

*Presentation*  
*NHS research*

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**Julie Wray:**

Julie has many years experience of teaching nursing, working with young people and undertaking healthcare research. In particular, her research work in reproductive health, sexual health and screening has been participatory and inclusive. She is committed to public involvement in healthcare and research. Recently she became a Voice for breast cancer care.

*Theme:*

**Experiences of involvement**

*Title:*

Muddling Through – Tensions and Vulnerabilities in doing Collaborative Health Research

*Summary*

In this presentation I will explore some of the challenges experienced in doing collaborative health research with 'user' groups. From my perspective power struggles, conundrums and defensive behaviours can be common features in collaborative research. Communication can breakdown between people doing research and there can be a mismatch between service users and professionals. I will describe, with examples from two qualitative studies, some tensions and challenges that can occur. My goal in doing collaborative research is to help the process, establish and maintain a public image of confidence and self-assertiveness in a respectful and collaborative manner while at the same time deal with vulnerabilities in these situations. Additionally, issues in order to nurture researcher relationships with stakeholders and participants will be debated.

*Hope that people will learn*

This presentation will provide information and strategies to recognise and creatively manage a range of interpersonal issues in collaborative qualitative research.

*Issues that I will raise for discussion*

Good interpersonal relationships are important to all researchers irrespective of their experience or nature of the research. I hope to be able to discuss some strategies that can work. For example, I will explain the acronym RUIN\* as one way to add value and respect within the team.

(\*RUIN R rude, U unrealistic, I interfere, N negative)

Ref: J (2004) Muddling through – tensions and vulnerabilities in doing collaborative health care research. Paper accepted at the 10<sup>th</sup> Qualitative Health Research conference. Banff Canada April 2004 – *did not attend*.

Consulting in a non tokenistic way with end users, especially children and young people, can be challenging. It requires new ways of working. Moreover, meaningful consultation sometimes uncovers differences between the experiences and views of young people and those of parents and professionals and this can lead to conflict and difficulties regarding how best to address issues.

However, done effectively consultation often show lots of consistency between young people's views and those of professionals. The broader policy approach to health and related issues is well understood by many young people. For example in a study by Barnardo's in 2001, found that when asked about threats to their health and things that improve wellbeing young people talk about cutting down on risky behaviour but also on having better relationships, more money and safer communities.

The sophisticated way that many young people understand what impacts upon their sexual health should be no surprise given that they are expert witnesses on their own lives and on how things could be different.