



## Article

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Wilkinson, Catherine, Carter, Bernie, Satchwell, Candice and Bray, Lucy

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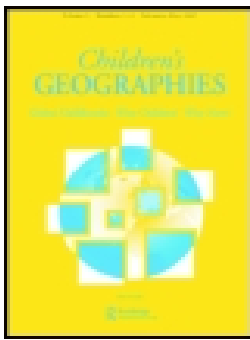
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## Using methods across generations: researcher reflections from a research project involving young people and their parents

Catherine Wilkinson, Bernie Carter, Candice Satchwell & Lucy Bray

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# Using methods across generations: researcher reflections from a research project involving young people and their parents

Catherine Wilkinson <sup>a</sup>, Bernie Carter <sup>b</sup>, Candice Satchwell<sup>c</sup> and Lucy Bray<sup>b</sup>

<sup>a</sup>Faculty of Arts, Professional and Social Studies, Liverpool John Moores University, Liverpool, UK; <sup>b</sup>Faculty of Health, Social Care and Medicine, Edge Hill University, Ormskirk, UK; <sup>c</sup>School of Humanities, Language and Global Studies, University of Central Lancashire, Preston, UK

## ABSTRACT

In more recent years in geographical research there has been a trend towards 'child-friendly' or 'young people-friendly' research methods, often involving creativity and participation. Meanwhile, traditional methods such as interviews and focus groups continue to dominate research with adult participants. This paper draws and reflects on fieldnotes documented during a study which used participatory design workshops with activity-based methods to contemporaneously, but separately, engage with young people with Adolescent Idiopathic Scoliosis (AIS) and their parents. This paper contributes to the body of literature concerned with intergenerational practice in children's geographies and geographical work more broadly. It does so not by focusing on intergenerational perspectives of the research topic, but by teasing out intergenerational engagement in research that used the same methods across generations (with young people and their parents). Finding that the activities were engaged with in a similar depth and commitment by participants, we argue for a loosening of the artificial packaging of young people-friendly and adult oriented methods.

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## Introduction

In 2002 Punch wrote a provocative paper, questioning whether research with children is the same or different from research with adults. Punch (2002) reflects on how researchers working with children tend to use methods which foreground children's skills and how this has led to a plethora of innovative or adapted (child-friendly) techniques being developed that typically avoid reliance solely on verbal or written skills. These include child-framed methods, such as video research methodologies (Cutter-Mackenzie, Edwards, and Quinton 2015); theatre elicitation (Roerig and Evers 2019); pictures and diaries (Nesbitt 2000), and arts-based approaches such as collages (Carter and Ford 2013). Carter and Ford (2013) argue that such participatory approaches are useful in researching children's health experiences. Young people-friendly methods exist<sup>1</sup> too, including those using mobile phones (Walker et al. 2009; Satchwell 2013; Wilkinson 2016) and radio, audio and digital diaries (Wilkinson 2018; Worth 2009; Volpe 2019). The emphasis with these methods is that they complement children and young people's developing competencies and engage them in ways they are familiar with from school and play (Gibson 2012).

**CONTACT** Catherine Wilkinson  c.wilkinson@ljmu.ac.uk

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Whereas methods used with children and young people often embrace being creative or innovative, more traditional methods such as interviews and focus groups are still typically used with adult participants. Literature focusing on adult oriented research methods is difficult to find, unless addressing issues with specific adult populations viewed as potentially vulnerable, such as adults with learning disabilities, those with mental health issues, homeless adults, those with low literacy and elderly or institutionalised participants (e.g. Lloyd, Gatherer, and Kalsy 2006; Nind 2008). In comparison, there is a small body of literature reflecting on the use of specific methods for older adults e.g. Baker and Wang (2006) on photovoice and Jacelon and Imperio (2005) on participant diaries. Arguably, this is because it is assumed that, whilst children and young people may require methods characterised by creativity and participation to encourage or sustain their engagement in research, adults are happy to participate in methods that have been the staple of social research for decades (for instance interviews and focus groups). Whilst we agree with other researchers (e.g. Carter and Ford 2013; Fargas-Malet et al. 2010; Kirk 2007; Morrow 2008) that there are additional methodological and ethical considerations in conducting qualitative research with children and young people, in comparison to adults, we do not see any reason why methods typically the preserve of research with young people should not be used with adults (see also Clark 2011).

We join Birch (2018) in inviting children's geographers to revisit earlier notions of separability of child and adult (see, for instance, Lee 2005). In other words, it should not be assumed that adults are most at ease when participating in research using traditional methods. Neither should we assume that young people will feel comfortable or most valued if their only option is to engage in drawing or other activities; their preference might well be to be interviewed (see Wilkinson 2015). However, the argument we make is more nuanced than this. We are not simply suggesting with this paper that researchers seldom use creative methods with adults. Indeed, there are excellent examples of this work, in health (Raatz, Warber, and Dieppe 2019; Dutton et al. 2019; Moss and O'Neill 2019), the social sciences (Chang and Netzer 2019; Rainford 2020) and geographical work too (Richardson 2015; Raynor 2017; Rogers and Anderson 2019). However, the use of creative methods with adults is less often reflected on in methodological papers, compared with the extensive body of work in geography and beyond reflecting on the use of methods with children and young people.

The overarching aim of the study on which this paper is based was to collaboratively develop a resource for young people (aged 14–16) participating in Adolescent Idiopathic Scoliosis (AIS) consultations. The study involved the collaborative development of the resource (Coming to Spinal Clinic) through participatory design workshops with young people and their parents. The unique contribution of this paper is its reflection on the use of the same methods with young people and their parents separately but contemporaneously. In this paper, we reflect on how the two different groups interacted and engaged with these methods. We achieve this by re-reading the transcripts from the two workshops and reflective fieldnotes to critically consider the completion of the activities and identify and appraise any differences in the ways young people and their parents responded to these activities. In doing so, this paper goes some way towards what Birch (2018, 516) describes as the 'much-needed unpacking of the adult–child binary' in research.

One of the greatest dangers of working with the 'young people-friendly' template is that it oversimplifies and artificially packages and separates adults and young people (see also Birch 2018). This stance supports recent work in the social sciences from Roberts and France (2020) who question the ubiquity of generational framings within youth research, both at a theoretical and empirical level, arguing that the packaging of generations as collective identities is too neat, generalised and simplistic (see also Ferreira 2018). We argue that both young people and adults have the right to contribute effectively to research. Morrow (2001) says that, in research with children and young people, a range of methods should be used to enable them to participate if and how they want to. We argue that this is important for adults too. Further, whilst some research will only consult young people about their experiences, or only consult parents about their child's experiences, we argue that

consulting both young people and their parents on the same topic can be important. This is particularly so when considering Smyth's (2001) argument that children's healthcare needs are better understood, gained in collaboration with both children and their parents. Research into a range of topics in health care research has sought both parents' and their children's perspectives within the same project (e.g. Naik et al. 2019; Alvarez, Pike, and Godwin 2019; Gutiérrez et al. 2020) and there are some examples of this within the children's geographies literature too (see, for instance, Caro 2019; Hopkins and Pain 2007; Tomanović and Petrović 2010; Vanderbeck 2007), as will be discussed shortly in this paper.

This paper proceeds as follows. First, we review existing geographical scholarship on intergenerational practice in order to contextualise the argument advanced in this paper. We then offer a brief overview of the role of AIS consultations and detail the wider study from which this paper has been developed. We then provide an overview of the methods used, detailing the use of participatory design workshops in the study and reflecting on the engagement of young people and their parents in different activities within the workshops. We conclude with a call for a relaxation of the adult/young person binary within research design, recognising the usefulness of the methods used in our study across generations.

### Intergenerational practice and perspectives

Richardson (2015) acknowledges that, within the discipline of human geography, there is an increasing emphasis on and utility of intergenerationality as a concept. In the pages of *Children's Geographies* itself, authors have provided insight into intergenerational perspectives of childhood in rural areas of Chile (Caro 2019); fashion and identity (Rawlins 2006); and the good parenting ideal in relation to active free play (Pynn et al. 2019). Other geographical work has discussed intergenerationality in relation to questions of age (Hopkins and Pain 2007; Vanderbeck 2007); place-based education (Mannion and Adey 2011); and the social geographies of grandparenthood (Tarrant 2010). Other research in the social sciences more broadly (e.g. Grenier 2007; Kinoshita 2009), and health (Weissman and Olfson 2009) has explored generational differences in conceptions and experiences of a specific research focus.

Vanderbeck and Worth's (2015) landmark collection *Intergenerational Space* promotes the need to research at the intersections of age and spatial relations. The collection focusses on age segregation and the promotion of age integration; the construction of generational statuses and identities; and spaces of intergenerational transmission, contestation and negotiation. The text communicates how inherent geography is to generational statuses and identities. A recent commentary by Yarker (2021) makes the case for greater critical attention to be paid to everyday intergenerational encounters by geographers. This argument is made in response to what Yarker (2021) recognises as a lack of research on intergenerational encounters that are naturally occurring. The author suggests that geographers can, and indeed should, build on our current knowledge of intergenerationality by moving outside of the family and into the wider community.

Whilst geographical work has explored intergenerational perspectives of the research topic at hand, there has been little methodological reflection from an intergenerational perspective. Pynn et al. (2019) question: how and why has the good parenting ideal changed in relation to active free play during middle childhood? They interview 14 middle class, predominantly white, grandparent-parent dyads. Whilst the authors do not reflect on the methodological practices and considerations of researching across generations, they do note that this sampling approach enabled them to examine three generations of parenting approaches. Grandparents reflected how they were parented and how they parented their children, parents, in turn, reflected on how they were parented, and how they parent their own children currently. Holt et al. (2016) in an intergenerational study of perceptions of changes in active free play among families from rural areas of Western Canada collected data via 49 individual interviews with members of 16 families (15 grandparents, 16 parents, and 18 children) residing in rural areas/small towns in the Province of Alberta.

Whilst, again, the focus of this paper is not on the methodological aspects of the study, the authors outline that typically one researcher interviewed the grandparent while the other researcher interviewed the parent then the child. Interestingly, the authors note that interviews with parents and grandparents lasted approximately 45–60 minutes, and interviews with children were shorter at 20 minutes. The authors also note that an interview guide was developed and adapted for each generation. However, the authors do not reflect on the engagement of each participant group (grandparents, parents and children) with the interview process.

As is clear from the literature reviewed here, geographical research on intergenerational practice has been concerned with intergenerational perspectives of the research topic at hand, and the methodological differences between participants of different generations taking part in the research has not been the sustained feature of analysis. This paper goes some way towards addressing this identified gap with a reflective account of how parents and their children participated in one research project, thereby responding to Yarker's (2021) call for geographers to focus on intergenerational encounters and how spaces, in the case of this paper research spaces, may be experienced from an intergenerational perspective.

### **AIS consultations and the wider study**

AIS is a lateral curvature of the spine, commonly diagnosed between the ages of 7 and 18 years, with girls experiencing more severe curves than boys (Reamy and Slakey 2001). There are three main treatment trajectories which young people can encounter following a diagnosis of AIS (McCarthy and Kelly 2019). These include:

- Observation, where the curvature is not severe enough to indicate immediate surgery.
- Brace, where the curvature indicates a trial of a brace to reduce the curvature.
- Surgery, to 'straighten' the abnormal curvature.

Consultations with the specialist spinal team are reported as the main source of information for young people and parents following diagnosis of AIS (van Schaik et al. 2007, Bettany-Saltikov et al. 2012). The engagement of young people in consultations, information exchange and decision-making for scoliosis treatment is reported to be sub-optimal; this resonates with young people's experiences of other surgical diagnoses and planned treatment decisions (Bray, Callery, and Kirk 2012; Jackson, Cheater, and Reid 2008). Although it is unlikely that young people would want to be completely autonomous in making decisions or that this would be an ideal situation, it would seem to be acceptable that they should be supported to contribute in an equitable way alongside their parents within consultations. This was evident in our own research, with one young person emphasising 'it's *your* back, so it's important you know about things'.

The basic premise of this study was a recognition that all young people should have access to credible information and be supported to be at the centre of their care in order to participate actively in decisions and choices about their lives. The development of the 'Coming to Spinal Clinic' resource (see <https://www.edgehill.ac.uk/comingtospinalclinic/>) aims to facilitate young people to engage with health professionals and participate in choices and information exchange about their condition. The development work was undertaken *with* young people and their parents in participatory design workshops using creative methods to ensure that the final resource was relevant to young people in relation to nature, design, format and content, language, terminology, questions and prompts used in the resources.

The research team involved in data collection comprised of a children's geographer and two children's nursing academics. There was no pre-existing relationship between the research team and participants prior to them being recruited onto this study. This paper is not concerned with detailing the findings of the original study, rather its concern is with reflecting on the use of the same methods with young people and their parents contemporaneously.

## Recruitment and sampling

The young people and their parents were identified by clinicians within a regional children's hospital and sent information about the study, with contact details of the research team if they were interested in taking part. Informed consent/assent, as appropriate, was then gained from participants on the day of the workshops. None of the young people knew each other prior to the workshops, with the exception of two siblings who both participated. We recruited 10 young people (9 girls, 1 boy) aged 14–16 years and their parents ( $n = 11$ ) as participants in this research. We did not collect any additional demographic or biographical information from participants with the exception of their names (which were later anonymised) and their ages in the case of the young people, to ensure they met our inclusion criteria. Additional demographic and biographical information was not deemed necessary in line with the scope of the original study.

## Methods

We undertook two participatory design workshops, inviting young people who had undergone AIS treatment and their parents from one setting, a regional children's hospital in the North West of England, to participate.

### *Participatory design workshops*

Participatory design workshops have been used successfully in a variety of situations (for instance, technological design and participatory planning) with children and young people (Iversen, Dindler, and Hansen 2013). Various methods have been used within participatory design workshops to facilitate participant engagement, stimulate discussion, generate insights and contribute to design (Iversen, Dindler, and Hansen 2013; Ruland, Starren, and Vatne 2008). Traditionally, participatory design workshops have relied on interviews and focus groups, but comic-boarding (Moraveji et al. 2007), emotional-storyboarding (Hung and Gerber 2010), and other arts-based methods (Carter and Ford 2013; Bergold and Thomas 2012) are increasingly being used as a means of triggering data within participatory workshop with children and young people. Nicholas et al. (2012) celebrate the ability of participatory design methods to engage those who can be less interested in getting involved in traditional research through principles such as play, co-operative and mutual learning, and design-by-doing.

As noted above, participatory design processes have notable strengths yet, as with other research approaches, there are some tradeoffs (Spinuzzi 2005). For instance, participatory research and design can be considered at once exciting and exhausting, particularly for children and young people with chronic illness (Van Staa et al. 2010). Further, Petrova, Dewing, and Camilleri (2016) argue that because of the greater credibility fostered and trust often gained through participatory processes, participants disclose their experiences and speak more freely. Whilst Petrova, Dewing, and Camilleri (2016) argue that this enhances the quality of the study, they also raise this as a potential ethical concern to be mindful of regarding participant confidentiality. Some have also argued that participatory design processes need to be made more visible in the end product of participatory design, i.e. the dissemination (Salgado and Galanakis 2014). We ensured we appropriately acknowledged the contributions of young people and their parents within the 'Coming to Spinal Clinic' resource co-created as part of the original research project.

Adopting a participatory design approach in this study ensured that the young people and their parents were able to contribute to the design of the 'Coming to Spinal Clinic' resource in what Bergold and Thomas (2012) describe as a democratic, collaborative and supportive communicative space. Any pre-existing assumptions held by the research team about the nature, format, design and content of the proposed resources were not communicated to participants to allow freedom of their own expression. This process of 'bracketing' (Tufford and Newman 2012), whereby

researchers' preconceived notions are set aside, ensures the researcher's voice does not over-power the voices of participants (Silverio, Wilkinson, and Wilkinson 2021).

Two participatory design workshops lasting 2 hours each were held concurrently, one with young people and another with their parents. Importantly, this enabled us to compare intergenerational engagement with these methods in a way in which no one group was the 'host' (see Yarker 2021). The participatory design workshops took place in neighbouring rooms at a regional children's hospital in the North West of England and were facilitated by the research team. The decision to run separate workshops aimed to encourage freedom of expression with their peers (previous research has noted that children and young people can be more outgoing in peer groups, see Hundleth 2011), though it should be noted that freedom of expression cannot always be guaranteed as, even within peer groups, power dynamics can be at play. At the beginning of the workshop key 'ground rules' were established and agreed for each group, for instance respecting people's opinions and not sharing information about other participants outside of the group.

## Structure of the workshops

Each participatory design workshop used multiple embedded activities with young people and their parents.

### *Part 1: content of material*

Part one focused on the content of the material and used emojis, speech bubbles and top tips activities. Participants were asked to identify and explore positive and challenging aspects of consultations and the questions, prompts and key phrases used during interactions with health professionals during a spinal clinic appointment.

### *Emojis*

Emojis have been used as a visual research method for eliciting children's voices in childhood research (see Fane et al. 2018) as well as the voices of young people (Mackenzie et al. 2018), although less is written about their use with adults. Emojis are familiar to many people because of their prevalence on social media and smart phone text messaging. We presented participants with over 25 different printed emoji faces, ranging from happy and ecstatic to worried and scared, and we also included blank emojis to allow participants to draw expressions to resemble the emotion they wanted to convey. Participants selected the emoji that represented how someone in their position (i.e. a young person with scoliosis or a parent of a child with scoliosis) might feel attending a spinal clinic and stuck their chosen emoji on a piece of flip chart paper. We then used prompts such as 'why may they feel this way?' and 'what may help with X emotion?' to elicit further discussion. We were aware that varying interpretations of emojis exist (Miller et al. 2016), so these discussions around the selected emoji were important as they helped us gain a more nuanced understanding of participants' feelings.

### *Speech bubbles*

We presented participants with blank speech bubbles we had printed and asked them to complete these individually with consideration to: what questions are important to ask in clinic? Is it easy to ask questions in clinic? What about the words used in clinic? And any other things that someone might like to know? Speech bubbles were useful in encouraging the participants to 'write and tell' (Noonan et al. 2016).

### *Compiling 'top tips'*

We then asked the young people for 'top tips' they thought should be shared with other young people coming to spinal clinic. We also asked the parents for top tips they thought would be useful for other parents with a child coming to spinal clinic. We used post-it notes and then, in each group,



we asked the participants to rank these top tips as individuals before compiling a group consensus on 'top tips' for young people and a 'top tips' list for parents.

### **Part 2: format and design of the resource**

Part 2 used prompts to support designing the format and appearance of the resource.

#### **Prompts**

We showed examples of existing resources including prompt sheets, images, and a comic strip to the young people and their parents and used these to elicit discussion. We also showed them colour swatches, text examples and artwork examples which the parents and young people looked through and decided which were appealing and less appealing and provided reasons why/why not. We asked participants to consider: what is the best way to share some of the information we have developed today? Further, we encouraged participants to think about how they would prefer to access the resources (e.g. paper-based, online, via a mobile phone application).

### **Part 3: sharing and comparing**

At the end of the individual participatory design workshops, the young people presented their ideas and work to the parents and vice versa. Throughout the workshop, the young people commented that they wondered what their parents were saying and writing and that they thought they were probably 'writing a massive essay', demonstrating their curiosity as to what their parents were 'getting up to'. Parents and their child were aware from the beginning of the workshop that information shared would not be anonymous as parents would recognise their child's handwriting and vice versa. Participants were asked if they wanted to remove any content before the 'share and compare' part of the workshop occurred; no participants wished to remove any content. We used thought clouds to encourage young people and their parents to comment on each other's responses.

Each workshop was audio-recorded to ensure that responses, preferences and discussions were documented. Further, written comments were photographed, resulting in verbal, text and visual data. Data from each participatory design workshop were transcribed and anonymised including the removal of any identifiable information. In line with participatory design workshop processes (Jackson, Cheater, and Reid 2008), some of the preliminary data analysis occurred within the workshops as the young people and their parents made decisions about what was important, what was not relevant, determined which designs and formats they preferred and identified 'themes of importance'. After the workshops, the data were subjected to more theoretical analysis from the research team, using thematic analysis (Braun and Clarke 2006). This facilitated the comparison and contrast of the perspectives of young people and their parents.

#### **Researcher's diaries**

It has long been recommended for qualitative researchers to engage in 'memo-writing', a practice of note-taking through data collection and analysis stages. This process of memoing enables probing not only of the data but also of the processes involved in gathering that data (Birks, Chapman, and Francis 2008). Following the workshops, as soon as possible after they were held, the research team made fieldnotes which contained reflections on the content of the workshops but also additional methodological reflections. It is these reflections that are drawn on in the following section.

### **Reflecting on the methods used**

Overall, the structure of the workshops offered a mechanism for generating and structuring discussion for both groups of participants. We found that the activities helped to pace and focus the

discussion, giving both young people and their parents time and permission to pause and think as well as discuss issues; this helped ensure equitable participation within each of the workshop groups. The activities also helped to avoid ‘instant response’ which could have occurred if participants had simply been encouraged to discuss things. The activities provided an opportunity for us to actively facilitate everyone’s involvement and to disrupt dominant voices which have been acknowledged to permeate some group research discussions (see Baiardi, Gultekin, and Brush 2015), for instance by asking ‘did anyone else choose the same emoji? ‘Did you write something different in your speech bubble? Why?’.

The emojis and speech bubbles worked well as the first activities as they prompted initial conversation that settled parents and encouraged engagement between them (for example, someone picking up an emoji and another person responding to it). Parents seemed comfortable working with other parents who had similar experiences or concerns to them. During the task, we observed that participants were discussing and comparing experiences, based on the emojis selected. Bernie reflects:

I think some of the parents were a bit surprised by the activities to start with but they all soon settled down and engaged actively in the session. The activities meant that the workshop was far from static as people weren’t just sitting down but moving around, stretching to select emojis etc.

The use of the emoji activity appeared to make parents feel at ease, acting as what Sutton (2011) refers to as an icebreaking activity. The young people responded to the use of this method in a comparable way. We reflect that this is perhaps because the activity reduced not only the researcher’s gaze (see Rollins 2005), but also the gaze from other participants. Lucy notes how:

With the exception of a sibling pair, the young people had not met each other before and the emoji activity seemed to help them overcome feeling awkward and any awkward silences. They had to choose emojis and then move around to stick them up on the flip chart. This enabled one to one discussion to begin between participants as they moved around the room and there was lots of chatting.

The side conversations which occurred alongside the focused activity involved young people sharing and discussing their favourite emojis to use in their messaging, which was common ground between them. The completed emoji charts aimed to facilitate the young people to recognise the breadth of feelings which can be associated with coming to spinal clinic and how their personal experience was either similar or different to others in the room. Many of the young people had not met other young people who had undergone spinal surgery before and seeing the range of emotions prompted the young people to explore with each other what they had felt on diagnosis and consultation.

The thought clouds and speech bubbles used to explore ‘questions in clinic’ appeared to be well received, with participants setting to work on completing them without further prompting. Although some of the young people wanted to check their spelling was correct as they completed them, the parents did not vocalise this same concern. For the young people, there was much discussion about their role and their parents’ role in clinic; this discussion might have been constrained if their parents had been present (see Gardner and Randall 2012 for further discussion of the effects of the presence or absence of parents in research with their children).

Observing the mood in the workshop, we felt it was enjoyable for the parent participants even though some of the content of discussions was sensitive and recalled strong emotions. Conversations between parents mostly happened in twos and threes and allowed rehearsal of ideas that were then shared more widely in the group, if they chose to, when prompted by the researcher.

Looking at photographs from the emoji and speech bubble task taken during the workshop, it appears that young people in our study wrote more comments than their parents, perhaps being used to engaging in handwritten writing tasks through school work. However, although they wrote fewer comments, the emojis and speech bubbles provided the parents with useful prompts to facilitate broader spoken discussion. As such, neither data set was richer than the other.

We found that the availability of exemplar materials for Part 2 of the participatory design workshop was a useful starting point for the parents to use to help channel discussions. Bernie reflects:

There is a real sense of physicality that you get with activity-based workshops – people getting up and moving about round a table, moving from table to wall, writing/drawing, selecting, picking things up, handling materials, choosing, discarding, rearranging, and coming close to each other when doing the activities. All of this created a real sense of togetherness and encouraged sharing that might not have happened in a more traditional approach (sat in a circle for a focus group).

We noted that there was a little less discussion from the young people in this section of the workshop compared to Part 1, perhaps because the focus of the activity felt more removed from their experiences. There was less engagement with the materials and more general discussion around sources of information they had accessed or thought were useful to access e.g. Instagram. They were keen not to have sources of information such as comic strips. The young people reached consensus well within the time allocated for the discussion and were respectful of others' comments and views. The discussion, despite involving less moving around, flowed well. This is likely because relationships were already established from the previous activities (see also Sutton 2011).

In the 'compare and share' part of the workshop the parents were surprised by the depth of some of the comments from the young people. Catherine reflects:

When the parents and young people looked at each other's written responses there was a sense of pride from parents that their children had articulated so carefully their thoughts and feelings. However, there were a few emotional responses from parents to seeing how scared their child had been before surgery and how their child had felt left out of conversations and decisions.

The above reflection from Catherine can be understood in relation to Yarker's (2021) emphasis on the importance of exploring, in spaces, the types of intergenerational social connections experienced and how different interactions shape these.

Overall, the format of asking the same questions in the same way enabled us to more easily compare perspectives across the two participant groups. Had we asked the same question but not offered both groups the same scaffolding (e.g. emojis, speech bubbles and thought clouds), then the stimuli would have been different and this would have inevitably influenced the shaping of the data. The approach created informality and whilst the focus was serious, the ability to engage was promoted. If we had simply asked questions in a traditional focus group format, the workshop groups may have wandered in different directions, whereas the activities kept the focus more similar across the two groups. This made it easier to make comparisons in terms of data analysis across the generations, and easier to draw stronger conclusions in communicating the project's findings.

## Conclusion

During the contemporaneous workshops run as part of this project the young people and their parents engaged in the same activities. The participatory design workshops usefully permitted young people and their parents to be the producers of knowledge independent of each other, yet at the same time. Our interest in this paper was to reflect on the implementation of the same methods contemporaneously within the workshops across two generations.

Whilst we agree with other researchers (e.g. Fargas-Malet et al. 2010; Kirk 2007; Morrow 2008) that there are additional methodological and ethical considerations and even challenges (Bassett et al. 2008) in conducting qualitative research with children and young people in comparison to adults (although as we noted in the Introduction to this paper, we do not naively consider adults as a homogenous group), we do not see any reason why methods typically the preserve of research with young people should not be used with adults or vice versa. Selected and used sensitively, we do not consider young people-friendly techniques to patronise adults, rather we see their benefits in disrupting dominant voices that often exist in a group research setting (Baiardi, Gultekin, and Brush 2015), and helping to build rapport, not only between researcher and participant, but also

developing connection between participants in a group research situation (Sutton 2011), such as a focus group or workshop.

The issue of using appropriate methods is a central concern in any research but with children and young people there seems to be a greater confidence in using and desire to develop participatory methods, drawing on familiar sources and interests (Punch 2002). In this paper, we have made the argument for softening some of the partitioning of young people's and adults' engagement with research methods by critically considering their use. In our research, both adults and young people engaged with the activities, drawing and writing on speech bubbles and thought clouds used by the research team as prompts to facilitate broader spoken discussion. Although there has been an assumption about the polarisation between methods for adults and methods for young people, we call for a loosening of the adult/young person binary within research design, recognising the usefulness of the methods used in our study across generations.

Overall, this paper contributes to the growing body of literature concerned with intergenerational practice in children's geographies and human geography more broadly, including recent work by Yarker (2021), which argues for a focus by geographers on intergenerational encounters and how spaces may be experienced from an intergenerational perspective. Our paper responds to Yarker's (2021) call, not by focusing on intergenerational perspectives of the research topic, but by teasing out intergenerational experiences of taking part in a research project which used participatory design workshops comprising the same research methods across generations (with young people and their parents). Future research could seek the perspectives of the participant's themselves participating in intergenerational research regarding research design, methodology and methods, rather than relying on researcher reflections, as in our study. Further responding to Yarker's (2021) call, this research could allow researchers to focus more directly on what types of research spaces we need to create to support intergenerational interactions. Nonetheless, this paper goes some way towards addressing this identified gap in existing geographical scholarship.

## Note

1. See Weller (2006) for a discussion of situating (young) teenagers in geographies of children and youth.

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## ORCID

Catherine Wilkinson  <http://orcid.org/0000-0002-9313-6585>

Bernie Carter  <http://orcid.org/0000-0002-9313-6585>

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