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Recruitment in Qualitative Public Health Research: Lessons Learned During Dissertation Sample Recruitment

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Abstract

The purpose of this article is to describe the recruitment challenges faced by eight public health graduate students when conducting qualitative dissertation research. The authors summarize their dissertation studies, describe recruitment challenges, and provide strategies and recommendations used to address challenges. The authors identified twelve recruitment issues which they grouped into three major categories: (a) obtaining consent; (b) working with gatekeepers; and (c) accessing participants. The authors propose three recommendations to consider in participant recruitment, which are: (a) collaborate with gatekeepers; (b) use additional recruitment tools; and (c) understand your target population. The compilation of experiences from multiple graduate students from a diverse selection of topics provides valuable insight and resources when planning a qualitative research study in the field of public health.

Keywords

Recruitment, Graduate Student, Participant Access, Informed Consent, Gatekeepers

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Introduction

Successful participant recruitment is an important aspect of conducting qualitative research. Determining the most effective recruitment methods suited for a qualitative research study may appear challenging for researchers. Researchers conducting qualitative studies in health-related fields have encountered challenges in recruiting specific target populations, such as low-income or underserved minorities (Jones, Steeves, & Williams, 2009; Joseph, Kaplan, & Pasick, 2007; Renert, Russell-Mayhew, & Arthur, 2013) and in using traditional methods of recruitment such as flyers, letters, and media advertisements with minorities (Eide & Allen, 2005; Jones et al., 2009). Furthermore, researchers have reported misunderstandings among participants and gatekeepers (one who controls access to participants) about the research study during recruitment, limited financial resources, and lack of trained support staff (Felsen, Shaw, Ferrante, Lacroix, & Crabtree, 2010; Renert et al.,

2013). Although faced with challenges, researchers have noted successful recruitment strategies. These strategies are:

1. Collaborating with health care providers and community gatekeepers trusted by the participants (Felsen et al., 2010; Porter & Lanes, 2000; Renert et al., 2013; Spratling, 2012);
2. Using face-to-face recruitment with participants in clinical settings (Felsen et al., 2010; Spratling, 2012)
3. Using word of mouth from participants and gatekeepers (Jones et al., 2009); and
4. Building trust with participants (Eide et al., 2005; Felsen et al., 2010).

Literature exists on the recruitment challenges and successes of conducting qualitative research on health issues; however, there is a paucity of published literature on the recruitment challenges and successes of graduate students using qualitative methods to conduct public health research (Eide et al., 2005; Morrison, Gregory, Thibodeau, & Copeland, 2012; Spratling, 2012). Graduate students encounter various challenges and successes during the recruitment phase of their thesis or dissertation. Graduate students may possess limited research experience, funds, time, established rapport with gatekeepers, and support from a research team when faced with recruitment challenges. Understanding the recruitment challenges and lessons learned of graduate students is a valuable resource for current and future graduate students completing a thesis or dissertation as well as early career professionals; herein referred to as novice researchers.

To address an aspect of this gap in the literature, we, eight novice researchers whom are enrolled in or recently completed a doctoral program, collaborated to write this article on our experiences recruiting participants for our dissertations. The purpose of this article is to provide insight into the recruitment challenges and opportunities faced by graduate students when conducting qualitative dissertation research. In this article, we:

- 1) summarize our dissertation research studies;
- 2) describe our recruitment challenges and how we addressed them; and
- 3) conclude with recommendations for novice researchers.

Although some of our dissertations were mixed method study designs, this article will solely focus on the recruitment challenges and successes for the qualitative methods. Furthermore, the findings of our dissertations are in various stages of manuscript preparation and are not reported in this article.

Summary of Research Studies

The topics of our eight studies included a stealth nutrition intervention, physical activity, sexual concurrency, HIV testing, communication about sexual health, type-2 diabetes, hypertension, and cervical cancer. Table 1 presents a summary of each study organized by author, and includes the purpose, sample description, number of participants (N), data collection method, recruitment setting, recruitment tool, incentive, and data collection period. We recruited participants using convenience or purposive sampling methods. Participants varied in demographics and the sample sizes ranged from 21 to 42 participants. Seven authors used semi-structured interviews and two authors used focus group discussions. Participants were recruited from a middle school, college campus, clinical settings, hair salon, and community settings.

Table 1. Summary of Dissertation Research Studies

| Author | Purpose | Sample Description | N | Data Collection Method | Recruitment Setting | Recruitment Tool | Incentive | Data Collection Period (Months) |
|-------------|--|---|---|---|---|---|--|---------------------------------|
| Brace* | To examine the impact of a stealth nutrition intervention on promoting healthy eating among college students | Under-graduate college students (18-23 years) | 28 (4 focus groups with 6-8 participants each) 16 | Focus group discussions Semi-structured interviews | College classroom | Flyers Face-to-face E-mails, Academic advisors | Gift card for focus group (\$10) Gift card for interview (\$20) | 3.5 |
| Christiana* | To examine youths' participation in noncompetitive outdoor physical activity | Rural youth (10-14 years) | 24 | Semi-structured interviews | Middle school | Informational letters to parents | Gift card (\$10) | 2 |
| Davis* | To understand African American young women's lived experiences with sexual concurrency | Self-identified African American women (18-22 years) with a history of concurrent sexual partnerships | 41 | Semi-structured interviews | Respondent-driven sampling from existing randomized control trial | Post-cards | Cash (\$10) Referral fee Cash (\$25) Participation fee | 7 |
| Sealy* | To explore barriers that prevent women from obtaining Pap smears | Women (25-45 years) living on a Caribbean Island | 13 (2 focus groups with 6 & 7 each) | Focus group discussions | Hair salons | Flyers Face-to-face Radio promotion | Gift certificate (\$5.00) | 2 |

| Author | Purpose | Sample Description | N | Data Collection Method | Recruitment Setting | Recruitment Tool | Incentive | Data Collection Period (Months) |
|---------------|---|---|-------------------------------|----------------------------|--|---|---------------------------|---------------------------------|
| Fowles* | To determine what factors influence black men's decision to obtain an HIV test | Black men (18+ years) that live in DeKalb and Fulton Counties of Georgia | 26 | Semi-structured interviews | Community Settings | Flyers Postcards Business cards Face-to-face Uniforms with Logo | Cash (\$15) | 2 |
| Martinez* | To understand how Latino parents communicate with their adolescents about sexual health, pregnancy prevention and sexually transmitted diseases | Latino parents and their adolescent child (12-17 years) | 42 (21 dyads parent/child) | Semi-structured interviews | Mental health and substance abuse clinic | Flyers In-clinic presentations Counselor referrals | Gift card per dyad (\$50) | 2 |
| Namageyo-Funa | To examine the experiences of living with type-2 diabetes among black men | Low income black men (45-65 years) with type-2 diabetes | 30 | Semi-structured interviews | Diabetes Clinic | Flyers Face-to-face | Cash (\$20) | 2 |
| Rimando | To understand the experiences of older African Americans diagnosed with hypertension | African American older adults (55+ years) with hypertension, low-income, uninsured, high school education | 28 | Semi-structured interviews | Blood pressure Clinic | Flyers Face-to-face Collaboration with clinic staff | Gift Card (\$20) | 2 |

We used various tools to recruit participants, including flyers, informational sheets, email, face-to-face interaction, site staff, and radio advertisement. Common recruitment tools were flyers (six studies) and face-to-face recruitment (five studies). Incentives included gift cards, movie tickets, or cash that ranged from a \$5 to \$50 value. Six authors had an average data collection period of 2 months. All studies received Institutional Review Board (IRB) approval.

Recruitment Issues

We identified 12 recruitment issues based on our experiences. Table 2 provides a summary of the recruitment issues, alternate recruitment strategies, and recommendations for each recruitment issue. We grouped the recruitment issues into three categories:

- 1) obtaining consent;
- 2) working with gatekeepers trusted by participants; and
- 3) accessing participants.

Other issues that did not fit into the three categories were labeled additional recruitment issues. We each experienced at least one recruitment issue described in this article.

Consent

Researchers use consent forms to ensure participants are aware of the risks and benefits of participating in a research study (Belmont Report, 1978). Although the IRB reviewed and approved our consent forms, some of us encountered recruitment challenges related to consent. These issues included obtaining parental permission when working with minors, participant concern of confidentiality and anonymity, sensitive topics, and participants' health literacy.

Obtaining parental permission:

When implementing a study that includes the recruitment of participants under the age of 18, studies report problems with obtaining parental permission and low parent response rates (Tigges, 2003). Christiana's study focused on a population of rural youth (10 to 14 years of age) in the southeast United States. To recruit participants, Christiana sent an informational sheet describing the study to parents and asked for signed parental permission. Christiana experienced slow recruitment of participants and many unresponsive parents. Slow recruitment may have been due to a lack of trust between the researcher and the potential participants. To overcome this challenge, Christiana collaborated with the school administration, a group of people trusted by and familiar to the parents. The school administration assisted Christiana by sending the informational sheets to parents to introduce them to the study. This change in recruitment strategy facilitated obtaining parental permission for the underage participants, therefore enabling the recruitment of participants into Christiana's study.

Participant concern for confidentiality and anonymity:

Confidentiality and anonymity may be a concern to participants, especially vulnerable groups, such as undocumented immigrants and those practicing risky behaviors (Allen et al.,

Table 2. Summary of Recruitment Issues and Recommendations

| Author | Recruitment Issues | Alternate Recruitment Strategy | Recommendation |
|--------------------------|---|---|---|
| Obtaining Consent | | | |
| Christiana | Securing parental permission (Researcher sent informational sheet to parents) | <ul style="list-style-type: none"> Use the school administrators to send informational sheets to the parents | <ul style="list-style-type: none"> Collaborate with gatekeepers who are trusted by participants |
| Martinez | Participant concern regarding participation and undocumented citizenship status | <ul style="list-style-type: none"> Met with clinic staff and shared the informed consent document in English and Spanish Met with clinic staff to discuss study and learn of potential participant concerns about the study. Participants only asked about years of residence in the US instead of their citizenship status | <ul style="list-style-type: none"> Collaborate with gatekeepers who are trusted by participants Understand target population |
| Sealy | Hesitation to participate in study due to sensitive topic | <ul style="list-style-type: none"> Appeared on a television and radio talk show (accepted by potential participants) to inform potential participants about the study and researcher Reminder phone calls for potential participants who had expressed interest | <ul style="list-style-type: none"> Collaborate with gatekeepers who are trusted by participants Use additional recruitment strategies Understand target population |
| Fowles | | <ul style="list-style-type: none"> Recruitment script was revised to focus less on the sensitive topic of HIV and more on the topic of general men's health | <ul style="list-style-type: none"> Understand target population |
| Martinez | | <ul style="list-style-type: none"> Met with the parent and child to verbally review the informed consent document Reminded participants of their right to refuse to answer, particularly when a sensitive area arose in the conversation All conversations began with general topics | |
| Davis | Participant health literacy level | <ul style="list-style-type: none"> Revise screening questionnaire Allow participants to ask for clarification on questions in the screening questionnaire | |

| Author | Recruitment Issue | Alternate Recruitment Strategy | Recommendation |
|---|--|---|--|
| Involving Gatekeepers | | | |
| Martinez | Time commitment of gatekeepers | <ul style="list-style-type: none"> Obtain support from the gatekeeper's leadership Work one on one with the gatekeeper through the recruitment process | <ul style="list-style-type: none"> Collaborate with gatekeepers who are trusted by participants (clarify the role and expectations of the gatekeepers in the study) |
| Brace | Gatekeepers unclear on aspects of the study | <ul style="list-style-type: none"> Clarify aspects of the study to gatekeepers | <ul style="list-style-type: none"> Collaborate with gatekeepers who are trusted by the participants (clarify the study) |
| Christiana | Participant perception (fear) of the gatekeeper | <ul style="list-style-type: none"> Reassure potential participants that they had no reason to fear | <ul style="list-style-type: none"> Understand the target population |
| Accessing Participants With One Recruitment Strategy | | | |
| Martinez Rimando Namageyo-Funa | Use of only one recruitment tool at one recruitment site | <ul style="list-style-type: none"> Reposition flyers to increase visibility Spend more time at the recruitment site Use face-to-face recruitment | <ul style="list-style-type: none"> Collaborate with researchers, faculty, and peers Collaborate with gatekeepers trusted by participants Use additional recruitment tools to recruit participants |
| Brace Fowles Sealy | Use of one recruitment tool at many recruitment sites | <ul style="list-style-type: none"> Use additional recruitment tools | <ul style="list-style-type: none"> Use additional recruitment tools to recruit participants |
| Additional Recruitment Issues | | | |
| Namageyo-Funa Brace | Participant expectations | <ul style="list-style-type: none"> Shorten time frame between recruitment and data collection Be flexible on recruitment times and days Evaluate participants experiences for future studies | <ul style="list-style-type: none"> Shorten time frame between recruitment and data collection Understand the target population |
| Fowles | Interview location | <ul style="list-style-type: none"> Solicit help from gatekeepers for access to different locations to interview participants | <ul style="list-style-type: none"> Collaborate with gatekeepers trusted by participants |

2000; Domenech-Rodriguez, Rodriguez, & Davis, 2006; Martinez, McClure, Eddy, Ruth, & Hyers, 2012). Martinez identified issues of confidentiality and anonymity as recruitment challenges. The target population for Martinez's study was a primarily undocumented population of Latino parents and their children (12 to 17 years old). To overcome these recruitment challenges, Martinez met with clinic staff and shared the informed consent document in both English and Spanish. Meeting with clinic staff allowed the staff to ask questions that potential participants may have had regarding confidentiality and anonymity. Martinez did not collect information on citizenship status, residential address, or participant last names. Instead, Martinez de-identified participant data by coding them numerically, further protecting participant anonymity. When offered the opportunity to discuss the study during scheduled programs at the clinic, Martinez described these protections to clinic staff.

Sensitive nature of study topic:

Aside from participant confidentiality concerns, sensitive study topics can slow recruitment. Researchers must pay special attention to recruitment strategies with sensitive topics or subjects not commonly discussed among potential participants. Recruitment may be slow because potential participants are hesitant to discuss the topic or are not accustomed to verbalizing their sentiments and/or experiences with the topic (Allen et al, 2000).

Sealy experienced this during recruitment for her study on cervical cancer among women on a Caribbean Island. While cervical cancer is a health topic in the Caribbean Islands, its link to sexual and personal behavior often results in residents avoiding the topic. Previous research found that there is little communication about sexuality on the island (Allen et al., 2000). Women in the Caribbean Islands consider it taboo to discuss matters related to reproductive health, especially when speaking with strangers (Allen, DaCosta-Martinez, Wagner, McLetchie, DaGazon-Washington, et al, 2000). Sealy was a stranger to her target population, and this aspect may have slowed participant recruitment. To overcome this challenge, Sealy appeared on a television and radio morning talk show to inform the population about the study and to make the women familiar with the researcher.

Fowles focused on the utilization of HIV testing among adult black men (18 years or older). HIV testing is a sensitive topic among black men as it leads to feelings of distrust (Sengupta, DeVellis, Quinn, DeVellis, & Ware, 2000). When Fowles approached potential participants, they were interested to learn about the study. However, if HIV was mentioned early during the explanation of the study, many of the men expressed disinterest. After noticing the hesitation due to the topic of HIV, Fowles adjusted the initial recruitment script to focus less on the sensitive topic and more on the general subject of men's health (Sengupta et al., 2000). Introducing the study with less sensitive topics decreased hesitation and increased enthusiasm and interest to participate in the study.

The Martinez study highlights another example of when a participant may have reservations when discussing a sensitive study topic with an unknown researcher. To address this concern, Martinez increased the paid incentive from \$25 to \$50 per family, which stimulated interest in the study. She met with the participants to verbally review the informed consent document; began all the interviews with general topics to build rapport and ease into the topic; encouraged participants to sit comfortably during the interviews, and allowed participants to select the language of choice for the interview (English or Spanish). This allowed Spanish-speaking parents to express themselves more openly in their primary language.

Participant's health literacy level:

Health literacy levels influence the health-related encounters of individuals within the health care system and in participation in research studies (Agency of Healthcare Research and Quality [AHRQ], 2007). Davis encountered health literacy issues that impacted recruitment of participants. During the screening process for the 18 to 22 year old women, Davis asked participants about their sexual history to determine eligibility. Young women interested in the study and open to discussing their sexual history sometimes had a difficult time understanding some of the terms used during the screening process. For example, the screening question for concurrency asked, "During any time you were in a sexual partnership with a guy, have you ever had sex with someone outside of that sexual partnership?" The participants however indicated that they did not understand the question. After Davis screened the first few potential participants, she adjusted the screening question to increase clarity. For subsequent participants Davis used the following screening question, "I want you to think of any time you have had a sexual partner. While you were with a partner, have you ever had sex with anyone else?"

Accessing Participants with One Recruitment Strategy

During the recruitment process, a researcher may have to alter their initial recruitment strategy to include additional methods to increase participant numbers. Many of us started out using one or two strategies, such as only using flyers. As time progressed and participant enrollment remained stagnant, many of us reevaluated our recruitment plan and added additional strategies to boost enrollment. We experienced the following recruitment issues: only using a flyer at one recruitment site and use of a flyer at many recruitment sites. In many cases, we expanded on these initial strategies by using gatekeepers to access potential participants as is presented in the following section.

*Use of only a flyer at **one** recruitment site:*

Many studies use flyers to recruit participants (Holden, Rosenberg, Barker, Tuhim, & Brenner, 1993). Researchers often place flyers on notice boards in community settings. While flyers can be useful in getting the attention of a potential participant, the flyers may not influence or motivate the participant to enroll in the study. Martinez, Namageyo-Funa, and Rimando placed flyers on notice boards solely at the specific recruitment sites of their respective studies. We did not expect the gatekeepers to encourage participants to read the flyer; rather we anticipated that participants would read the flyer and contact the researchers on their own. We were however not able to recruit participants within the expected time frames using only this strategy.

Martinez placed flyers on notice boards that were covered with other announcements, which may have distracted the potential participants. In the Namageyo-Funa study, the potential participants had low literacy levels and could not read the flyer as was later shared by staff working at the clinic. In the Rimando study, the potential participants did not sign up initially because they may have had additional questions about the study, lack of trust of the researcher, or had low literacy levels. To address these recruitment issues, Martinez repositioned her flyers to the front of the notice boards on each visit to the clinic. Rimando reached out to her dissertation committee for advice. Rimando identified alternative recruitment strategies and implemented them to increase recruitment. Rimando used additional recruitment tools. She solicited the help of clinic staff to help with the recruitment,

and she spent more face time at the clinic answering any questions and concerns of the potential participants. Namageyo-Funa chose to spend more time at the clinic. She also used face-to-face recruitment in which she approached potential participants to tell them about the study while they waited for their appointment. The staff working at the clinic recommended this strategy, highlighting the low literacy levels of the potential participants.

*Use of only a flyer at **many** recruitment sites:*

Placement of flyers at recruitment sites is critical to the recruitment efforts of any study (Holden et al, 1993). Based on a study design, researchers can recruit potential participants from one site or from many sites. Although some of us only placed a flyer in one location, others had study designs that permitted them to place flyers in numerous locations such as bus stops, public libraries, universities, and barbershops. Placing flyers in numerous places did not facilitate recruitment within the expected time frames for the Brace and Fowles studies. These studies may have had slow recruitment because the flyers were either placed on notice boards covered with other flyers and announcements or the flyers were removed. Fowles encountered problems at multiple sites. At public bus stops, the flyers were removed or posted over. At a local university, Fowles' flyers competed with a similar study and she experienced "territory claim" with the other researcher. Consequently she had to remove her flyers from the university. Brace hung flyers on public notice boards throughout the university campus. She printed the flyers on bright paper and used promotional tools to garner attention from students. Recruitment was slow using just the flyers for Brace and Fowles. To overcome these challenges, Brace and Fowles used additional recruitment tools such as street recruitment, recruiting face-to-face in classrooms, and enlisting the help of gatekeepers.

Working with Gatekeepers:

Gatekeepers, which may include staff at a recruitment site or stakeholders off-site, can provide a researcher with access to potential participants as was highlighted in our experiences above. Although it is important to use gatekeepers during recruitment, they may facilitate or hinder recruitment of participants. Some of us experienced recruitment issues while working with the gatekeepers, including the time commitment of the gatekeepers, gatekeeper role, and participant perception of the gatekeepers.

Time commitment of the gatekeepers:

While gatekeepers do provide access to potential participants, their time commitment to a study may vary based on workload or perceived benefit to the target population (Wanat, 2008). Martinez collaborated with clinic staff to reach potential participants and garner interest in joining her study. The clinic staff was not paid to assist with recruitment. They informed clients about the study as their workload permitted, which slowed recruitment. To address this challenge, the clinic director paired Martinez with one clinic counselor who made phone calls to clients meeting the study criteria. The counselor conducted two 1-hour phone call sessions, which yielded recruitment of 14 of the 21 families. The counselor briefly introduced the study, and asked whether the client was open to hearing more about the study. Martinez contacted and scheduled interviews with interested participants who had spoken with the clinic counselors about the study. Using a gatekeeper trusted by the target population and supported by clinic leadership to directly support recruitment proved essential in the Martinez study.

Role of the gatekeepers:

While gatekeepers provide access to potential participants for a study, their role in a particular study may or may not be clear to themselves and the participants (Wanat, 2008). Brace implemented a study to examine the impact of a stealth nutrition intervention (Hekler, Gardner, & Robinson, 2010). Brace delivered the intervention through a novel college course that focused on macro-level influences on industrialized food production. The intent of the study was to promote healthy eating among college students without focusing on health outcomes. Brace collaborated with gatekeepers (academic advisors) at the university to recruit participants by advertising this novel course. Brace asked the advisors to promote the course to students during advisement. Confusion arose among the advisors whether the course was actually a new course or an existing course within the university. This may have impacted recruitment because other academic advisors may have disregarded the promotion without forwarding it to students. To address this issue, Brace sent another email to the academic advisors to clarify that the course was new. Some of the academic advisors promoted the course to their students. However, the initial confusion may have resulted in some advisors ignoring the clarifying email thus not promoting the class to their students.

Participant perception of gatekeeper:

Gatekeepers can provide researchers with access to participants. Although participants generally trust gatekeepers, in certain instances based on the gatekeeper/participant relationship, participants may feel coerced to participate in a study. One concern when working closely with schools during recruitment is the potential for coercion when researching children. Christiana obtained minor assent from students at the beginning of the interview by asking participants to sign a form with age-appropriate language. While obtaining minor assent presented no difficulties, there were concerns that coercion may have been a factor during this aspect of recruitment. Staff in the main office called potential participants to the conference room to meet with Christiana. Some participants asked him if they were in trouble when they arrived. To overcome this challenge, Christiana immediately reassured the participants they were not in trouble. Although Christiana tried to reassure the participants, the initial anxiety among participants may have altered their decision to participate in the study.

Additional Recruitment Issues

Additional recruitment issues that were not grouped into any of the categories above included participant expectations about the study and location to interview participants.

Participant expectations:

The time commitment or amount of work required to participate in a study can vary widely. Finding potential participants while they are at work or occupied with another activity makes it hard for those interested to participate to enroll in a study. Only two of us reported experiencing slow recruitment because of participant perceptions or expectations of the study. Brace recruited participants to enroll in a novel 15-week course. The course syllabus included an extensive reading list that students had to complete as part of the course. Brace sent the reading list via email to enrolled participants so that they could begin purchasing the required books before the semester commenced. Enrollment in the course

dropped by 20% after Brace sent the email about the requirements. At the end of the semester, Brace interviewed participants to assess how to increase participation for future classes. Recommendations included not sending out the syllabus in advance and only sending out a portion of the reading list. The perceived high workload of the course made students hesitant to participate in the study.

The Namageyo-Funa study experienced recruitment challenges because of the time commitment. The Namageyo-Funa study required a 60-90 minute time commitment. Participants could enroll only after they had received care from the clinic. Clinic appointments for participants, however, would last between 2-4 hours. Participants who were initially interested in the study were then too exhausted to commit an additional hour of their time to participate in the study after their appointment. To address this issue, Namageyo-Funa scheduled participant recruitment to days and times when the clinic scheduled many patients. Having many patients meant that clinic staff had limited time with potential participants to ensure all patients in the clinic received care. With a shorter duration in the clinic visit, potential participants committed time to the study.

Interview location:

The interview location can impact recruitment (Elwood, & Martin, 2004). Participants are less likely to enroll in a research study if the location is not convenient. Researchers may have limited access to locations for interviews, which was the case in the Fowles' study. Fowles planned to interview participants in private study rooms within public libraries close to recruitment sites. Fowles encountered several challenges in using the library, which included the library hours of operation, policies to reserve private study rooms in advance, and the limited time allowed to occupy study rooms. To overcome this obstacle, Fowles contacted local businesses owners including barbershops, gyms, and housing facilities to ask for permission to conduct interviews in a private, noiseless room within their facility. The business owners accommodated the request, allowing Fowles access to a private space to interview participants.

Recommendations

Based upon our experiences with the recruitment process during our dissertation research, we present several recommendations for novice researchers. We propose the following:

- 1) collaborate with gatekeepers trusted by participants;
- 2) use additional recruitment tools; and
- 3) understand the target population when planning a research study.

Collaborate with gatekeepers trusted by participants:

Novice researchers may experience difficulty accessing participants for qualitative research studies depending on the target population (Moralez, Rao, Livaudis, & Thompson, 2012; Svensson, Ramirez, Peres, Barnett, & Claudio, 2012). Gatekeeper and administrator support builds trust and credibility with participants and may facilitate recruitment (Eide et al, 2005; Morrison et al., 2012; Porter et al, 2000; Wolfenden, Kypri, Freund, & Hodder, 2009). We recommend that novice researchers strategically collaborate with gatekeepers and those trusted by potential participants.

Aside from having the gatekeepers provide access to the population, novice researchers should clarify the study and the gatekeeper roles and expectations. We reported this recommendation in the Martinez, Namageyo-Funa, and Rimando studies in which they collaborated with staff at the clinics to recruit participants. In these studies, interaction with the clinic staff built trust, increased access, provided an interview location, and allowed them to refine their research approach as appropriate based on information learned about participants. Christiana and Brace also used this approach in an academic setting. They collaborated with the school administrators, which provided access to potential participants.

Use additional recruitment tools:

Novice researchers may experience difficulty implementing an initial recruitment strategy and may need to include additional tools to facilitate recruitment. More than half of our studies began with one recruitment strategy. The use of one recruitment tool resulted in challenges to reach an adequate sample in a short time frame. Based on our experiences, we recommend that novice researchers incorporate more than one tool to recruit participants.

Novice researchers should consider using proactive recruitment tools for hard-to-reach participants. Proactive recruitment tools may include constant contact, such as sending follow-up emails, phone calls, or face-to-face contact with participants. Rimando incorporated face-to-face recruitment, which allowed her to greet potential participants in a friendly manner, ease fears, and answer questions about the study. Namageyo-Funa's population had low literacy levels, which required her to read the flyers to potential participants. Sealy added radio and television interviews to her recruitment plan to increase awareness of her study. Fowles added a recruitment team who wore uniforms that were printed with recruitment messages promoting inquiry into her study. Brace enlisted the help of academic advisors to advertise the novel course to students.

Understand the target population:

Understanding your target population is crucial during the recruitment of public health qualitative research (Felsen et al., 2010; Renert et al., 2013). Successful recruitment strategies for one group of participants may not work for other participants when there are differences in education levels, cultural heritage, and values. Examples include identifying the sensitivity of a topic to your target population and health literacy issues. It is important for researchers to be cognizant of the context of participants. The Sealy and Fowles studies encountered challenges with their participants' perception of the sensitive topics of cervical cancer and HIV testing. Furthermore, Davis and Rimando encountered challenges with low "health literacy" in their target populations while Namageyo-Funa encountered low "literacy" levels. Based upon our recruitment experiences, we recommend novice researchers make an effort to understand the characteristics of their target population such as sensitivity to topics, cultural background, and reading and education levels.

Conclusions

The challenges and successes of recruiting participants in research studies focused on health have continued over time. We encountered recruitment challenges and successes similar to those reported elsewhere by researchers (Felsen et al., 2010; Jones et al., 2009; Morrison et al., 2012; Renert et al., 2013; Spratling, 2012). Our recruitment challenges present several opportunities for novice researchers recruiting a similar sample of participants. Novice researchers can learn to build trust with participants and gatekeepers in

future qualitative research studies. While it is important to learn from other researchers' recruitment challenges in a variety of settings and their successful recruitment strategies (Felsen et al., 2010; Miller, McKeever, & Coyte, 2003), it is important for novice researchers to question why these recruitment challenges continue to exist and apply these lessons to their own participant recruitment.

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