take action on the needs of their community. Successive strategies included establishing linkages with the sheriff's department, the criminal justice system, the district attorney's office, probation and parole personnel, area churches, residential addiction programs, community public health and mental health departments, community-based agencies, healthcare providers, and schools of nursing; developing the nonprofit organization with a community board of directors; and writing and securing grant funding to further develop the women's ideas for programming.

(b) Second, as described in exemplar 1, *cogenerative research* means that the researcher and community members reflect on the research experiences to create the findings. Mutual learning among the researchers and community members occurs and determines the outcome or redirects as needed. Paramount to this process is the leveling of power positions; issues concerning the members of the community were discussed openly, and the nurse researcher served as a resource and facilitator.

In this exemplar, to develop the community faith-based program, reflection upon successes and making revisions in programming occurred through the quarterly action planning team meetings with the nurse researcher and the chaplain, as well as the initiation of grant submissions to further expand the programming ideas. The initial action team worked on the following issues:

1. *Programs*—jail visitation and follow-up with each woman regularly upon release
2. *Transportation*—sponsored rides including a ride upon release
3. *Housing*—sponsored housing
4. *Community awareness*—presentations and endorsements
5. *External resources*—creating legal resources for the women
6. *Fund raising*—grant writing to meet WHM needs.

Formerly incarcerated women led each team with multiple successes. One early

success was the application and receipt of funding for a job training and placement program and coordinated services with the local community health department and church support.

(c) Third, in this description for exemplar 2, *the use of multiple methods* allows for the selection by both the researcher and the community using multiple theories and methodologies to continue taking action in order to solve community problems. For example, in preparation for the initial WHM action research study, a qualitative study was undertaken. Factors contributing to formerly incarcerated women's successful transition to the community were identified and presented to the women participating in the study. For these women, the key dominant factors were as follows:

- belief in God (Higher Power) as a source of strength and peace in their lives;
- freedom from drug addiction and the importance of rehabilitation;
- role of support groups and their "sisters" in WHM; and
- the nurse chaplain's jail visits and support.¹⁶

A second action research study, WHM: The Next Five Years, also contributed to refining and future program development. The first action planning team, "Programs—Jail visitation and follow-up with each woman regularly upon release," became fully implemented into a comprehensive peer reentry program, supported by a comprehensive federal grant. The program provided for 2 peer reentry coordinators inside the jails and 2 peer community case managers upon release, providing support leading to 400 women's success, including freedom from drugs and incarceration, gainful employment, living independently, and actively reuniting with their children.

A longitudinal case study was also utilized to report at the White House Office of Faith-Based and Community Initiatives National Summit on Prisoner Reentry in November, 2007. This report detailed the development

of the original 21 formerly incarcerated women who participated in the first action research study. Eighteen of the WHM women were successful leaders in the program, their communities and workplaces, or both, 8 years later.¹⁹

Summary of exemplar 2

Through this community-partnered program of research, findings were that (1) formerly incarcerated women are the experts on their community needs following incarceration, (2) community faith-based programming for women released from jail works and should be expanded, and (3) peer reentry programs contribute to the success of the "women behind them coming out of jail/prison." The full community and stakeholders have helped evaluate and disseminate WHM's results to effect change.

DISCUSSION

Pragmatic action research provided a conceptual framework for 2 different programs of research with 2 distinct vulnerable populations. A key characteristic, continuous discourse, is essential. West's²⁰ pragmatism encourages cultural criticism, in which existing structures of linguistics, and society, culture, and politics, are transformed to improve individual and community growth.²¹ Similar to hermeneutic phenomenologic research, applied pragmatism is meant to "keep the conversation going."^{3(p150)} Pragmatic nursing research offers "transformative understanding, never to be completed,"^{22(p11)} and provides "a process of expanding horizons."^{23(p68)} Many pragmatists, linguists, and philosophers, including Wittgenstein,²⁴ Habermas,²⁵ and Gadamer,²⁶ look to the historicity and context of communities to fight disparities, yet support empowered diversity and self-directed well-being.³ Beyond pragmatism, which includes relativism, neopragmatism actually suggests that the aim of action research is continuous dialogue, discourse, and critical evaluation of power and problem solv-

ing within communities as open systems.²⁷ Pragmatic action research can be evaluated by 2 criteria: (1) workability (whether actions solve problems in the real world); and (2) increased and continuing participation by the community.³ Pragmatism is an edifying philosophy, needing ongoing discourse, to come to communicative clarity. Language perpetuates or co-constructs meanings rather than objectively representing it.²⁷

Pragmatism may be aligned with both critical social theory (CST) and participatory research methodology.²⁸ The CST has been discussed by Habermas,²⁵ founder and a student of Heidegger; by Freire,²⁹ the Brazilian activist and educator; and by nurses.^{6,30-35} The CST's emancipatory perspective often underpins collaborative endeavors in partnership with minority, underserved, and vulnerable communities. Through participation and dialogical reflection, emancipating action and change are achieved.

There is a "dynamic tension" between the "insiders" and "outsiders" in trying to conduct pure action research.^{3(p107)} Ideally, in pure action research, a community would identify the problem. Comparing exemplars, in exemplar 1, community partnership included a great deal of community support, although the goal continues to be to strive to conduct research in true partnership. In this exemplar,⁶ the action research researcher approached a community to evaluate whether a professionally identified disparity was also a locally perceived disparity (underuse of home care services by Mexican American elders compared with Anglo elders). When this disparity was presented to the community, it was confirmed by stakeholders.⁶ Community members were then invited to be partners in addressing the problem. As the "friendly outsider,"^{3(p115)} the action research researcher engaged the community toward community ownership of the research, including designing the problem, the intervention, and the dissemination of findings.

In exemplar 2, criteria for the evaluation of pragmatic action, workability (whether actions solve problems in the real world) and

increased and continuing participation by the community,³ are met. Evidence exists in the success of the WHM program with continuing community development of programming for formerly incarcerated women.

Empowerment, as discussed by Rappaport,³⁶ exists when individuals express the sense that they are in control of their own lives and the mediating structures in which these experiences reside must be studied. He noted that "Those who participate in decisions and activities that are meaningful to them are more likely to be empowered."^{36(p141)} In these studies, the women made decisions and reached mutually agreed-upon goals and, as a result, reported feeling empowered. The women's capacity to create healthy lives was supported through the interventions and their ongoing development of new programs instituted by the peers themselves.

SUMMARY

Humans both inherit and constantly create their culture and their society. Through pragmatic action research and the CST, researchers in partnership with communities study assumptions or unexamined beliefs that are inherited implicitly through culture. These unexamined day-to-day assumptions often are usually not consciously reflected upon and are likely to be perpetuated outside the awareness of members of a cultural group. These assumptions may be embedded in either "systematic misunderstandings"^{30(p17)} or oppressive ideology. Pragmatic action research methodology and the CST enable members of a group to become aware of, and choose to discard, any oppressive ideologies that have been unwittingly embraced. This is emancipatory knowledge³⁷ through which emancipatory change is possible.

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