

Journal Article

Participatory action research (PAR) research: critical methodological considerations

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Participatory Action Research (PAR) Research – Critical methodological considerations

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Participatory Action Research (PAR) Research – Critical methodological considerations

Abstract

Purpose: The purpose of this paper is to explore a range of key deliberations with regards to adopting Participatory Action Research (PAR) and Privileged Access Interviewer (PAI) approaches and methodologies within research on substance use

Design/methodology/approach: This paper is a reflective piece, it adopts a mixture of applied practice and theory considerations. These conceptualisations capture what are still relatively early understandings and uses of such methodologies, acquired across several decades of research and service provision experiences. The paper is structured around some of the sequences of the research process and as such provides a broad framework for such approaches.

Findings: PAR and PAI approaches utilise several key theoretical considerations. There are many critical issues associated with adopting these approaches, including those of ethics, funding, involvement, language, resources and support. Three key principle reasons (moral, political and research based), help explain why we should see more adoption of such approaches in substance use related research.

Research limitations/implications: This paper represents author views which are by their nature very subjective.

Practical implications: Implementation of the key considerations highlighted within this paper can lead to an active adoption of PAR and PAI methodologies within alcohol and drug research. Increasing the use of such methodologies will allow commissioners, researchers and service providers to develop a more nuanced understanding of the experiences of and responses to alcohol and drug use.

Originality/value: This paper captures critical conversations at a time of increased calls for service user involvement across all aspects of alcohol and other drug provision, including evaluation and research.

Key Words: Alcohol and Drugs, Involvement, Participatory Action Research, Research Methodologies, Substance Use

Introduction

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3 This paper is based explicitly on the current views of its named authors. However, like all
4 research papers, it builds upon previous experiences and projects (for example Bislin et al
5 2013, Author et al 2011), and previous writing (Author 2016, 2017). Therefore, much of what
6 is offered is the co-production of a range of other actors who have clearly shaped its
7 formulation. Given its nature, it would be inappropriate to not start by stating, that this paper
8 is the consequence of all the generous sharing by and with *all* those we have worked with
9 across numerous years in research and service provision. We are grateful to them for
10 educating us, and as such we feel advocates rather than originators of the sentiments
11 contained within this paper.
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18 Participant Action Research (PAR) combines two separate research concepts:
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- 20 • Participation - active involvement of ‘subjects’ in the research process; and
- 21 • Action - defining social problems and solving them.
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24 It sits within a spectrum of what is considered patient, public or service user involvement.
25 The movement to increased participation is often concentrated on provision and receipt of
26 health and social care services, but also includes research into the effectiveness of services
27 too (Brett et al 2014, Voorberg 2015). An early defining model of this spectrum was
28 Arnstein’s (1969) ladder of citizen participation, which suggested a full spectrum from
29 manipulation to citizen control. In research terms, we might suggest some of the positions
30 along the spectrum as:
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- 36 • Non-Participation (manipulation) – service users partake purely as respondents from
37 whom data is collected.
- 38 • Degrees of moderate involvement – consultation or involvement in steering groups
39 only.
- 40 • Significant involvement - delegated and designated roles within the research as
41 researchers.
42
- 43 • Participatory Research - involved in the need for and commissioning of research,
44 and/or as full team members from research bid through to final report.
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50 The two concepts of PAR bring different elements and understanding to the research process.
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3 *Participatory* - this is what Gilbert (2008) refers to as doing with and for, rather than on
4 others. It is thus concerned with definitions of expertise and knowledge and who controls
5 these. It comes with what Humphries (2008) identifies as having several principles:
6

- 7
- 8 • a bottom up approach with a focus on locally defined priorities, processes and
9 perspectives;
- 10
- 11 • striving for equalising power among researchers and researched;
- 12
- 13 • a process characterised by a genuine dialogue between researcher and researched;
- 14
- 15 • control over definition of problems, methods, analysis and actions is with those most
16 affected by the study;
- 17
- 18 • the emphasis is on processes as much as on outcomes; and
- 19
- 20 • the role of the researcher is one of facilitator and catalyst rather than director.
21

22 Secondly:

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24 *Action* - proposes that action researcher and members of a social setting collaborate in the
25 understanding of a problem and in the development of a solution based on this understanding
26 (Bryman 2008). This is supported by an emphasis on:
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- 29
- 30 • nonintrusive collaboration (including ownership of the project by the group);
- 31
- 32 • mutual trust and genuine respect;
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- 34 • solidarity (all humanity is connected by a common journey and shared destiny);
- 35
- 36 • mutuality and equality (everyone's interests are important);
- 37
- 38 • a focus on process (informal interaction that goes beyond a detached working
39 relationship and respects others' cultures); and
- 40
- 41 • language as an expression of culture and power.
42

43 Action research seeks intended consequences and expects elements of change to be
44 experienced by all. It pursues to overtly improve the social situation, with both explicit
45 practical application and political activity. It can occur across several activities, for example:
46 organisational change, community development, new projects, practitioner research and
47 social injustice.
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51 The overall approach can be summarised as concerning itself with '*People, Power and*
52 *Praxis*' (Gilbert 2008) where traditional academic researchers translate their role into one of
53 facilitating the goals of their co-researchers. Carey (2010) echoes these sentiments, in which
54 three key considerations are raised: practical impediments, ethical implications and political
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3 dilemmas. He goes onto caution that there are possibilities that participation in research can
4 mirror some of the current preoccupations in wider policy and provision, where participation
5 may be encouraged or increased but not necessarily be successful in addressing the power
6 dynamics; and may even exasperate them.
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10 Privileged Access Interviewers (PAI) is a term that best captures why such methods are
11 especially well suited for research inquiries into areas of activity and with people in
12 experiences that are subject to societal marginalisation and often referred to as '*hard to*
13 *reach*'. These include those of substance use. The approach is political apposite where there
14 is a need to reach into certain populations, who are perhaps not readily captured by traditional
15 research methodology. There are distinct overlaps with the ethnographic approaches drawn
16 from social anthropology (Fine and Hancock 2017), and the essential role of those with
17 access, as established through Whyte's (1993) seminal text and his relationship with Doc.
18 Ennis and Wykes (2013) concluded that such involvement of service users in the research
19 process enabled greater levels of recruitment to projects. Further, participatory approaches
20 (i.e. those emphasising what can be considered as co-production), have a resonance and value
21 in understanding the experiences of marginalised populations (Tedmanson 2016).
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30 The principles of these approaches can, as most research techniques can, be applied to a
31 range of design, data collection and analysis methods. This said, there is to some degree an
32 inherent bias towards the subjective rather than the objective. Thus, many articulate for the
33 use of an extensive range of qualitative written, visual and textual data collection methods
34 (Bryant 2016), to compliment the traditional dominant paradigm for random control trials,
35 statistics and surveys.
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40 Within these discourses, the use of terminology implies ontological and methodological
41 positions. The ethical, morale and methodological implications of this language are explored
42 further on, but for consistency this paper, from hereon in, refers to those whom are actively
43 involved in the research as participants and those who contribute or offer data examples as
44 respondents. For expediency, it adopts substance use to capture the diversity of both
45 'substances' (alcohol, illicit, legal and illegal drugs) and 'use' (dependency, excessive,
46 harmful, hazardous and recreational).
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52 **Starting Points**

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54 These approaches have several assumptions (or givens) that might be considered as pre-
55 existing contextual considerations.
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3 Whilst the idea that a group of service users will just wander up to a university and ask for
4 assistance in a research project might sound like the optimum and theoretical starting point
5 (and indeed does occasionally happen), it is likely (and should be likely if co-production is
6 indeed an increasingly wider commissioning, policy and service provision norm) that ideas
7 are generated from within existing involvement activity. This could or should happen in
8 substance use organisations or fora where meaningful participation is already well established
9 with regards to other business or activities. This methodology therefore demands that initial
10 conversations have been reciprocal and not unduly led by agencies/researchers to meet their
11 own agendas. Thus, involvement prior to design or research bid application, moves research
12 further along the possible spectrum of participation.
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15 From here it is appropriate to have one or two dedicated conversations/meetings that scope
16 out a project. These might well want to involve others not deemed as participants, as well as
17 early project initiators. This is important to ensure that the research is supported, welcomed
18 and has a good level of stakeholder engagement and involvement from the start. These early
19 conversations need to include explicit exploration of ethical and resourcing issues. Such solid
20 foundations of shared understanding are important, to help ease future resistance, when goals
21 are directed towards political change.
22

23
24 It is likely, if not desirable or expected, that such a stage maybe the precursor to a formal
25 funding application. Although as outlined below, acquiring funding is not without its
26 difficulties. Ideally in such instances, applications are made with participants rather than on
27 their behalf.
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30 It feels important to emphasise that, in these early meetings, service user and participant
31 voice is strong and not of a singular or representative type. Indeed, some might argue they
32 need to be the majority for it to be truly participative, and the involvement of other
33 professionals and researchers is for consultation.
34

35 **Identifying and recruiting participants**

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37 In many instances those individuals involved in the initial and scoping conversations may
38 well be those identified as the participants or PAIs. It feels important that potential
39 participation is invited across many roles and responding to a variety of interest and skills,
40 such as: project advisories or consultants, full blown participants, advertisers, recruiters,
41 respondents and supporters. While initial conversations may generate enough involvement, in
42 many instances there is likely to be the need for further recruitment - especially for PAI type
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3 projects. This will need to follow a purposeful sampling methodology, using a combination
4 of targeted advertisement (with active consideration given to mobile and social media
5 methods) and snowballing through existing networks and relationships.
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8 There comes a point in participatory methods, if this has not happened fully at inception,
9 where any project needs to ensure its direction is highly participant led. At this juncture, the
10 research team (PAI and supporting academics) need to possibly withdraw from wider
11 stakeholder discussions and begin to enable an approach which is very much service led,
12 rather than informed. The role of the (academic) researcher here, is to facilitate discussions
13 and understanding among the participants, and support them to agree upon the specific
14 methods of inquiry.
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20 Substance use research has the possibility to see co-production beyond the service user group
21 and partnership could see carers, families, practitioners or students become the participant
22 population.
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25 **Language and Terminology**

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28 Early formulations of this paper, were borne out of and reflect struggles with language. Much
29 research literature frequently refers to participants. When in the context of an understanding
30 of genuine partnership involvement, what is being referred to is, those from whom data has
31 been collected. The use of participant almost seems a hangover of a subject involved in a
32 controlled experiment, rather than any sense of any co-production; the exceptions perhaps
33 being those engaged in ethnography or discourse analysis. For us, the ambiguity and
34 confusion was cleared by choosing to be firm in distinguishing between those from whom we
35 collect data (respondents), and those who actively participate in the other aspects of the
36 research process (participants).
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43 While such deliberations, may appear of semantics, they are in fact rooted in issues of power.
44 At the heart of them lies a transparent declaration of whether researchers are distinct from
45 (expert and controlling), or sharing in the same human experience (indeed, most alcohol
46 researchers are drinkers). The latter position begins to ask fundamental questions of whether
47 one truth or measurable actuality exists, rather than being a construct of any given (research)
48 process. Furthermore, it raises questions of who is the expert and in what capacity. It also
49 suggests the equal validity of all research methods, rather than supporting a hierarchy of the
50 traditional or dominant. Finally, it implies the assumption of a sharing of access to resources
51 and rewards from the research process.
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Ethics

As research, normal ethical considerations and processes must be accounted for. Projects will need to undertake appropriate due research ethics processes. It is possible that where ethics boards are predominantly used to, or dominated by traditional positivist and experimental type research approaches, that understanding of, and support for, PAR approaches maybe more limited. However, it is our experience that ethical approval is gained when attention is paid to specific key considerations; notably issues of boundaries and researcher confidence.

These approaches have a resonance with ethnography, which in turn helps to inform the management (or not) of boundary issues. Researchers are considered, if not expected, to be an active part of the community. Indeed, it is the opposite of aloof non-participatory observation which, in terms of the politics of involvement, might be considered a more exploitative and unethical approach. Working within discreet populations, as accessed via a PAI, challenges the boundaries of what is considered normal confidentiality for other research methodologies. Tolich (2004) acknowledges that an overt understanding of this helps accept the limits in the principles of confidentiality. Insiders are more likely to recognise what other insiders have said. He concludes that internal confidentiality is distinct from external confidentiality, and suggests the assurances for protection against identification is with those who were not subjects of the research, rather than within the discreet population cohort or community.

Because the methodology described here is a) not as deterministic or predictable in its course of action and b) process orientated, then the ethical requirement is for confidence in the researcher and/or research team (as much as the prescription of methods) and the successful management of what can appear as more fluid boundaries between the researcher and the researched. Ethics committee confidence, is often, as with other methods and about relevant prior experience of the researcher. One of the authors (as a registered social worker) has found it is important to stress equally the oversight of practice and research ethics. Thus, the process of being held accountable to a professional regulatory body, compliment those of research ethics, as might a social work qualification compliment a PhD. This is because many of the research ethics issues are foremost practice dilemmas.

As might be expected, there is also regular concern raised about the use of payments for participants in this area of research, and possibilities of monies being spent on alcohol or drugs. The ethical concerns often fall into two considerations: those of undue incentive to

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3 participate, and/or payment leading to risk of harm. However, many researchers have now
4 clearly articulated why genuine participation (issues of power) require this group of users to
5 be treated the same as others and that payment is a requisite (Fry et al 2006, Neale et al 2017,
6 Sandberg 2008). The counter argument, therefore stems around payments as justifiable and
7 fair reimbursement for time given and expenses occurred. The usual compromise is to
8 provide individuals with high street shopping vouchers that cannot be exchanged for alcohol
9 or cigarettes. Fry et al (2006) in their article conclude “...*research payments are ethically*
10 *acceptable in most circumstances of addictions research, but should be closely scrutinized in*
11 *situations where these may exacerbate existing harms or create additional risks for*
12 *participants and investigators*” (p21). In extreme cases (i.e. street drug dealing or use of
13 drugs by sex workers), then payment maybe the only way individuals can viably participate
14 without loss of income earning time, and cash rather than any voucher system will be
15 required (Sandberg 2008).
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24 **Funding and research bids**

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27 If a bid for a participatory project is to be made with clear evidence of involvement having
28 informed it, then this involvement also needs funding. For traditional research, bid
29 preparation activity, is part of the paid job role for academics. To ensure a parity and active
30 involvement of others, it seems to be an important and logical consideration that some of the
31 commissioning, policy and organisational fora (referred to above), is also able to create funds
32 and resource capacity for appropriate involvement to inform potential research project
33 starting points.
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39 Even assuming this informed prior application involvement, one of the biggest barriers to
40 getting such research projects off the ground, is often the successful acquisition of external
41 funding. Research funds often sit in a competitive bid process, including blind peer review
42 processes. These processes aspire to establish exactly what a research project is going to do,
43 so how well detailed and predictable and/or reliable the methodology described is. These
44 scoring methods often have a bias towards predictive/positivist experimental research over
45 methods where determining the methodology is a part of the process and not fully determined
46 prior to. Truly iterative and participatory approaches cannot provide such clarity before they
47 have begun. In addition, and much like the ethics committee, the bids are assessed by panels
48 of experts whose own experiences and understanding lie with controlled experiments,
49 quantitative surveys and statistical modelling rather than qualitative involvement. Thus, there
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3 is a more inherent bias where participatory action approaches are neither understood, nor
4 valued by those responsible for making such judgements. Typical of those sentiments is the
5 following example that this author received from a recent ‘friendly’ reviewer post an award
6 being made:
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10 *The use of participant researchers looks innovatory but pretty risky, and the sample*
11 *size is very small. A small and potentially contentious methodology ... is unlikely to*
12 *make a big difference to conclusions even if it worked.*
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15 This situation was recently acknowledged at the 2017 Alcohol Research UK Annual
16 Conference, that in part has led to this special edition¹.
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19 **Data collection and analysis**

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21 Whilst all forms of data collection tools can be used within participatory approaches, there is
22 often an inherent leaning towards the intrapersonal and relationship based inquires, so
23 frequently qualitative methodology. Whilst this may regularly be done through focus groups
24 and interviews with schedules and a range of semi-structured questions, participatory
25 approaches also lend themselves to the use of arts and other creative data capture approaches
26 (Bryant 2016). Iterative approaches (typical of highly qualitative methods to data collection
27 and analysis, whereby the experience of one element feeds into and refines the next) feel
28 highly resonant with involvement approaches that are seeking to develop collective
29 understanding and inform change.
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37 It is possible that PAIs will at these junctures require some formative input from the
38 academics or others within the research team. Thus, some of the research team need at times
39 to translate facilitator into educator roles. So, the stage here is the sharing of expertise and
40 knowledge about research techniques. Active consideration must be given to how material
41 often used in other classroom settings, might need to be adapted for different audiences and
42 learning needs.
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47 It can be useful for PAIs to conduct the data collection method on each other. This provides:
48 a) safe space to practice and receive feedback on, and refine techniques; and b) potential
49 initial data that can be used within the wider data collection set. It might be that where data
50 has been collected via film or audio, that the experienced researcher facilitator also watches
51 and listens to the data, to provide supportive feedback to PAIs. Similarly, methods of analysis
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56 ¹ <http://alcoholresearchuk.org/news/alcohol-research-uk-annual-conference-2017/>
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3 might need to be explained or adapted to suit the needs of the PAI population. Consideration
4 needs to be given to how best to support PAI involvement in analysis, so without assumption
5 about access to and competence in IT. Some PAIs will want to be actively involved in the use
6 of say SPSS or NVivo, but for others, a paper based or aural process maybe more suitable.
7
8 Added reliability can occur with dual analysis approaches and then comparison of
9 interpretations, so one approach for some PAIs and then a complimentary or additional one
10 from the experienced or academic team members. An active but supportive role of
11 experienced researchers within the cohort, can act as an additional process of quality
12 assurance.
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18 Recruitment of respondents, is likely to follow the same purposeful sampling methodology,
19 using a combination of targeted advertisement (with active consideration given to mobile and
20 social media methods) and snowballing through the existing networks and relationships used
21 in PAI recruitment. Research that utilises peer and recovery groups means that individuals are
22 known to each other within the community. Reflexive considerations of insider research
23 approaches are required. Within this, identification of what proximity to potential
24 respondents the PAIs are should be undertaken and used as inclusion or exclusion criteria; or
25 passed onto another PAI within the project.
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31 As PAIs spread out into the respective community and collect data, the experienced members
32 of the team must be available for ongoing mentoring and support.
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35 **Post data considerations**

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37 Like other research methods, it is good to find a process by which emerging outcomes can be
38 'tested' out with those most likely to be impacted; and their responses to this, can shape any
39 final conclusions. This could include taking initial findings back to any initiating fora or
40 project advisory group. Active recovery communities, are also likely to provide on-going
41 spaces where PAIs can test and make sense of emerging findings and conclusions.
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46 It is likely that commissioners of research will want to see traditional 'research reports'.
47 Further, any academics involved will want to, and be under pressure to, publish within peer
48 review journals. In both these regards it is important that a) the opportunity to participate in
49 'writing up' is extended to PAIs, and b) irrespective of their involvement in the writing up,
50 they are fully acknowledged (with consent) as co-authors. However, some projects, some
51 groups etc., may also identify other non-written ways of wanting to present research findings.
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56 The adoption of these seems important, especially when considering research as both
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involved and action orientated. The change implied in action is likely to come from the widest of dissemination approaches.

Part of an action orientated methodology, which has process as important as outcomes, and considers outcomes for all, is about establishing sustainable PAI populations to then a) advise and support commissioning of future research, b) get involved in other projects, and c) act as peer mentors for future PAIs.

Applied Framework

It is possible to synthesise these considerations into a broad or proximate framework (model) comprising multiple stages.

Table 1: Model of stages of Participant Action Research approach

Insert table 1 here

Stages are iterative and overlap.

* These stages involve processes and organisations that are possibly external to the research team, so not fully within projects influence.

Applied considerations

This paper has been influenced by a diversity of previous and on-going research projects. However, given the considerations described, it has equally (if not more so) been informed by: many unsuccessful research bids, policy conversations, recovery group deliberations and reflections on the limitations of other research (including ours). This final section offers some of the learning we have acquired through these experiences.

PAR projects require a lot of (and at times freely given) energy and time, to ensure they are successful and sustainable. Several of the recent projects we have contributed to, have come out of long-term prior existing relationships. In other words, we have been actively involved in those fora discussed in the earlier part of this paper. This requires the academic researcher to spend time out and about in the community. Notably, we have been active members of recovery group networks and partnerships, often giving skills and time just like any other volunteer. Successful bids and projects are far more likely to come from already established and trusting relationships. We have, as is consistent with other research approaches, spent time doing early, small and unfunded pilot formulations. There is a need to continue, especially in economic climates where organisations and universities increasingly seek to

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3 restrict activities to those associated with computerised workload management agendas, for
4 researchers to articulate that such time spent is necessary and valuable - especially as this is
5 required to be off site. There is scope here to use organisational good citizenship or social
6 good agendas to help meet these goals.
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10 That participatory research, especially that involving action (for change), is as much a
11 political, as it is research activity has therefore been one of the earliest and consistent
12 messages. Biskin et al (2013) identify how even the simple task of social work students being
13 encouraged in the classroom to expect service user and carer involvement, then meet
14 resistance when wanting to account for whether they actually experience such in practice
15 through a research project. So, whilst the service user involvement agenda is well established
16 in substance use policy and provision agendas, it has yet to fully impact on the research
17 world. Service user involvement has tended to primarily focus on the active participation of
18 'users' within treatment policy and provision agendas, rather than all users and ex users and
19 including evaluation and research activities. In a recently completed review of the Welsh
20 Governments 10-year alcohol (and drug) strategy, there was no PAR material amongst the
21 relevant data sets and evaluations (Author et al 2017).
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30 PAR and PAI approaches require inclusivity, and measured risk taking, if they are to succeed
31 in being different and provide alternative explanations. We have had expressed to us concerns
32 about PAIs interviewing those who are still actively using and exposing their own
33 vulnerability to relapse (which assumes that PAIs are abstinent – which need not necessarily
34 be the case) and how rigid (or not) any criteria for PAIs needs to be. This in turn, raises
35 concerns for us, about whether researchers could be tempted into using PAI recruitment
36 methodologies which are too strict, or too controlling, unless they themselves are prepared to
37 take a few risks. PAR research ought to have the capacity to involve the whole spectrum of
38 use or not. It is by its nature risk taking rather than risk adverse. When working with those in
39 recovery as PAIs, it seems important to entrust to their already successfully developed
40 notions of management and networks of support, rather than impose secondary researcher led
41 frameworks. In fact, this makes us think that the success of PAI methodologies is also
42 shaped by the characteristics of the research facilitator as it those of the PAIs recruited.
43 Inclusivity and risk taking is thus required by those; commissioning, evaluating, overseeing
44 and undertaking research. This seems to be only a fair and reciprocal to the risk we ask of
45 others in entrusting and sharing their experiences with us.
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3 It feels as if over the last decade that the tide is finally turning. Indeed, the ARUK conference
4 that is the precursor and inspiration for this special edition, is one obvious marker in this
5 evolutionary journey. The explicit requirement to demonstrate involvement now appears to
6 be a regular element of research bid application process requirements. Indeed, we have had
7 more bid success of late (albeit maybe it is just that we have got a bit better at that bit).
8
9 Notably, and very recently, an acceptance of the validity of the contribution these methods
10 can make to enhance a complexity of methods in understanding national policy, has been
11 acknowledged by Health Scotland in its commissioning of participatory methods as one of
12 the streams within the evaluation of the impact of minimum unit pricing on harmful drinkers
13 (NHS Health Scotland 2017).
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19 **Concluding discussion**

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21 At one level, there is nothing revolutionary in the principles of PAR or the methodological
22 considerations explored within this paper. In part, they just feel like good conscious and
23 reflexive research practices. However, at another level they seek to comprehensively resonate
24 with aspirations for greater service user involvement in policy, practice and research
25 activities. They have a feel of the ideological, a set of best laid aspirations and intentions. In
26 this sense, the revolutionary comes from trying to meet as many of the ambitions as possible
27 within each project, while contributing to an overall picture of change and challenge to an
28 existing order that places expert led controlling experimental research at the pinnacle of
29 perceived research hierarchies.
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37 It is possible to reduce these complex discussions into three clear reasons why we should do
38 and see more PAR/PAI research within alcohol and other drug studies. Firstly, this feels like
39 a moral imperative. It is just the right thing to do. There has been an explosion in service user
40 involvement in policy and service provision for substance use, and this needs to be matched
41 by those researching such. Substances are widely consumed in society, including by
42 researchers, the boundaries between an 'us and them' population often maintained by
43 researchers, in this instance seems particularly false. It maybe that we need to turn the
44 traditional research ethics preoccupation with protecting the vulnerable on its head, and into
45 one of entrust, empower and respect. Secondly, this is a political issue. It raises fundamental
46 questions of ontology and epistemology. A challenge to a dominant and vested interest about
47 who does research and how. It asks questions of who is the 'expert'. It asks that research has
48 an impact beyond the vested interest of the academic career and the research frameworks that
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3 academic institutions are increasingly judged by. Finally, and this is the purpose of research,
4 new methodologies help create new understanding. There is more than one way to know how.
5 It is a direct and appropriate response to Orford's (2008) seminal paper that argued for
6 substance use research to move beyond its preoccupation with the randomised control trial.
7 These are methodologies that enable us to gain a greater insight into the nature of experiences
8 and relationships that are at the core of understanding why individuals develop difficulties
9 regarding their substance use and how they might best be supported in developing healthier
10 lifestyles.
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16 It is possible to see two overlapping 'new' waves at work here. Where research has accepted
17 the role of the sociological and qualitative to compliment the experimental and quantitative, it
18 has yet to fully embrace moves to take this outside of the academy. Similarly, where
19 substance use has embraced harm reduction and whole population agendas as a response to
20 narrow disease model understandings, it has yet to fully reconcile itself with some of the
21 newer debates and understanding about recovery and the increased control and involvement
22 of those most affected. This paper simply seeks to contribute to these journeys.
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Drugs and Alcohol Today

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Stages		
Early and Formative	A	Agreeing scope of project and initial starting points (Including resources and research bids)
	B	Recruiting PAIs (Within inception fora and beyond where necessary)
	C	Broad agreement on research question and preferred methods
	*	<i>Ethics</i>
Of Data	D	Developing detail of data collection methods (including PAI training sessions)
	E	Piloting
	F	Revising data collection skills and tools
	G	Respondent service user recruitment
	H	Data collection and analysis
	I	(ongoing training and support to PAI from experienced team members)
End Games and Impact	K	Output Production
	L	Dissemination
	*	<i>Commissioning, policy, organisational and service provision change</i>
	M	(Next project)

Participatory Action Research (PAR) Research – Critical methodological considerations

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Abstract

Purpose: The purpose of this paper is to explore a range of key deliberations with regards to adopting Participatory Action Research (PAR) and Privileged Access Interviewer (PAI) approaches and methodologies within research on substance use

Design/methodology/approach: This paper is a reflective piece, it adopts a mixture of applied practice and theory considerations. These conceptualisations capture what are still relatively early understandings and uses of such methodologies, acquired across several decades of research and service provision experiences. The paper is structured around some of the sequences of the research process and as such provides a broad framework for such approaches.

Findings: PAR and PAI approaches utilise several key theoretical considerations. There are many critical issues associated with adopting these approaches, including those of ethics, funding, involvement, language, resources and support. Three key principle reasons (moral, political and research based), help explain why we should see more adoption of such approaches in substance use related research.

Research limitations/implications: This paper represents author views which are by their nature very subjective.

Practical implications: Implementation of the key considerations highlighted within this paper can lead to an active adoption of PAR and PAI methodologies within alcohol and drug research. Increasing the use of such methodologies will allow commissioners, researchers and

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3 service providers to develop a more nuanced understanding of the experiences of and
4 responses to alcohol and drug use.
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7 Originality/value: This paper captures critical conversations at a time of increased calls for
8 service user involvement across all aspects of alcohol and other drug provision, including
9 evaluation and research.
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12 Key Words: Alcohol and Drugs, Involvement, Participatory Action Research, Research
13 Methodologies, Substance Use
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15 16 **Introduction**

17
18 This paper is based explicitly on the current views of its named authors. However, like all
19 research papers, it builds upon previous experiences and projects (for example Bisikin et al
20 2013, Livingston et al 2011), and previous writing (Livingston 2016, 2017). Therefore, much
21 of what is offered is the co-production of a range of other actors who have clearly shaped its
22 formulation. Given its nature, it would be inappropriate to not start by stating, that this paper
23 is the consequence of all the generous sharing by and with *all* those we have worked with
24 across numerous years in research and service provision. We are grateful to them for
25 educating us, and as such we feel advocates rather than originators of the sentiments
26 contained within this paper.
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33 Participant Action Research (PAR) combines two separate research concepts:
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- 35 • Participation - active involvement of ‘subjects’ in the research process; and
- 36 • Action - defining social problems and solving them.
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40 It sits within a spectrum of what is considered patient, public or service user involvement.
41 The movement to increased participation is often concentrated on provision and receipt of
42 health and social care services, but also includes research into the effectiveness of services
43 too (Brett et al 2014, Voorberg 2015). An early defining model of this spectrum was
44 Arnstein’s (1969) ladder of citizen participation, which suggested a full spectrum from
45 manipulation to citizen control. In research terms, we might suggest some of the positions
46 along the spectrum as:
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- 51 • Non-Participation (manipulation) – service users partake purely as respondents from
52 whom data is collected.
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- Degrees of moderate involvement – consultation or involvement in steering groups only.
- Significant involvement - delegated and designated roles within the research as researchers.
- Participatory Research - involved in the need for and commissioning of research, and/or as full team members from research bid through to final report.

The two concepts of PAR bring different elements and understanding to the research process.

Firstly:

Participatory - this is what Gilbert (2008) refers to as doing with and for, rather than on others. It is thus concerned with definitions of expertise and knowledge and who controls these. It comes with what Humphries (2008) identifies as having several principles:

- a bottom up approach with a focus on locally defined priorities, processes and perspectives;
- striving for equalising power among researchers and researched;
- a process characterised by a genuine dialogue between researcher and researched;
- control over definition of problems, methods, analysis and actions is with those most affected by the study;
- the emphasis is on processes as much as on outcomes; and
- the role of the researcher is one of facilitator and catalyst rather than director.

Secondly:

Action - proposes that action researcher and members of a social setting collaborate in the understanding of a problem and in the development of a solution based on this understanding (Bryman 2008). This is supported by an emphasis on:

- nonintrusive collaboration (including ownership of the project by the group);
- mutual trust and genuine respect;
- solidarity (all humanity is connected by a common journey and shared destiny);
- mutuality and equality (everyone's interests are important);
- a focus on process (informal interaction that goes beyond a detached working relationship and respects others' cultures); and
- language as an expression of culture and power.

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3 Action research seeks intended consequences and expects elements of change to be
4 experienced by all. It pursues to overtly improve the social situation, with both explicit
5 practical application and political activity. It can occur across several activities, for example:
6 organisational change, community development, new projects, practitioner research and
7 social injustice.
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11 The overall approach can be summarised as concerning itself with '*People, Power and*
12 *Praxis*' (Gilbert 2008) where traditional academic researchers translate their role into one of
13 facilitating the goals of their co-researchers. Carey (2010) echoes these sentiments, in which
14 three key considerations are raised: practical impediments, ethical implications and political
15 dilemmas. He goes onto caution that there are possibilities that participation in research can
16 mirror some of the current preoccupations in wider policy and provision, where participation
17 may be encouraged or increased but not necessarily be successful in addressing the power
18 dynamics; and may even exasperate them.
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25 Privileged Access Interviewers (PAI) is a term that best captures why such methods are
26 especially well suited for research inquiries into areas of activity and with people in
27 experiences that are subject to societal marginalisation and often referred to as '*hard to*
28 *reach*'. These include those of substance use. The approach is political apposite where there
29 is a need to reach into certain populations, who are perhaps not readily captured by traditional
30 research methodology. There are distinct overlaps with the ethnographic approaches drawn
31 from social anthropology (Fine and Hancock 2017), and the essential role of those with
32 access, as established through Whyte's (1993) seminal text and his relationship with Doc.
33 Ennis and Wykes (2013) concluded that such involvement of service users in the research
34 process enabled greater levels of recruitment to projects. Further, participatory approaches
35 (i.e. those emphasising what can be considered as co-production), have a resonance and value
36 in understanding the experiences of marginalised populations (Tedmanson 2016).
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45 The principles of these approaches can, as most research techniques can, be applied to a
46 range of design, data collection and analysis methods. This said, there is to some degree an
47 inherent bias towards the subjective rather than the objective. Thus, many articulate for the
48 use of an extensive range of qualitative written, visual and textual data collection methods
49 (Bryant 2016), to compliment the traditional dominant paradigm for random control trials,
50 statistics and surveys.
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3 Within these discourses, the use of terminology implies ontological and methodological
4 positions. The ethical, morale and methodological implications of this language are explored
5 further on, but for consistency this paper, from hereon in, refers to those whom are actively
6 involved in the research as participants and those who contribute or offer data examples as
7 respondents. For expediency, it adopts substance use to capture the diversity of both
8 'substances' (alcohol, illicit, legal and illegal drugs) and 'use' (dependency, excessive,
9 harmful, hazardous and recreational).
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14 **Starting Points**

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17 These approaches have several assumptions (or givens) that might be considered as pre-
18 existing contextual considerations.
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21 Whilst the idea that a group of service users will just wander up to a university and ask for
22 assistance in a research project might sound like the optimum and theoretical starting point
23 (and indeed does occasionally happen), it is likely (and should be likely if co-production is
24 indeed an increasingly wider commissioning, policy and service provision norm) that ideas
25 are generated from within existing involvement activity. This could or should happen in
26 substance use organisations or fora where meaningful participation is already well established
27 with regards to other business or activities. This methodology therefore demands that initial
28 conversations have been reciprocal and not unduly led by agencies/researchers to meet their
29 own agendas. Thus, involvement prior to design or research bid application, moves research
30 further along the possible spectrum of participation.
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38 From here it is appropriate to have one or two dedicated conversations/meetings that scope
39 out a project. These might well want to involve others not deemed as participants, as well as
40 early project initiators. This is important to ensure that the research is supported, welcomed
41 and has a good level of stakeholder engagement and involvement from the start. These early
42 conversations need to include explicit exploration of ethical and resourcing issues. Such solid
43 foundations of shared understanding are important, to help ease future resistance, when goals
44 are directed towards political change.
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50 It is likely, if not desirable or expected, that such a stage maybe the precursor to a formal
51 funding application. Although as outlined below, acquiring funding is not without its
52 difficulties. Ideally in such instances, applications are made with participants rather than on
53 their behalf.
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3 It feels important to emphasise that, in these early meetings, service user and participant
4 voice is strong and not of a singular or representative type. Indeed, some might argue they
5 need to be the majority for it to be truly participative, and the involvement of other
6 professionals and researchers is for consultation.
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9 10 **Identifying and recruiting participants**

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12 In many instances those individuals involved in the initial and scoping conversations may
13 well be those identified as the participants or PAIs. It feels important that potential
14 participation is invited across many roles and responding to a variety of interest and skills,
15 such as: project advisories or consultants, full blown participants, advertisers, recruiters,
16 respondents and supporters. While initial conversations may generate enough involvement, in
17 many instances there is likely to be the need for further recruitment - especially for PAI type
18 projects. This will need to follow a purposeful sampling methodology, using a combination
19 of targeted advertisement (with active consideration given to mobile and social media
20 methods) and snowballing through existing networks and relationships.
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27 There comes a point in participatory methods, if this has not happened fully at inception,
28 where any project needs to ensure its direction is highly participant led. At this juncture, the
29 research team (PAI and supporting academics) need to possibly withdraw from wider
30 stakeholder discussions and begin to enable an approach which is very much service led,
31 rather than informed. The role of the (academic) researcher here, is to facilitate discussions
32 and understanding among the participants, and support them to agree upon the specific
33 methods of inquiry.
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39 Substance use research has the possibility to see co-production beyond the service user group
40 and partnership could see carers, families, practitioners or students become the participant
41 population.
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45 **Language and Terminology**

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47 Early formulations of this paper, were borne out of and reflect struggles with language. Much
48 research literature frequently refers to participants. When in the context of an understanding
49 of genuine partnership involvement, what is being referred to is, those from whom data has
50 been collected. The use of participant almost seems a hangover of a subject involved in a
51 controlled experiment, rather than any sense of any co-production; the exceptions perhaps
52 being those engaged in ethnography or discourse analysis. For us, the ambiguity and
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3 confusion was cleared by choosing to be firm in distinguishing between those from whom we
4 collect data (respondents), and those who actively participate in the other aspects of the
5 research process (participants).
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8 While such deliberations, may appear of semantics, they are in fact rooted in issues of power.
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10 At the heart of them lies a transparent declaration of whether researchers are distinct from
11 (expert and controlling), or sharing in the same human experience (indeed, most alcohol
12 researchers are drinkers). The latter position begins to ask fundamental questions of whether
13 one truth or measurable actuality exists, rather than being a construct of any given (research)
14 process. Furthermore, it raises questions of who is the expert and in what capacity. It also
15 suggests the equal validity of all research methods, rather than supporting a hierarchy of the
16 traditional or dominant. Finally, it implies the assumption of a sharing of access to resources
17 and rewards from the research process.
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23 **Ethics**

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25 As research, normal ethical considerations and processes must be accounted for. Projects will
26 need to undertake appropriate due research ethics processes. It is possible that where ethics
27 boards are predominantly used to, or dominated by traditional positivist and experimental
28 type research approaches, that understanding of, and support for, PAR approaches maybe
29 more limited. However, it is our experience that ethical approval is gained when attention is
30 paid to specific key considerations; notably issues of boundaries and researcher confidence.
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36 These approaches have a resonance with ethnography, which in turn helps to inform the
37 management (or not) of boundary issues. Researchers are considered, if not expected, to be
38 an active part of the community. Indeed, it is the opposite of aloof non-participatory
39 observation which, in terms of the politics of involvement, might be considered a more
40 exploitative and unethical approach. Working within discreet populations, as accessed via a
41 PAI, challenges the boundaries of what is considered normal confidentiality for other
42 research methodologies. Tolich (2004) acknowledges that an overt understanding of this
43 helps accept the limits in the principles of confidentiality. Insiders are more likely to
44 recognise what other insiders have said. He concludes that internal confidentiality is distinct
45 from external confidentiality, and suggests the assurances for protection against identification
46 is with those who were not subjects of the research, rather than within the discreet population
47 cohort or community.
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3 Because the methodology described here is a) not as deterministic or predictable in its course
4 of action and b) process orientated, then the ethical requirement is for confidence in the
5 researcher and/or research team (as much as the prescription of methods) and the successful
6 management of what can appear as more fluid boundaries between the researcher and the
7 researched. Ethics committee confidence, is often, as with other methods and about relevant
8 prior experience of the researcher. One of the authors (as a registered social worker) has
9 found it is important to stress equally the oversight of practice and research ethics. Thus, the
10 process of being held accountable to a professional regulatory body, compliment those of
11 research ethics, as might a social work qualification compliment a PhD. This is because many
12 of the research ethics issues are foremost practice dilemmas.
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20 As might be expected, there is also regular concern raised about the use of payments for
21 participants in this area of research, and possibilities of monies being spent on alcohol or
22 drugs. The ethical concerns often fall into two considerations: those of undue incentive to
23 participate, and/or payment leading to risk of harm. However, many researchers have now
24 clearly articulated why genuine participation (issues of power) require this group of users to
25 be treated the same as others and that payment is a requisite (Fry et al 2006, Neale et al 2017,
26 Sandberg 2008). The counter argument, therefore stems around payments as justifiable and
27 fair reimbursement for time given and expenses occurred. The usual compromise is to
28 provide individuals with high street shopping vouchers that cannot be exchanged for alcohol
29 or cigarettes. Fry et al (2006) in their article conclude “...research payments are ethically
30 acceptable in most circumstances of addictions research, but should be closely scrutinized in
31 situations where these may exacerbate existing harms or create additional risks for
32 participants and investigators” (p21). In extreme cases (i.e. street drug dealing or use of
33 drugs by sex workers), then payment maybe the only way individuals can viably participate
34 without loss of income earning time, and cash rather than any voucher system will be
35 required (Sandberg 2008).
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46 **Funding and research bids**

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48 If a bid for a participatory project is to be made with clear evidence of involvement having
49 informed it, then this involvement also needs funding. For traditional research, bid
50 preparation activity, is part of the paid job role for academics. To ensure a parity and active
51 involvement of others, it seems to be an important and logical consideration that some of the
52 commissioning, policy and organisational fora (referred to above), is also able to create funds
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3 and resource capacity for appropriate involvement to inform potential research project
4 starting points.
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7 Even assuming this informed prior application involvement, one of the biggest barriers to
8 getting such research projects off the ground, is often the successful acquisition of external
9 funding. Research funds often sit in a competitive bid process, including blind peer review
10 processes. These processes aspire to establish exactly what a research project is going to do,
11 so how well detailed and predictable and/or reliable the methodology described is. These
12 scoring methods often have a bias towards predictive/positivist experimental research over
13 methods where determining the methodology is a part of the process and not fully determined
14 prior to. Truly iterative and participatory approaches cannot provide such clarity before they
15 have begun. In addition, and much like the ethics committee, the bids are assessed by panels
16 of experts whose own experiences and understanding lie with controlled experiments,
17 quantitative surveys and statistical modelling rather than qualitative involvement. Thus, there
18 is a more inherent bias where participatory action approaches are neither understood, nor
19 valued by those responsible for making such judgements. Typical of those sentiments is the
20 following example that this author received from a recent 'friendly' reviewer post an award
21 being made:
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31 *The use of participant researchers looks innovative but pretty risky, and the sample*
32 *size is very small. A small and potentially contentious methodology ... is unlikely to*
33 *make a big difference to conclusions even if it worked.*
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37 This situation was recently acknowledged at the 2017 Alcohol Research UK Annual
38 Conference, that in part has led to this special edition¹.
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41 **Data collection and analysis**

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43 Whilst all forms of data collection tools can be used within participatory approaches, there is
44 often an inherent leaning towards the intrapersonal and relationship based inquires, so
45 frequently qualitative methodology. Whilst this may regularly be done through focus groups
46 and interviews with schedules and a range of semi-structured questions, participatory
47 approaches also lend themselves to the use of arts and other creative data capture approaches
48 (Bryant 2016). Iterative approaches (typical of highly qualitative methods to data collection
49 and analysis, whereby the experience of one element feeds into and refines the next) feel
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57 ¹ <http://alcoholresearchuk.org/news/alcohol-research-uk-annual-conference-2017/>
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3 highly resonant with involvement approaches that are seeking to develop collective
4 understanding and inform change.
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7 It is possible that PAIs will at these junctures require some formative input from the
8 academics or others within the research team. Thus, some of the research team need at times
9 to translate facilitator into educator roles. So, the stage here is the sharing of expertise and
10 knowledge about research techniques. Active consideration must be given to how material
11 often used in other classroom settings, might need to be adapted for different audiences and
12 learning needs.
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17 It can be useful for PAIs to conduct the data collection method on each other. This provides:
18 a) safe space to practice and receive feedback on, and refine techniques; and b) potential
19 initial data that can be used within the wider data collection set. It might be that where data
20 has been collected via film or audio, that the experienced researcher facilitator also watches
21 and listens to the data, to provide supportive feedback to PAIs. Similarly, methods of analysis
22 might need to be explained or adapted to suit the needs of the PAI population. Consideration
23 needs to be given to how best to support PAI involvement in analysis, so without assumption
24 about access to and competence in IT. Some PAIs will want to be actively involved in the use
25 of say SPSS or NVivo, but for others, a paper based or aural process may be more suitable.
26 Added reliability can occur with dual analysis approaches and then comparison of
27 interpretations, so one approach for some PAIs and then a complimentary or additional one
28 from the experienced or academic team members. An active but supportive role of
29 experienced researchers within the cohort, can act as an additional process of quality
30 assurance.
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40 Recruitment of respondents, is likely to follow the same purposeful sampling methodology,
41 using a combination of targeted advertisement (with active consideration given to mobile and
42 social media methods) and snowballing through the existing networks and relationships used
43 in PAI recruitment. Research that utilises peer and recovery groups means that individuals are
44 known to each other within the community. Reflexive considerations of insider research
45 approaches are required. Within this, identification of what proximity to potential
46 respondents the PAIs are should be undertaken and used as inclusion or exclusion criteria; or
47 passed onto another PAI within the project.
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54 As PAIs spread out into the respective community and collect data, the experienced members
55 of the team must be available for ongoing mentoring and support.
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Post data considerations

Like other research methods, it is good to find a process by which emerging outcomes can be 'tested' out with those most likely to be impacted; and their responses to this, can shape any final conclusions. This could include taking initial findings back to any initiating fora or project advisory group. Active recovery communities, are also likely to provide on-going spaces where PAIs can test and make sense of emerging findings and conclusions.

It is likely that commissioners of research will want to see traditional 'research reports'. Further, any academics involved will want to, and be under pressure to, publish within peer review journals. In both these regards it is important that a) the opportunity to participate in 'writing up' is extended to PAIs, and b) irrespective of their involvement in the writing up, they are fully acknowledged (with consent) as co-authors. However, some projects, some groups etc., may also identify other non-written ways of wanting to present research findings. The adoption of these seems important, especially when considering research as both involved and action orientated. The change implied in action is likely to come from the widest of dissemination approaches.

Part of an action orientated methodology, which has process as important as outcomes, and considers outcomes for all, is about establishing sustainable PAI populations to then a) advise and support commissioning of future research, b) get involved in other projects, and c) act as peer mentors for future PAIs.

Applied Framework

It is possible to synthesise these considerations into a broad or proximate framework (model) comprising multiple stages.

Table 1: Model of stages of Participant Action Research approach

Insert table 1 here

Stages are iterative and overlap.

* These stages involve processes and organisations that are possibly external to the research team, so not fully within projects influence.

Applied considerations

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3 This paper has been influenced by a diversity of previous and on-going research projects.
4 However, given the considerations described, it has equally (if not more so) been informed
5 by: many unsuccessful research bids, policy conversations, recovery group deliberations and
6 reflections on the limitations of other research (including ours). This final section offers some
7 of the learning we have acquired through these experiences.
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10
11 PAR projects require a lot of (and at times freely given) energy and time, to ensure they are
12 successful and sustainable. Several of the recent projects we have contributed to, have come
13 out of long-term prior existing relationships. In other words, we have been actively involved
14 in those fora discussed in the earlier part of this paper. This requires the academic researcher
15 to spend time out and about in the community. Notably, we have been active members of
16 recovery group networks and partnerships, often giving skills and time just like any other
17 volunteer. Successful bids and projects are far more likely to come from already established
18 and trusting relationships. We have, as is consistent with other research approaches, spent
19 time doing early, small and unfunded pilot formulations. There is a need to continue,
20 especially in economic climates where organisations and universities increasingly seek to
21 restrict activities to those associated with computerised workload management agendas, for
22 researchers to articulate that such time spent is necessary and valuable - especially as this is
23 required to be off site. There is scope here to use organisational good citizenship or social
24 good agendas to help meet these goals.
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27
28 That participatory research, especially that involving action (for change), is as much a
29 political, as it is research activity has therefore been one of the earliest and consistent
30 messages. Biskin et al (2013) identify how even the simple task of social work students being
31 encouraged in the classroom to expect service user and carer involvement, then meet
32 resistance when wanting to account for whether they actually experience such in practice
33 through a research project. So, whilst the service user involvement agenda is well established
34 in substance use policy and provision agendas, it has yet to fully impact on the research
35 world. Service user involvement has tended to primarily focus on the active participation of
36 'users' within treatment policy and provision agendas, rather than all users and ex users and
37 including evaluation and research activities. In a recently completed review of the Welsh
38 Governments 10-year alcohol (and drug) strategy, there was no PAR material amongst the
39 relevant data sets and evaluations (Livingston et al 2017).
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3 PAR and PAI approaches require inclusivity, and measured risk taking, if they are to succeed
4 in being different and provide alternative explanations. We have had expressed to us concerns
5 about PAIs interviewing those who are still actively using and exposing their own
6 vulnerability to relapse (which assumes that PAIs are abstinent – which need not necessarily
7 be the case) and how rigid (or not) any criteria for PAIs needs to be. This in turn, raises
8 concerns for us, about whether researchers could be tempted into using PAI recruitment
9 methodologies which are too strict, or too controlling, unless they themselves are prepared to
10 take a few risks. PAR research ought to have the capacity to involve the whole spectrum of
11 use or not. It is by its nature risk taking rather than risk adverse. When working with those in
12 recovery as PAIs, it seems important to entrust to their already successfully developed
13 notions of management and networks of support, rather than impose secondary researcher led
14 frameworks. In fact, this makes us think that the success of PAI methodologies is also
15 shaped by the characteristics of the research facilitator as it those of the PAIs recruited.
16 Inclusivity and risk taking is thus required by those; commissioning, evaluating, overseeing
17 and undertaking research. This seems to be only a fair and reciprocal to the risk we ask of
18 others in entrusting and sharing their experiences with us.

19
20 It feels as if over the last decade that the tide is finally turning. Indeed, the ARUK conference
21 that is the precursor and inspiration for this special edition, is one obvious marker in this
22 evolutionary journey. The explicit requirement to demonstrate involvement now appears to
23 be a regular element of research bid application process requirements. Indeed, we have had
24 more bid success of late (albeit maybe it is just that we have got a bit better at that bit).
25 Notably, and very recently, an acceptance of the validity of the contribution these methods
26 can make to enhance a complexity of methods in understanding national policy, has been
27 acknowledged by Health Scotland in its commissioning of participatory methods as one of
28 the streams within the evaluation of the impact of minimum unit pricing on harmful drinkers
29 (NHS Health Scotland 2017).

46 **Concluding discussion**

47
48 At one level, there is nothing revolutionary in the principles of PAR or the methodological
49 considerations explored within this paper. In part, they just feel like good conscious and
50 reflexive research practices. However, at another level they seek to comprehensively resonate
51 with aspirations for greater service user involvement in policy, practice and research
52 activities. They have a feel of the ideological, a set of best laid aspirations and intentions. In
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3 this sense, the revolutionary comes from trying to meet as many of the ambitions as possible
4 within each project, while contributing to an overall picture of change and challenge to an
5 existing order that places expert led controlling experimental research at the pinnacle of
6 perceived research hierarchies.
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9
10 It is possible to reduce these complex discussions into three clear reasons why we should do
11 and see more PAR/PAI research within alcohol and other drug studies. Firstly, this feels like
12 a moral imperative. It is just the right thing to do. There has been an explosion in service user
13 involvement in policy and service provision for substance use, and this needs to be matched
14 by those researching such. Substances are widely consumed in society, including by
15 researchers, the boundaries between an 'us and them' population often maintained by
16 researchers, in this instance seems particularly false. It maybe that we need to turn the
17 traditional research ethics preoccupation with protecting the vulnerable on its head, and into
18 one of entrust, empower and respect. Secondly, this is a political issue. It raises fundamental
19 questions of ontology and epistemology. A challenge to a dominant and vested interest about
20 who does research and how. It asks questions of who is the 'expert'. It asks that research has
21 an impact beyond the vested interest of the academic career and the research frameworks that
22 academic institutions are increasingly judged by. Finally, and this is the purpose of research,
23 new methodologies help create new understanding. There is more than one way to know how.
24 It is a direct and appropriate response to Orford's (2008) seminal paper that argued for
25 substance use research to move beyond its preoccupation with the randomised control trial.
26 These are methodologies that enable us to gain a greater insight into the nature of experiences
27 and relationships that are at the core of understanding why individuals develop difficulties
28 regarding their substance use and how they might best be supported in developing healthier
29 lifestyles.
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34 It is possible to see two overlapping 'new' waves at work here. Where research has accepted
35 the role of the sociological and qualitative to compliment the experimental and quantitative, it
36 has yet to fully embrace moves to take this outside of the academy. Similarly, where
37 substance use has embraced harm reduction and whole population agendas as a response to
38 narrow disease model understandings, it has yet to fully reconcile itself with some of the
39 newer debates and understanding about recovery and the increased control and involvement
40 of those most affected. This paper simply seeks to contribute to these journeys.
41
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43 44 45 46 47 48 49 50 51 52 53 54 55 **References** 56 57 58 59 60

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3 Drugs and Alcohol Today Article – Response to Reviewers.
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6 We are grateful to both reviewers for the positive responses. We are in broad agreement with the
7 observations and suggestions made, and that they would improve the overall articles submission.
8 We have made minor amendments accordingly.
9

10 Reviewer: 1

11 Comments:

12
13 I felt there could be a fuller discussion of the ethics of reimbursements see e.g. Ritter, 2003; fry et
14 al., 2006; or Neale et al., 2017.
15

16 **While two of these sources were already cited, we have revisited the section and looked in particular**
17 **at the issue of cash as opposed to vouchers**

18
19 Difficulties of Funding - I wondered whether the authors had any suggestions to overcome this?
20

21 **Some suggestions are embedded in the applied considerations**

22
23 Post data considerations – I think the authors' ideas regarding PAI involvement in writing-up papers
24 and especially co-authorship is novel and important.
25

26 **See point below in regards to this paper and reviewer 2's comments**

27
28 Needs proof reading for a sporadic and overuse of commas.

29 **This has been attended to and each letter preceding deleted comma has been highlighted**
30
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33 Reviewer: 2

34
35 Would it be worth including a reference on page 5 line 42 when referring to '..some might argue
36 they need to be the majority...'
37

38 **Added**

39
40 The second paragraph on page 7 looks a little one sided, the limitations of 'non-participatory
41 research' are highlighted, perhaps briefly balancing this with the strengths of such an approach
42 might help even this section up a little.
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44 **Additional sentences added**

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46 The description of the process of applying for research funds in the last paragraph on page 8 is good
47 but would benefit from another supporting reference.
48

49 **Reference added**

50
51 Is it worth referring to the British Medical Journal approach ? the BMJ has adopted a requirement
52 that all papers submitted state clearly how patients/service users have been actively involved.
53

54 **This is has been noted in the applied considerations**

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56 It wasn't clear if the authors had consulted service users or involved them in writing this paper ?
57 there is a suggestion in the introduction that the writing is based on the authors' experience working
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3 with such people over some time but given the arguments raised in this paper some explanation of
4 how the authors approached this (or not) is needed.

5
6 **The wording in the introduction has been clarified**

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8 **A new paragraph added in post data considerations**

9
10 The conclusion does bring together the main strands of the paper however the first of the three
11 points referred to includes the issue of 'us and them' when referring to boundaries between
12 researchers and service users - this is an interesting point which is only briefly explored in the main
13 text when referring to researchers consuming alcohol, I think this line of thought is interesting and
14 could be expanded a little in the main body of the paper.

15
16 **Several additional sentences have been added/amended to reiterate this point in other sections –**
17 **e.eg confidentiality, language etc**

18
19 I wonder if there is scope to tailor or at least more directly relate the points made directly to drugs
20 and alcohol. A few examples are given but I suspect there is potential to make more explicit
21 reference and links.

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23 **Where possible, within word count we have tried to make this more overt**

24 25 26 27 28 **Participatory Action Research (PAR) Research – Critical methodological considerations**

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31 Authors

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36 Correspondence address –

37 38 **Abstract**

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40 Purpose: The purpose of this paper is to explore a range of key deliberations with regards to
41 adopting Participatory Action Research (PAR) and Privileged Access Interviewer (PAI)
42 approaches and methodologies within research on substance use

43
44 Design/methodology/approach: This paper is a reflective piece, it adopts a mixture of applied
45 practice and theory considerations. These conceptualisations capture what are still relatively
46 early understandings and uses of such methodologies, acquired across several decades of
47 research and service provision experiences. The paper is structured around some of the
48 sequences of the research process and as such provides a broad framework for such
49 approaches.
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Findings: PAR and PAI approaches utilise several key theoretical considerations. There are many critical issues associated with adopting these approaches, including those of ethics, funding, involvement, language, resources and support. Three key principle reasons (moral, political and research based), help explain why we should see more adoption of such approaches in substance use related research.

Research limitations/implications: This paper represents author views which are by their nature very subjective.

Practical implications: Implementation of the key considerations highlighted within this paper can lead to an active adoption of PAR and PAI methodologies within alcohol and drug research. Increasing the use of such methodologies will allow commissioners, researchers and service providers to develop a more nuanced understanding of the experiences of and responses to alcohol and drug use.

Originality/value: This paper captures critical conversations at a time of increased calls for service user involvement across all aspects of alcohol and other drug provision, including evaluation and research.

Key Words: Alcohol and Drugs, Involvement, Participatory Action Research, Research Methodologies, Substance Use

Introduction

This paper is explicitly the current views of its named authors. However, like all research papers, it builds upon previous experiences and projects (for example Biskin et al 2013, Author et al 2011) and previous writing (Author 2016, 2017). Therefore, much of what is offered emanates from co-production activities with other actors which have influenced its formulation. Given its nature, it would be inappropriate to not start by stating that this paper is the consequence of all the generous sharing by and with *all* those we have worked with across numerous years in research and service provision. We are grateful to them for educating us and as such we feel advocates rather than originators of the sentiments contained within this paper.

Participant Action Research (PAR) combines two separate research concepts:

- Participation - active involvement of ‘subjects’ in the research process; and
- Action - defining social problems and solving them.

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3 It sits within a spectrum of what is considered patient, public or service user involvement.
4 The movement to increased participation is often concentrated on provision and receipt of
5 health and social care services, but also includes research into the effectiveness of services
6 too (Brett et al 2014, Voorberg 2015). An early defining model of this spectrum was
7 Arnstein's (1969) ladder of citizen participation which suggested a full spectrum from
8 manipulation to citizen control. In research terms we might suggest some of the positions
9 along the spectrum as:
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- 14 • Non-Participation (manipulation) – service users partake purely as respondents from
15 whom data is collected.
- 16 • Degrees of moderate involvement – consultation or involvement in steering groups
17 only.
- 18 • Significant involvement - delegated and designated roles within the research as
19 researchers.
- 20 • Participatory Research - involved in the need for and commissioning of research,
21 and/or as full team members from research bid through to final report.
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28 The two concepts of PAR bring different elements and understanding to the research process,
29 including that of alcohol and drugs.
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32 Firstly:

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34 *Participatory* - this is what Gilbert (2008) refers to as doing with and for, rather than on
35 others. It is thus concerned with definitions of expertise and knowledge and who controls
36 these. It comes with what Humphries (2008) identifies as having several principles:
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- 40 • a bottom up approach with a focus on locally defined priorities, processes and
41 perspectives;
- 42 • striving for equalising power among researchers and researched;
- 43 • a process characterised by a genuine dialogue between researcher and researched;
- 44 • control over definition of problems, methods, analysis and actions is with those most
45 affected by the study;
- 46 • the emphasis is on processes as much as on outcomes; and
47 • the role of the researcher is one of facilitator and catalyst rather than director.
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54 Secondly:
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3 *Action* - proposes that action researcher and members of a social setting collaborate in the
4 understanding of a problem and in the development of a solution based on this understanding
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6 (Bryman 2008). This is supported by an emphasis on:

- 8 • nonintrusive collaboration (including ownership of the project by the group);
- 9 • mutual trust and genuine respect;
- 10 • solidarity (all humanity is connected by a common journey and shared destiny);
- 11 • mutuality and equality (everyone's interests are important);
- 12 • a focus on process (informal interaction that goes beyond a detached working
- 13 relationship and respects others' cultures); and
- 14 • language as an expression of culture and power.

15
16 Action research seeks intended consequences and expects elements of change to be
17 experienced by all. It pursues to overtly improve the social situation with explicit practical
18 application and political activity. It can occur across several activities, for example:
19 organisational change, community development, new projects, practitioner research and
20 social injustice.

21
22 The overall approach can be summarised as concerning itself with '*People, Power and*
23 *Praxis*' (Gilbert 2008) where traditional academic researchers translate their role into one of
24 facilitating the goals of their co-researchers. Carey (2010) echoes these sentiments in which
25 three key considerations are raised: practical impediments, ethical implications and political
26 dilemmas. He goes onto caution that there are possibilities that participation in research can
27 mirror some of the current preoccupations in wider policy and provision, where participation
28 may be encouraged or increased but not necessarily be successful in addressing the power
29 dynamics; and may even exasperate them.

30
31 Privileged Access Interviewers (PAI) is a term that best captures why such methods are
32 especially well suited for research inquiries into areas of activity and with people in
33 experiences that are subject to societal marginalisation and often referred to as '*hard to*
34 *reach*'. These include those of substance use. The approach is political apposite where there
35 is a need to reach into certain populations who are perhaps not readily captured by traditional
36 research methodology. There are distinct overlaps with the ethnographic approaches drawn
37 from social anthropology (Fine and Hancock 2017), and the essential role of those with
38 access as established through Whyte's (1993) seminal text and his relationship with Doc.
39 Ennis and Wykes (2013) concluded that such involvement of service users in the research
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3 process enabled greater levels of recruitment to projects. Further, participatory approaches
4 (i.e. those emphasising what can be considered as co-production) have a resonance and value
5 in understanding the experiences of marginalised populations (Tedmanson 2016), including
6 alcohol and drug use.
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10 The principles of these approaches like most research techniques be applied to a range of
11 design, data collection and analysis methods. This said, there is to some degree an inherent
12 bias towards the subjective rather than the objective. Thus, many articulate for the use of an
13 extensive range of qualitative written, visual and textual data collection methods (Bryant
14 2016) to compliment the traditional dominant paradigm for random control trials, statistics
15 and surveys.
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20 Within these discourses the use of terminology implies ontological and methodological
21 positions. The ethical, morale and methodological implications of this language are explored
22 further on; but for consistency this paper, from hereon in, refers to those whom are actively
23 involved in the research as participants and those who contribute or offer data examples as
24 respondents. For expediency it adopts substance use to capture the diversity of both
25 'substances' (alcohol, illicit, legal and illegal drugs) and 'use' (dependency, excessive,
26 harmful, hazardous and recreational).
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32 **Starting Points**

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34 These approaches have several assumptions (or givens) that might be considered as pre-
35 existing contextual considerations.
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38 Whilst the idea that a group of alcohol and drug service users will just wander up to a
39 university and ask for assistance in a research project might sound like the optimum and
40 theoretical starting point (and indeed does occasionally happen), it is likely (and should be
41 likely if co-production is indeed an increasingly wider commissioning, policy and service
42 provision norm) that ideas are generated from within existing involvement activity. This
43 could or should happen in substance use organisations or fora where meaningful participation
44 is already well established with regards to other business or activities. This methodology
45 therefore demands that initial conversations have been reciprocal and not unduly led by
46 agencies/researchers to meet their own agendas. Thus, involvement prior to design or
47 research bid application moves research further along the possible spectrum of participation.
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3 From here it is appropriate to have one or two dedicated conversations/meetings that scope
4 out a project. These might well want to involve others not deemed as participants as well as
5 early project initiators. This is important to ensure that the research is supported, welcomed
6 and has a good level of stakeholder engagement and involvement from the start. These early
7 conversations need to include explicit exploration of ethical and resourcing issues. Such solid
8 foundations of shared understanding are important to help ease future resistance when goals
9 are directed towards political change.
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15 It is likely, if not desirable or expected, that such a stage maybe the precursor to a formal
16 funding application. Although, as outlined below, acquiring funding is not without its
17 difficulties. Ideally in such instances applications are made with participants rather than on
18 their behalf.
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22 It feels important to emphasise that, in these early meetings, service user and participant
23 voice is strong and not of a singular or representative type. Indeed, some might argue they
24 need to be the majority for it to be truly participative, and the involvement of other
25 professionals and researchers is for consultation (McLaughlin 2010).
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29 **Identifying and recruiting participants**

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31 In many instances those individuals involved in the initial and scoping conversations may
32 well be those identified as the participants or PAIs. It feels important that potential
33 participation is invited across many roles and responding to a variety of interest and skills,
34 such as: project advisories or consultants, full blown participants, advertisers, recruiters,
35 respondents and supporters. While initial conversations may generate enough involvement, in
36 many instances there is likely to be the need for further recruitment - especially for PAI type
37 projects. This will need to follow a purposeful sampling methodology, using a combination
38 of targeted advertisement (with active consideration given to mobile and social media
39 methods) and snowballing through existing substance use networks, relationships and
40 recovery organisations.
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48 There comes a point in participatory methods, if this has not happened fully at inception,
49 where any project needs to ensure its direction is highly participant led. At this juncture the
50 research team (PAI and supporting academics) need to possibly withdraw from wider
51 stakeholder discussions and begin to enable an approach which is very much service led,
52 rather than informed. The role of the (academic) researcher here is to facilitate discussions
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3 and understanding among the participants, and support them to agree upon the specific
4 methods of inquiry.
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6 Substance use research has the possibility to see co-production beyond the service user group
7 and partnership could see carers, families, practitioners or students become the participant
8 population.
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11 **Language and Terminology**

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14 Early formulations of this paper were borne out of and reflect struggles with language. Much
15 research literature frequently refers to participants. When in the context of an understanding
16 of genuine partnership involvement, what is being referred to is those from whom data has
17 been collected. The use of participant almost seems a hangover of a subject involved in a
18 controlled experiment, rather than any sense of any co-production; the exceptions perhaps
19 being those engaged in ethnography or discourse analysis. For us, the ambiguity and
20 confusion were cleared by choosing to be firm in distinguishing between those from whom
21 we collect data (respondents), and those who actively participate in the other aspects of the
22 research process (participants).
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29 While such deliberations may appear of semantics, they are in fact rooted in issues of power.
30 **They challenge perceptions of 'us and them' populations.** At the heart of them lies a
31 transparent declaration of whether researchers are distinct from (expert and controlling), or
32 sharing in the same human experience (indeed most alcohol researchers are drinkers). The
33 latter position begins to ask fundamental questions of whether one truth or measurable
34 actuality exists, rather than being a construct of any given (research) process. Furthermore, it
35 raises questions of who is the expert and in what capacity. It also suggests the equal validity
36 of all research methods, rather than supporting a hierarchy of the traditional or dominant.
37 Finally, it implies the assumption of a sharing of access to resources and rewards from the
38 research process.
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46 **Ethics**

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49 As research, normal ethical considerations and processes must be accounted for. Projects will
50 need to undertake appropriate due research ethics processes. It is possible that where ethics
51 boards are predominantly used to, or dominated by traditional positivist and experimental
52 type research approaches, that understanding of (and support for) PAR approaches maybe
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3 more limited. However, it is our experience that ethical approval is gained when attention is
4 paid to specific key considerations; notably issues of boundaries and researcher confidence.
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7 These approaches have a resonance with ethnography, which in turn helps to inform the
8 management (or not) of boundary issues. Researchers are considered, if not expected, to be
9 an active part of the community. Indeed, it is the opposite of aloof non-participatory
10 observation which, in terms of the politics of involvement, might be considered a more
11 exploitative and unethical approach. Active researcher participation offers the opportunity of
12 more realistic, transparent and trustworthy interactions. It works with continuums of
13 populations and communities, rather than suggestions of 'us and them' populations. Working
14 within discreet populations (as accessed via a PAI) challenges the boundaries of what is
15 considered normal confidentiality for other research methodologies. Tolich (2004)
16 acknowledges that an overt understanding of this helps accept the limits in the principles of
17 confidentiality. Insiders are more likely to recognise what other insiders have said. He
18 concludes that internal confidentiality is distinct from external confidentiality and suggests
19 the assurances for protection against identification is with those who were not subjects of the
20 research, rather than within the discreet population cohort or community.
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23 Because the methodology described here is a) not as deterministic or predictable in its course
24 of action and b) process orientated, then the ethical requirement is for confidence in the
25 researcher and/or research team (as much as the prescription of methods) and the successful
26 management of what can appear as more fluid boundaries between the researcher and the
27 researched. Ethics committee confidence is often, as with other methods, about any relevant
28 prior experience of the researcher. One of the authors (as a registered social worker) has
29 found it is important to stress equally the oversight of practice and research ethics. Thus, the
30 process of being held accountable to a professional regulatory body compliment those of
31 research ethics, as might a social work qualification compliment a PhD. This is because many
32 of the research ethics issues are foremost practice dilemmas.
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35 As might be expected, there is also regular concern raised about the use of payments for
36 participants in this area of research. The ethical concerns often fall into two considerations:
37 those of undue incentive to participate (Ritter et al 2003), and/or payment leading to risk of
38 harm, notably with the possibilities of monies being spent on substances. However, many
39 researchers have now clearly articulated why genuine participation (issues of power) require
40 this group of users to be treated the same as others and that payment is a requisite (Fry et al
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2006, Neale et al 2017, Sandberg 2008). Fry et al (2006) in their article conclude “...research payments are ethically acceptable in most circumstances of addictions research, but should be closely scrutinized in situations where these may exacerbate existing harms or create additional risks for participants and investigators” (p21). This counter argument therefore stems around payments as justifiable and fair reimbursement for time given and expenses occurred. The concerns about cash being spent on substances is usually compromised by providing individuals with high street shopping vouchers that cannot be exchanged for alcohol or cigarettes. Participants in research studies have expressed that the use of vouchers can present implied lack of trust or feel paternalistic and may even in some instances increase (not decrease) risk (Neale et al 2017). For some individuals (i.e. street drug dealing or use of drugs by sex workers) payment maybe the only way individuals can viably participate without loss of income earning time; and reimbursement in cash rather than vouchers will be a necessity to enable participation (Sandberg 2008).

Funding and research bids

If a bid for a participatory project is to be made with clear evidence of involvement having informed it, then this involvement also needs funding. For traditional research bid preparation activity is part of the paid job role for academics. To ensure a parity and active involvement of others, it seems to be an important and logical consideration that some of the substance use commissioning, policy and organisational fora (referred to above) is also able to create funds and resource capacity for appropriate involvement to inform potential research project starting points (Minkler et al 2003).

Even assuming this informed prior application involvement, one of the biggest barriers to getting such research projects off the ground is often the successful acquisition of external funding. Research funds often sit in a competitive bid process, including blind peer review processes. These processes aspire to establish exactly what a research project is going to do, so how well detailed and predictable and/or reliable the methodology described is. These scoring methods often have a bias towards predictive/positivist experimental research over methods where determining the methodology is a part of the process and not fully determined prior to. Truly iterative and participatory approaches cannot provide such clarity before they have begun. In addition, and much like the ethics committee, the bids are assessed by panels of experts whose own experiences and understanding lie with controlled experiments, quantitative surveys and statistical modelling rather than qualitative involvement. Thus, there

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3 is a more inherent bias where participatory action approaches are neither understood, nor
4 valued by those responsible for making such judgements. Typical of those sentiments is the
5 following example that this author received from a recent ‘friendly’ reviewer post an award
6 being made:
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10 *The use of participant researchers looks innovatory but pretty risky, and the sample*
11 *size is very small. A small and potentially contentious methodology ... is unlikely to*
12 *make a big difference to conclusions even if it worked.*
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15 This situation was recently acknowledged at the 2017 Alcohol Research UK Annual
16 Conference, that in part has led to this special edition¹.
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19 **Data collection and analysis**

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21 Whilst all forms of data collection tools can be used within participatory approaches there is
22 often an inherent leaning towards the intrapersonal and relationship based inquires, so
23 frequently qualitative methodology. Whilst this may regularly be done through focus groups
24 and interviews with schedules and a range of semi-structured questions, participatory
25 approaches also lend themselves to the use of arts and other creative data capture approaches
26 (Bryant 2016). Iterative approaches (typical of highly qualitative methods to data collection
27 and analysis, whereby the experience of one element feeds into and refines the next) feel
28 highly resonant with involvement approaches that are seeking to develop collective
29 understanding and inform change.
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37 It is possible that PAIs will at these junctures require some formative input from the
38 academics or others within the research team. Thus, some of the research team need at times
39 to translate facilitator into educator roles. So, the stage here is the sharing of expertise and
40 knowledge about research techniques. Active consideration must be given to how material
41 often used in other classroom settings might need to be adapted for different audiences and
42 learning needs.
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47 It can be useful for PAIs to conduct the data collection method on each other. This provides:
48 a) safe space to practice and receive feedback on, and refine techniques; and b) potential
49 initial data that can be used within the wider data collection set. It might be that where data
50 has been collected via film or audio, that the experienced researcher facilitator also watches
51 and listens to the data, to provide supportive feedback to PAIs. Similarly, methods of analysis
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56 ¹ <http://alcoholresearchuk.org/news/alcohol-research-uk-annual-conference-2017/>
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3 might need to be explained or adapted to suit the needs of the PAI population. Consideration
4 needs to be given to how best to support PAI involvement in analysis, so without assumption
5 about access to and competence in IT. Some PAIs will want to be actively involved in the use
6 of say SPSS or NVivo; but for others, a paper based or aural process maybe more suitable.
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8 Added reliability can occur with dual analysis approaches and then comparison of
9 interpretations, so one approach for some PAIs and then a complimentary or additional one
10 from the experienced or academic team members. An active but supportive role of
11 experienced researchers within the cohort can act as an additional process of quality
12 assurance.
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18 Recruitment of respondents is likely to follow the same purposeful sampling methodology,
19 using a combination of targeted advertisement (with active consideration given to mobile and
20 social media methods) and snowballing through the existing substance use networks and
21 relationships used in PAI recruitment. Research that utilises peer and recovery groups mean
22 that individuals are known to each other within the community. Reflexive considerations of
23 insider research approaches are required. Within this, identification of what proximity to
24 potential respondents the PAIs are should be undertaken and used as inclusion or exclusion
25 criteria; or passed onto another PAI within the project.
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31 As PAIs spread out into the respective community and collect data, the experienced members
32 of the team must be available for ongoing mentoring and support.
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34 **Post data considerations**

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37 Like other research methods, it is good to find a process by which emerging outcomes can be
38 ‘tested’ out with those most likely to be impacted, and their responses to this can shape any
39 final conclusions. This could include taking initial findings back to any initiating substance
40 use fora or project advisory group. Active recovery communities are also likely to provide
41 on-going spaces where PAIs can test and make sense of emerging findings and conclusions.
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46 It is likely that commissioners of research will want to see traditional ‘research reports’.
47 Further, any academics involved will want to, and be under pressure to, publish within peer
48 review journals. In both these regards it is important that a) the opportunity to participate in
49 ‘writing up’ is extended to PAIs, and b) irrespective of their involvement in the writing up,
50 they are fully acknowledged (with consent) as co-authors. However, some projects, some
51 groups etc., may also identify other non-written ways of wanting to present research findings.
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56 The adoption of these seems important, especially when considering research as both
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involved and action orientated. The change implied in action is likely to come from the widest of dissemination approaches.

The implications suggest this paper, like other papers cited of the authors, might have involved some other substance use individuals as co-authors. However, we elected to be transparent in this being our thought piece and not a shared research project, but as in the introduction, to be clear we were not claiming originality of thought and indeed owed a debt to a vast number of previous collaborators.

Part of an action orientated methodology, which has process as important as outcomes, and considers outcomes for all, is about establishing sustainable PAI populations to then a) advise and support commissioning of future research, b) get involved in other projects, and c) act as peer mentors for future PAIs.

Applied Framework

It is possible to synthesise these considerations into a broad or proximate framework (model) comprising multiple stages.

Table 1: Model of stages of Participant Action Research approach

Insert table 1 here

Stages are iterative and overlap.

* These stages involve processes and organisations that are possibly external to the research team, so not fully within projects influence.

Applied considerations

This paper has been influenced by a diversity of previous and on-going research projects. However, given the considerations described, it has equally (if not more so) been informed by: many unsuccessful research bids, policy conversations, recovery group deliberations and reflections on the limitations of other research (including ours). This final section offers some of the learning we have acquired through these experiences.

PAR projects require a lot of (and at times freely given) energy and time, to ensure they are successful and sustainable. Several of the recent projects we have contributed to have come out of long-term prior existing relationships. In other words, we have been actively involved in those fora discussed in the earlier part of this paper. This requires the academic researcher

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3 to spend time out and about in the community. Notably, we have been active members of
4 recovery group networks and partnerships, often giving skills and time just like any other
5 volunteer. Successful bids and projects are far more likely to come from already established
6 and trusting relationships. We have, as is consistent with other research approaches, spent
7 time doing early, small and unfunded pilot formulations. There is a need to continue,
8 especially in economic climates where organisations and universities increasingly seek to
9 restrict activities to those associated with computerised workload management agendas, for
10 researchers to articulate that such time spent is necessary and valuable - especially as this is
11 required to be off site. There is scope here to use organisational good citizenship or social
12 good agendas to help meet these goals.

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20 That participatory research, especially that involving action (for change), is as much a
21 political as it is research activity, has therefore been one of the earliest and consistent
22 messages. Biskin et al (2013) identify how even the simple task of social work students being
23 encouraged in the classroom to expect service user and carer involvement, then meet
24 resistance when wanting to account for whether they actually experience such in practice
25 through a research project. So, whilst the service user involvement agenda is well established
26 in substance use policy and provision agendas, it has yet to fully impact on the research
27 world. Service user involvement has tended to primarily focus on the active participation of
28 'users' within treatment policy and provision agendas, rather than all users and ex users and
29 including evaluation and research activities. In a recently completed review of the Welsh
30 Governments 10-year alcohol (and drug) strategy there was no PAR material amongst the
31 relevant data sets and evaluations (Author et al 2017).

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40 PAR and PAI approaches require inclusivity (and measured risk taking) if they are to succeed
41 in being different and provide alternative explanations. We have had expressed to us concerns
42 about PAIs interviewing those who are still actively using and exposing their own
43 vulnerability to relapse (which assumes that PAIs are abstinent – which need not necessarily
44 be the case), and how rigid (or not) any criteria for PAIs needs to be. This in turn raises
45 concerns for us about whether researchers could be tempted into using PAI recruitment
46 methodologies which are too strict (or too controlling) unless they themselves are prepared to
47 take a few risks. PAR research ought to have the capacity to involve the whole spectrum of
48 use or not. It is by its nature risk taking rather than risk adverse. When working with those in
49 recovery as PAIs it seems important to entrust to their already successfully developed notions
50 of management and networks of support, rather than impose secondary researcher led
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3 frameworks. In fact, this makes us think that the success of PAI methodologies is also
4 shaped by the characteristics of the research facilitator as it those of the PAIs recruited.
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6 Inclusivity and risk taking is thus required by those commissioning, evaluating, overseeing
7 and undertaking research. This seems to be only a fair and reciprocal to the risk we ask of
8 others in entrusting and sharing their experiences with us.
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11 It feels as if over the last decade that the tide is finally turning. Indeed, the ARUK conference
12 that is the precursor and inspiration for this special edition, is one obvious marker in this
13 evolutionary journey. The explicit requirement to demonstrate involvement now appears to
14 be a more regular element of research bid application and journal submission (i.e. British
15 Medical Journal) process requirements. Indeed, we have had more bid success of late (albeit
16 maybe it is just that we have got a bit better at that bit). Notably, and very recently, an
17 acceptance of the validity of the contribution these methods can make to enhance a
18 complexity of methods in understanding national policy, has been acknowledged by Health
19 Scotland in its commissioning of participatory methods as one of the streams within the
20 evaluation of the impact of minimum unit pricing on harmful drinkers (NHS Health Scotland
21 2017).
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30 **Concluding discussion**

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32 At one level there is nothing revolutionary in the principles of PAR or the methodological
33 considerations explored within this paper. In part, they just feel like good conscious and
34 reflexive research practices. However, at another level they seek to comprehensively resonate
35 with aspirations for greater service user involvement in policy, practice and research
36 activities. They have a feel of the ideological, a set of best laid aspirations and intentions. In
37 this sense the revolutionary comes from trying to meet as many of the ambitions as possible
38 within each project, while contributing to an overall picture of change and challenge to an
39 existing order that places expert led controlling experimental research at the pinnacle of
40 perceived research hierarchies.
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47 It is possible to reduce these complex discussions into three clear reasons why we should do
48 and see more PAR/PAI research within alcohol and other drug studies. Firstly, this feels like
49 a moral imperative. It is just the right thing to do. There has been an explosion in service user
50 involvement in policy and service provision for substance use, and this needs to be matched
51 by those researching such. Substances are widely consumed in society, including by
52 researchers. The boundaries between an 'us and them' population often maintained by
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3 researchers in this instance seems particularly false. It maybe that we need to turn the
4 traditional research ethics preoccupation with protecting the vulnerable on its head and into
5 one of entrust, empower and respect. Secondly, this is a political issue. It raises fundamental
6 questions of ontology and epistemology. A challenge to a dominant and vested interest about
7 who does research and how. It asks questions of who is the 'expert'. It asks that research has
8 an impact beyond the vested interest of the academic career and the research frameworks that
9 academic institutions are increasingly judged by. Finally, and this is the purpose of research,
10 new methodologies help create new understanding. There is more than one way to know how.
11 It is a direct and appropriate response to Orford's (2008) seminal paper that argued for
12 substance use research to move beyond its preoccupation with the randomised control trial.
13 These are methodologies that enable us to gain a greater insight into the nature of experiences
14 and relationships that are at the core of understanding why individuals develop difficulties
15 regarding their substance use and how they might best be supported in developing healthier
16 lifestyles.

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18 It is possible to see two overlapping 'new' waves at work here. Where research has accepted
19 the role of the sociological and qualitative to compliment the experimental and quantitative, it
20 has yet to fully embrace moves to take this outside of the academy. Similarly, where
21 substance use has embraced harm reduction and whole population agendas as a response to
22 narrow disease model understandings, it has yet to fully reconcile itself with some of the
23 newer debates and understanding about recovery and the increased control and involvement
24 of those most affected. This paper simply seeks to contribute to these journeys.

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Participatory Action Research (PAR) Research – Critical methodological considerations

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Abstract

Purpose: The purpose of this paper is to explore a range of key deliberations with regards to adopting Participatory Action Research (PAR) and Privileged Access Interviewer (PAI) approaches and methodologies within research on substance use

Design/methodology/approach: This paper is a reflective piece, it adopts a mixture of applied practice and theory considerations. These conceptualisations capture what are still relatively early understandings and uses of such methodologies, acquired across several decades of research and service provision experiences. The paper is structured around some of the sequences of the research process and as such provides a broad framework for such approaches.

Findings: PAR and PAI approaches utilise several key theoretical considerations. There are many critical issues associated with adopting these approaches, including those of ethics, funding, involvement, language, resources and support. Three key principle reasons (moral, political and research based), help explain why we should see more adoption of such approaches in substance use related research.

Research limitations/implications: This paper represents author views which are by their nature very subjective.

Practical implications: Implementation of the key considerations highlighted within this paper can lead to an active adoption of PAR and PAI methodologies within alcohol and drug research. Increasing the use of such methodologies will allow commissioners, researchers and

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3 service providers to develop a more nuanced understanding of the experiences of and
4 responses to alcohol and drug use.
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7 Originality/value: This paper captures critical conversations at a time of increased calls for
8 service user involvement across all aspects of alcohol and other drug provision, including
9 evaluation and research.
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12 Key Words: Alcohol and Drugs, Involvement, Participatory Action Research, Research
13 Methodologies, Substance Use
14

15 16 **Introduction**

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18 This paper is explicitly the current views of its named authors. However, like all research
19 papers, it builds upon previous experiences and projects (for example Biskin et al 2013,
20 Livingston et al 2011) and previous writing (Livingston 2016, 2017). Therefore, much of
21 what is offered emanates from co-production activities with other actors which have
22 influenced its formulation. Given its nature, it would be inappropriate to not start by stating
23 that this paper is the consequence of all the generous sharing by and with *all* those we have
24 worked with across numerous years in research and service provision. We are grateful to
25 them for educating us and as such we feel advocates rather than originators of the sentiments
26 contained within this paper.
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33 Participant Action Research (PAR) combines two separate research concepts:
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- 35 • Participation - active involvement of ‘subjects’ in the research process; and
- 36 • Action - defining social problems and solving them.
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40 It sits within a spectrum of what is considered patient, public or service user involvement.
41 The movement to increased participation is often concentrated on provision and receipt of
42 health and social care services, but also includes research into the effectiveness of services
43 too (Brett et al 2014, Voorberg 2015). An early defining model of this spectrum was
44 Arnstein’s (1969) ladder of citizen participation which suggested a full spectrum from
45 manipulation to citizen control. In research terms we might suggest some of the positions
46 along the spectrum as:
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- 51 • Non-Participation (manipulation) – service users partake purely as respondents from
52 whom data is collected.
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- Degrees of moderate involvement – consultation or involvement in steering groups only.
- Significant involvement - delegated and designated roles within the research as researchers.
- Participatory Research - involved in the need for and commissioning of research, and/or as full team members from research bid through to final report.

The two concepts of PAR bring different elements and understanding to the research process, including that of alcohol and drugs.

Firstly:

Participatory - this is what Gilbert (2008) refers to as doing with and for, rather than on others. It is thus concerned with definitions of expertise and knowledge and who controls these. It comes with what Humphries (2008) identifies as having several principles:

- a bottom up approach with a focus on locally defined priorities, processes and perspectives;
- striving for equalising power among researchers and researched;
- a process characterised by a genuine dialogue between researcher and researched;
- control over definition of problems, methods, analysis and actions is with those most affected by the study;
- the emphasis is on processes as much as on outcomes; and
- the role of the researcher is one of facilitator and catalyst rather than director.

Secondly:

Action - proposes that action researcher and members of a social setting collaborate in the understanding of a problem and in the development of a solution based on this understanding (Bryman 2008). This is supported by an emphasis on:

- nonintrusive collaboration (including ownership of the project by the group);
- mutual trust and genuine respect;
- solidarity (all humanity is connected by a common journey and shared destiny);
- mutuality and equality (everyone's interests are important);
- a focus on process (informal interaction that goes beyond a detached working relationship and respects others' cultures); and

- language as an expression of culture and power.

Action research seeks intended consequences and expects elements of change to be experienced by all. It pursues to overtly improve the social situation with explicit practical application and political activity. It can occur across several activities, for example: organisational change, community development, new projects, practitioner research and social injustice.

The overall approach can be summarised as concerning itself with '*People, Power and Praxis*' (Gilbert 2008) where traditional academic researchers translate their role into one of facilitating the goals of their co-researchers. Carey (2010) echoes these sentiments in which three key considerations are raised: practical impediments, ethical implications and political dilemmas. He goes onto caution that there are possibilities that participation in research can mirror some of the current preoccupations in wider policy and provision, where participation may be encouraged or increased but not necessarily be successful in addressing the power dynamics; and may even exasperate them.

Privileged Access Interviewers (PAI) is a term that best captures why such methods are especially well suited for research inquiries into areas of activity and with people in experiences that are subject to societal marginalisation and often referred to as '*hard to reach*'. These include those of substance use. The approach is political apposite where there is a need to reach into certain populations who are perhaps not readily captured by traditional research methodology. There are distinct overlaps with the ethnographic approaches drawn from social anthropology (Fine and Hancock 2017), and the essential role of those with access as established through Whyte's (1993) seminal text and his relationship with Doc. Ennis and Wykes (2013) concluded that such involvement of service users in the research process enabled greater levels of recruitment to projects. Further, participatory approaches (i.e. those emphasising what can be considered as co-production) have a resonance and value in understanding the experiences of marginalised populations (Tedmanston 2016), including alcohol and drug use.

The principles of these approaches like most research techniques be applied to a range of design, data collection and analysis methods. This said, there is to some degree an inherent bias towards the subjective rather than the objective. Thus, many articulate for the use of an extensive range of qualitative written, visual and textual data collection methods (Bryant

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3 2016) to compliment the traditional dominant paradigm for random control trials, statistics
4 and surveys.
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7 Within these discourses the use of terminology implies ontological and methodological
8 positions. The ethical, morale and methodological implications of this language are explored
9 further on; but for consistency this paper, from hereon in, refers to those whom are actively
10 involved in the research as participants and those who contribute or offer data examples as
11 respondents. For expediency it adopts substance use to capture the diversity of both
12 'substances' (alcohol, illicit, legal and illegal drugs) and 'use' (dependency, excessive,
13 harmful, hazardous and recreational).
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18 **Starting Points**

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21 These approaches have several assumptions (or givens) that might be considered as pre-
22 existing contextual considerations.
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25 Whilst the idea that a group of alcohol and drug service users will just wander up to a
26 university and ask for assistance in a research project might sound like the optimum and
27 theoretical starting point (and indeed does occasionally happen), it is likely (and should be
28 likely if co-production is indeed an increasingly wider commissioning, policy and service
29 provision norm) that ideas are generated from within existing involvement activity. This
30 could or should happen in substance use organisations or fora where meaningful participation
31 is already well established with regards to other business or activities. This methodology
32 therefore demands that initial conversations have been reciprocal and not unduly led by
33 agencies/researchers to meet their own agendas. Thus, involvement prior to design or
34 research bid application moves research further along the possible spectrum of participation.
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42 From here it is appropriate to have one or two dedicated conversations/meetings that scope
43 out a project. These might well want to involve others not deemed as participants as well as
44 early project initiators. This is important to ensure that the research is supported, welcomed
45 and has a good level of stakeholder engagement and involvement from the start. These early
46 conversations need to include explicit exploration of ethical and resourcing issues. Such solid
47 foundations of shared understanding are important to help ease future resistance when goals
48 are directed towards political change.
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54 It is likely, if not desirable or expected, that such a stage maybe the precursor to a formal
55 funding application. Although, as outlined below, acquiring funding is not without its
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3 difficulties. Ideally in such instances applications are made with participants rather than on
4 their behalf.
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7 It feels important to emphasise that, in these early meetings, service user and participant
8 voice is strong and not of a singular or representative type. Indeed, some might argue they
9 need to be the majority for it to be truly participative, and the involvement of other
10 professionals and researchers is for consultation (McLaughlin 2010).
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13 **Identifying and recruiting participants**

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16 In many instances those individuals involved in the initial and scoping conversations may
17 well be those identified as the participants or PAIs. It feels important that potential
18 participation is invited across many roles and responding to a variety of interest and skills,
19 such as: project advisories or consultants, full blown participants, advertisers, recruiters,
20 respondents and supporters. While initial conversations may generate enough involvement, in
21 many instances there is likely to be the need for further recruitment - especially for PAI type
22 projects. This will need to follow a purposeful sampling methodology, using a combination
23 of targeted advertisement (with active consideration given to mobile and social media
24 methods) and snowballing through existing substance use networks, relationships and
25 recovery organisations.
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33 There comes a point in participatory methods, if this has not happened fully at inception,
34 where any project needs to ensure its direction is highly participant led. At this juncture the
35 research team (PAI and supporting academics) need to possibly withdraw from wider
36 stakeholder discussions and begin to enable an approach which is very much service led,
37 rather than informed. The role of the (academic) researcher here is to facilitate discussions
38 and understanding among the participants, and support them to agree upon the specific
39 methods of inquiry.
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45 Substance use research has the possibility to see co-production beyond the service user group
46 and partnership could see carers, families, practitioners or students become the participant
47 population.
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50 **Language and Terminology**

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52 Early formulations of this paper were borne out of and reflect struggles with language. Much
53 research literature frequently refers to participants. When in the context of an understanding
54 of genuine partnership involvement, what is being referred to is those from whom data has
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3 been collected. The use of participant almost seems a hangover of a subject involved in a
4 controlled experiment, rather than any sense of any co-production; the exceptions perhaps
5 being those engaged in ethnography or discourse analysis. For us, the ambiguity and
6 confusion were cleared by choosing to be firm in distinguishing between those from whom
7 we collect data (respondents), and those who actively participate in the other aspects of the
8 research process (participants).
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13 While such deliberations may appear of semantics, they are in fact rooted in issues of power.
14 They challenge perceptions of 'us and them' populations. At the heart of them lies a
15 transparent declaration of whether researchers are distinct from (expert and controlling), or
16 sharing in the same human experience (indeed most alcohol researchers are drinkers). The
17 latter position begins to ask fundamental questions of whether one truth or measurable
18 actuality exists, rather than being a construct of any given (research) process. Furthermore, it
19 raises questions of who is the expert and in what capacity. It also suggests the equal validity
20 of all research methods, rather than supporting a hierarchy of the traditional or dominant.
21 Finally, it implies the assumption of a sharing of access to resources and rewards from the
22 research process.
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29 30 **Ethics**

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32 As research, normal ethical considerations and processes must be accounted for. Projects will
33 need to undertake appropriate due research ethics processes. It is possible that where ethics
34 boards are predominantly used to, or dominated by traditional positivist and experimental
35 type research approaches, that understanding of (and support for) PAR approaches maybe
36 more limited. However, it is our experience that ethical approval is gained when attention is
37 paid to specific key considerations; notably issues of boundaries and researcher confidence.
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42 These approaches have a resonance with ethnography, which in turn helps to inform the
43 management (or not) of boundary issues. Researchers are considered, if not expected, to be
44 an active part of the community. Indeed, it is the opposite of aloof non-participatory
45 observation which, in terms of the politics of involvement, might be considered a more
46 exploitative and unethical approach. Active researcher participation offers the opportunity of
47 more realistic, transparent and trustworthy interactions. It works with continuums of
48 populations and communities, rather than suggestions of 'us and them' populations. Working
49 within discreet populations (as accessed via a PAI) challenges the boundaries of what is
50 considered normal confidentiality for other research methodologies. Tolich (2004)
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3 acknowledges that an overt understanding of this helps accept the limits in the principles of
4 confidentiality. Insiders are more likely to recognise what other insiders have said. He
5 concludes that internal confidentiality is distinct from external confidentiality and suggests
6 the assurances for protection against identification is with those who were not subjects of the
7 research, rather than within the discreet population cohort or community.
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11 Because the methodology described here is a) not as deterministic or predictable in its course
12 of action and b) process orientated, then the ethical requirement is for confidence in the
13 researcher and/or research team (as much as the prescription of methods) and the successful
14 management of what can appear as more fluid boundaries between the researcher and the
15 researched. Ethics committee confidence is often, as with other methods, about any relevant
16 prior experience of the researcher. One of the authors (as a registered social worker) has
17 found it is important to stress equally the oversight of practice and research ethics. Thus, the
18 process of being held accountable to a professional regulatory body compliment those of
19 research ethics, as might a social work qualification compliment a PhD. This is because many
20 of the research ethics issues are foremost practice dilemmas.
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28 As might be expected, there is also regular concern raised about the use of payments for
29 participants in this area of research. The ethical concerns often fall into two considerations:
30 those of undue incentive to participate (Ritter et al 2003), and/or payment leading to risk of
31 harm, notably with the possibilities of monies being spent on substances. However, many
32 researchers have now clearly articulated why genuine participation (issues of power) require
33 this group of users to be treated the same as others and that payment is a requisite (Fry et al
34 2006, Neale et al 2017, Sandberg 2008). Fry et al (2006) in their article conclude “...research
35 *payments are ethically acceptable in most circumstances of addictions research, but should*
36 *be closely scrutinized in situations where these may exacerbate existing harms or create*
37 *additional risks for participants and investigators”* (p21). This counter argument therefore
38 stems around payments as justifiable and fair reimbursement for time given and expenses
39 occurred. The concerns about cash being spent on substances is usually compromised by
40 providing individuals with high street shopping vouchers that cannot be exchanged for
41 alcohol or cigarettes. Participants in research studies have expressed that the use of vouchers
42 can present implied lack of trust or feel paternalistic and may even in some instances increase
43 (not decrease) risk (Neale et al 2017). For some individuals (i.e. street drug dealing or use of
44 drugs by sex workers) payment maybe the only way individuals can viably participate
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3 without loss of income earning time; and reimbursement in cash rather than vouchers will be
4 a necessity to enable participation (Sandberg 2008).
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6 **Funding and research bids**

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9 If a bid for a participatory project is to be made with clear evidence of involvement having
10 informed it, then this involvement also needs funding. For traditional research bid preparation
11 activity is part of the paid job role for academics. To ensure a parity and active involvement
12 of others, it seems to be an important and logical consideration that some of the substance use
13 commissioning, policy and organisational fora (referred to above) is also able to create funds
14 and resource capacity for appropriate involvement to inform potential research project
15 starting points (Minkler et al 2003).
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21 Even assuming this informed prior application involvement, one of the biggest barriers to
22 getting such research projects off the ground is often the successful acquisition of external
23 funding. Research funds often sit in a competitive bid process, including blind peer review
24 processes. These processes aspire to establish exactly what a research project is going to do,
25 so how well detailed and predictable and/or reliable the methodology described is. These
26 scoring methods often have a bias towards predictive/positivist experimental research over
27 methods where determining the methodology is a part of the process and not fully determined
28 prior to. Truly iterative and participatory approaches cannot provide such clarity before they
29 have begun. In addition, and much like the ethics committee, the bids are assessed by panels
30 of experts whose own experiences and understanding lie with controlled experiments,
31 quantitative surveys and statistical modelling rather than qualitative involvement. Thus, there
32 is a more inherent bias where participatory action approaches are neither understood, nor
33 valued by those responsible for making such judgements. Typical of those sentiments is the
34 following example that this author received from a recent 'friendly' reviewer post an award
35 being made:
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46 *The use of participant researchers looks innovatory but pretty risky, and the sample*
47 *size is very small. A small and potentially contentious methodology ... is unlikely to*
48 *make a big difference to conclusions even if it worked.*
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51 This situation was recently acknowledged at the 2017 Alcohol Research UK Annual
52 Conference, that in part has led to this special edition¹.
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¹ <http://alcoholresearchuk.org/news/alcohol-research-uk-annual-conference-2017/>
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Data collection and analysis

Whilst all forms of data collection tools can be used within participatory approaches there is often an inherent leaning towards the intrapersonal and relationship based inquires, so frequently qualitative methodology. Whilst this may regularly be done through focus groups and interviews with schedules and a range of semi-structured questions, participatory approaches also lend themselves to the use of arts and other creative data capture approaches (Bryant 2016). Iterative approaches (typical of highly qualitative methods to data collection and analysis, whereby the experience of one element feeds into and refines the next) feel highly resonant with involvement approaches that are seeking to develop collective understanding and inform change.

It is possible that PAIs will at these junctures require some formative input from the academics or others within the research team. Thus, some of the research team need at times to translate facilitator into educator roles. So, the stage here is the sharing of expertise and knowledge about research techniques. Active consideration must be given to how material often used in other classroom settings might need to be adapted for different audiences and learning needs.

It can be useful for PAIs to conduct the data collection method on each other. This provides: a) safe space to practice and receive feedback on, and refine techniques; and b) potential initial data that can be used within the wider data collection set. It might be that where data has been collected via film or audio, that the experienced researcher facilitator also watches and listens to the data, to provide supportive feedback to PAIs. Similarly, methods of analysis might need to be explained or adapted to suit the needs of the PAI population. Consideration needs to be given to how best to support PAI involvement in analysis, so without assumption about access to and competence in IT. Some PAIs will want to be actively involved in the use of say SPSS or NVivo; but for others, a paper based or aural process maybe more suitable. Added reliability can occur with dual analysis approaches and then comparison of interpretations, so one approach for some PAIs and then a complimentary or additional one from the experienced or academic team members. An active but supportive role of experienced researchers within the cohort can act as an additional process of quality assurance.

Recruitment of respondents is likely to follow the same purposeful sampling methodology, using a combination of targeted advertisement (with active consideration given to mobile and

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3 social media methods) and snowballing through the existing substance use networks and
4 relationships used in PAI recruitment. Research that utilises peer and recovery groups mean
5 that individuals are known to each other within the community. Reflexive considerations of
6 insider research approaches are required. Within this, identification of what proximity to
7 potential respondents the PAIs are should be undertaken and used as inclusion or exclusion
8 criteria; or passed onto another PAI within the project.

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13 As PAIs spread out into the respective community and collect data, the experienced members
14 of the team must be available for ongoing mentoring and support.

15 16 17 **Post data considerations**

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19 Like other research methods, it is good to find a process by which emerging outcomes can be
20 'tested' out with those most likely to be impacted, and their responses to this can shape any
21 final conclusions. This could include taking initial findings back to any initiating substance
22 use fora or project advisory group. Active recovery communities are also likely to provide
23 on-going spaces where PAIs can test and make sense of emerging findings and conclusions.

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28 It is likely that commissioners of research will want to see traditional 'research reports'.
29 Further, any academics involved will want to, and be under pressure to, publish within peer
30 review journals. In both these regards it is important that a) the opportunity to participate in
31 'writing up' is extended to PAIs, and b) irrespective of their involvement in the writing up,
32 they are fully acknowledged (with consent) as co-authors. However, some projects, some
33 groups etc., may also identify other non-written ways of wanting to present research findings.
34 The adoption of these seems important, especially when considering research as both
35 involved and action orientated. The change implied in action is likely to come from the
36 widest of dissemination approaches.

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43 The implications suggest this paper, like other papers cited of the authors, might have
44 involved some other substance use individuals as co-authors. However, we elected to be
45 transparent in this being our thought piece and not a shared research project, but as in the
46 introduction, to be clear we were not claiming originality of thought and indeed owed a debt
47 to a vast number of previous collaborators.

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52 Part of an action orientated methodology, which has process as important as outcomes, and
53 considers outcomes for all, is about establishing sustainable PAI populations to then a) advise
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3 and support commissioning of future research, b) get involved in other projects, and c) act as
4 peer mentors for future PAIs.
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6 **Applied Framework**

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9 It is possible to synthesise these considerations into a broad or proximate framework (model)
10 comprising multiple stages.
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12 Table 1: Model of stages of Participant Action Research approach

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14 *Insert table 1 here*

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16 Stages are iterative and overlap.

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19 * These stages involve processes and organisations that are possibly external to the research
20 team, so not fully within projects influence.
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22 **Applied considerations**

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24 This paper has been influenced by a diversity of previous and on-going research projects.
25
26 However, given the considerations described, it has equally (if not more so) been informed
27 by: many unsuccessful research bids, policy conversations, recovery group deliberations and
28 reflections on the limitations of other research (including ours). This final section offers some
29 of the learning we have acquired through these experiences.
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34 PAR projects require a lot of (and at times freely given) energy and time, to ensure they are
35 successful and sustainable. Several of the recent projects we have contributed to have come
36 out of long-term prior existing relationships. In other words, we have been actively involved
37 in those fora discussed in the earlier part of this paper. This requires the academic researcher
38 to spend time out and about in the community. Notably, we have been active members of
39 recovery group networks and partnerships, often giving skills and time just like any other
40 volunteer. Successful bids and projects are far more likely to come from already established
41 and trusting relationships. We have, as is consistent with other research approaches, spent
42 time doing early, small and unfunded pilot formulations. There is a need to continue,
43 especially in economic climates where organisations and universities increasingly seek to
44 restrict activities to those associated with computerised workload management agendas, for
45 researchers to articulate that such time spent is necessary and valuable - especially as this is
46 required to be off site. There is scope here to use organisational good citizenship or social
47 good agendas to help meet these goals.
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3 That participatory research, especially that involving action (for change), is as much a
4 political as it is research activity, has therefore been one of the earliest and consistent
5 messages. Biskin et al (2013) identify how even the simple task of social work students being
6 encouraged in the classroom to expect service user and carer involvement then meet
7 resistance when wanting to account for whether they actually experience such in practice
8 through a research project. So, whilst the service user involvement agenda is well established
9 in substance use policy and provision agendas, it has yet to fully impact on the research
10 world. Service user involvement has tended to primarily focus on the active participation of
11 'users' within treatment policy and provision agendas, rather than all users and ex users and
12 including evaluation and research activities. In a recently completed review of the Welsh
13 Governments 10-year alcohol (and drug) strategy there was no PAR material amongst the
14 relevant data sets and evaluations (Livingston et al 2017).
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23 PAR and PAI approaches require inclusivity (and measured risk taking) if they are to succeed
24 in being different and provide alternative explanations. We have had expressed to us concerns
25 about PAIs interviewing those who are still actively using and exposing their own
26 vulnerability to relapse (which assumes that PAIs are abstinent – which need not necessarily
27 be the case), and how rigid (or not) any criteria for PAIs needs to be. This in turn raises
28 concerns for us about whether researchers could be tempted into using PAI recruitment
29 methodologies which are too strict (or too controlling) unless they themselves are prepared to
30 take a few risks. PAR research ought to have the capacity to involve the whole spectrum of
31 use or not. It is by its nature risk taking rather than risk adverse. When working with those in
32 recovery as PAIs it seems important to entrust to their already successfully developed notions
33 of management and networks of support, rather than impose secondary researcher led
34 frameworks. In fact, this makes us think that the success of PAI methodologies is also
35 shaped by the characteristics of the research facilitator as it those of the PAIs recruited.
36 Inclusivity and risk taking is thus required by those commissioning, evaluating, overseeing
37 and undertaking research. This seems to be only a fair and reciprocal to the risk we ask of
38 others in entrusting and sharing their experiences with us.
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50 It feels as if over the last decade that the tide is finally turning. Indeed, the ARUK conference
51 that is the precursor and inspiration for this special edition, is one obvious marker in this
52 evolutionary journey. The explicit requirement to demonstrate involvement now appears to
53 be a more regular element of research bid application and journal submission (i.e. British
54 Medical Journal) process requirements. Indeed, we have had more bid success of late (albeit
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3 maybe it is just that we have got a bit better at that bit). Notably, and very recently, an
4 acceptance of the validity of the contribution these methods can make to enhance a
5 complexity of methods in understanding national policy, has been acknowledged by Health
6 Scotland in its commissioning of participatory methods as one of the streams within the
7 evaluation of the impact of minimum unit pricing on harmful drinkers (NHS Health Scotland
8 2017).

13 **Concluding discussion**

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15 At one level there is nothing revolutionary in the principles of PAR or the methodological
16 considerations explored within this paper. In part, they just feel like good conscious and
17 reflexive research practices. However, at another level they seek to comprehensively resonate
18 with aspirations for greater service user involvement in policy, practice and research
19 activities. They have a feel of the ideological, a set of best laid aspirations and intentions. In
20 this sense the revolutionary comes from trying to meet as many of the ambitions as possible
21 within each project, while contributing to an overall picture of change and challenge to an
22 existing order that places expert led controlling experimental research at the pinnacle of
23 perceived research hierarchies.

24
25 It is possible to reduce these complex discussions into three clear reasons why we should do
26 and see more PAR/PAI research within alcohol and other drug studies. Firstly, this feels like
27 a moral imperative. It is just the right thing to do. There has been an explosion in service user
28 involvement in policy and service provision for substance use, and this needs to be matched
29 by those researching such. Substances are widely consumed in society, including by
30 researchers. The boundaries between an 'us and them' population often maintained by
31 researchers in this instance seems particularly false. It maybe that we need to turn the
32 traditional research ethics preoccupation with protecting the vulnerable on its head and into
33 one of entrust, empower and respect. Secondly, this is a political issue. It raises fundamental
34 questions of ontology and epistemology. A challenge to a dominant and vested interest about
35 who does research and how. It asks questions of who is the 'expert'. It asks that research has
36 an impact beyond the vested interest of the academic career and the research frameworks that
37 academic institutions are increasingly judged by. Finally, and this is the purpose of research,
38 new methodologies help create new understanding. There is more than one way to know how.
39 It is a direct and appropriate response to Orford's (2008) seminal paper that argued for
40 substance use research to move beyond its preoccupation with the randomised control trial.
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3 These are methodologies that enable us to gain a greater insight into the nature of experiences
4 and relationships that are at the core of understanding why individuals develop difficulties
5 regarding their substance use and how they might best be supported in developing healthier
6 lifestyles.
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10 It is possible to see two overlapping 'new' waves at work here. Where research has accepted
11 the role of the sociological and qualitative to compliment the experimental and quantitative, it
12 has yet to fully embrace moves to take this outside of the academy. Similarly, where
13 substance use has embraced harm reduction and whole population agendas as a response to
14 narrow disease model understandings, it has yet to fully reconcile itself with some of the
15 newer debates and understanding about recovery and the increased control and involvement
16 of those most affected. This paper simply seeks to contribute to these journeys.
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