An intensely sympathetic awareness: Experiential similarity and cultural norms as means for gaining older African Americans’ trust of scientific research

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Abstract

Well-known trust-building methods are routinely used to recruit and retain older African Americans into scientific research studies, yet the quandary over how to overcome this group’s hesitance to participate in research remains. We present two innovative and testable methods for resolving the dilemma around increasing older African Americans’ participation in scientific research studies. Certain specific and meaningful experiential similarities between the primary researcher and the participants, as well as clear recognition of the elders’ worth and dignity, improved older African Americans’ willingness to adhere to a rigorous research design. Steps taken in an intervention study produced a potentially replicable strategy for achieving strong results in recruitment, retention and engagement of this population over three waves of assessment. Sixty-two (n = 62) older African Americans were randomized to treatment and control conditions of a reminiscence intervention. Sensitivity to an African-American cultural form of respect for elders (recognition of worth and dignity), and intersections between the lived experience of the researcher and participants helped dispel this population’s well-documented distrust of scientific research. Results suggest that intentional efforts to honor the worth and dignity of elders through high level hospitality and highlighting meaningful experiential similarities between the researcher and the participants can improve recruitment and retention results. Experiential similarities, in particular, may prove more useful to recruitment and retention than structural similarities such as age, race, or gender, which may not in themselves result in the trust experiential similarities elicit.

Keywords

Recruitment and retention; trust; older African American; experiential similarity; hospitality

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Introduction

It has been difficult to convince older African Americans to participate in scientific research studies despite health disparities across most health indicators when compared to other older adults in the U.S. (Rooks and Whitfield, 2004; Pinn, 2000; Belgrave & Allison, 2009). The issue of trust is central to this difficulty and has long pervaded the literature on recruiting and retaining older African Americans (Braunstein, Sherber, Schulman, Ding & Powe, 2008; Byrd et al., 2011; Curry & Jackson, 2003; Dennis & Neese, 2000; Dilworth-Anderson, 2011; Freimuth et al., 2001; Gonzalez, Gardner & Murasko, 2007; Levkoff & Sanchez, 2003; McHenry, Insel, Einstein, Vidrine, Koerner, Morrow, 2012; Sinclair et al., 2000; Yancey, Ortega, & Kumanyika, 2006). Among other factors, the distrust of scientific research is influenced by memory of the Tuskegee Experiment. In a study of 179 adults in Detroit (91 of whom were African American), Shavers, Lynch & Burmeister (2000) found that 81% of the African Americans had knowledge of the Tuskegee Experiment and that knowledge of the experiment resulted in distrust of scientific research. Forty-six percent (46%) of the African Americans indicated that this knowledge directly influences their willingness to participate in scientific research (see also Freimuth, Quinn, Thomas, Cole, Zook, & Duncan, 2001; Shavers, Lynch, & Burmeister, 2002).

The strength of the distrust is compounded by current suspicion of similar mistreatment (Corbie-Smith, Thomas, Williams & Moody-Ayers 1999). In a study of 1440 randomly selected patients from 13 Maryland medical clinics, African American participants were significantly more likely than white participants to report that doctors would use them as guinea pigs without their consent; prescribe medications as a way of experimenting on people without their knowledge; ask them to participate in research even if it would harm them; and that doctors had previously experimented on them without their consent (Braunstein, Sherber, Schulman, Ding & Powe, 2008), even after controlling for age, socio-economic status, sex, and health risk status.

The National Institutes of Health (NIH) has mandated the inclusion of women and ethnic minorities in all NIH-funded research projects involving human participants (Arean, Alvidrez, Nery, Estes, & Linkins 2003; Curry & Jackson 2003; Dennis & Neese 2000; Reed, Foley, Hatch, & Mutran, 2003). The U.S. Department of Health and Human Services and the Resource Centers for Minority Aging Research also enjoin researchers to improve the science of including older African Americans in scientific research studies (Chadiha et al., 2011; Sood & Stahl 2011), thus researchers must identify strategies that settle this issue of trust if they are to consistently attract and engage older African American participants. Research has shown that trust of people in general as well as trust toward specific individuals increases among the aged of all ethnic groups worldwide (Li & Fung, 2013), so this group is likely to be inherently responsive to good-faith efforts.

In response to this pressing need, this article details an innovative method for enhancing trust among respondents in a community-research partnership. It describes the application of known trust-building recruitment and retention strategies, and poses the question whether clear recognition of African American elders’ worth and dignity and specific and meaningful experiential similarities between the researcher and the participants enhanced
participants’ trust in the research project. Process evaluation activities indicated that high-touch hospitality (fitting and prompt responses to needs relevant to the research) and certain experiential similarities may have improved older African Americans’ buy-in to a rigorous research design, and revealed key elements in a replicable strategy for achieving excellent results in recruitment, retention and engagement of this population over at least three waves of assessment.

Methods

The recruitment and retention insights described in this article emerged from the Harlem Life Review & Health in Later Life Study (HLRHLL) conducted in 2005. Participants were older adults receiving services at a senior center that is part of the Central Harlem Senior Center Coalition (CHSCC). CHSCC was established in 1973 by a concerned citizens committee composed of local neighborhood residents of Harlem, New York City (NYC). Colleagues at Weill Cornell Medical College and at the Cornell Institute for Translational Research on Aging (CITRA) who were already engaged in community-based research at CHSCC and had long-term relationships with NYC center directors facilitated the initial introduction. The CHSCC Directors and Advisory Committee approved the study after a detailed review and discussion of the intervention protocol. The Cornell University Institutional Review Board also approved the study. Eligible participants were 60 years of age or older and English speaking with no significant symptoms of cognitive, hearing, or visual impairment. Screening was conducted by the Center Program Director and the Center social worker, both of whom knew each center member well.

The mean age of participants was 72 years (SD = 8). Ninety percent (90%) of the participants were female. All the participants were of African heritage (N = 2 Caribbean American). Forty-three percent (43%) of the participants were widowed; 39% were single; 10% were married. Twenty-five percent (25%) of the participants completed high school or earned a GED. Thirty-nine percent (39%) completed some college or obtained an associates or vocational degree. Sixteen percent (16%) earned a bachelor’s degree, and 11% earned a master’s degree.

Following randomization to treatment and waitlist control conditions, participants completed a pre-test and then met for eight (8) consecutive weekly two-hour sessions of deeply engaging oral reminiscence work. Each received a $10 stipend, and healthy refreshments were served each session. With participants’ consent, the sessions were audio-recorded and transcribed. A structured reminiscence protocol was used, and questions posed were open-ended. Participants took turns responding orally to the questions, followed by open-ended and fluid discussion. (Detailed information on the intervention is available from the first author.) Participants completed post-tests immediately following the intervention and one year later.

Applying known trust-building strategies

There is a growing inventory of strategies and recommendations for recruiting and retaining older African Americans in research trials, and the successful strategies address the trust
issue, whether explicitly or implicitly (Dilworth-Anderson, 2011). These approaches include sanctioning or gaining the support of formal or informal leaders (Dennis & Neese, 2000); clarifying and emphasizing the benefits of participation; clarifying and addressing cultural barriers to participation; providing feedback to the community following the completion of a study, (Arean, Alvidrez, Nery, Estes, & Linkins 2003; Arean & Callagher-Thompson, 1996); increasing face-to-face interaction (Gilliss et al., 2001, Dennis & Neese, 2000); retaining the same interviewer across all assessments (Thompson & Gallagher, 1984); providing incentives (small stipends and honorariums); making participation as convenient as possible (Arean & Callagher-Thompson, 1996); using age-sensitive recruitment and study materials (Lefler, 2009); and race-matching, which seems particularly intuitive for trust-building in this instance, and is detected in most studies of recruitment and retention of older African Americans. We applied these standard strategies and recommendations in the present study as follows.

Following a CHSCC advisory board meeting where board members discussed the protocol in great detail, the Center Executive Director invited the primary researcher (PR) to present information about the study at a monthly birthday celebration. Printed invitations to participate were handed out as Center members entered, providing an opportunity to make eye contact with each member individually and to increase their interest in the PR’s presentation. Immediate response capacity was made possible by including a detachable slip of paper on the back of each printed invitation. On the detachable slip, members could indicate their interest in participating in the study and provide their contact information. This point-of-contact slip of paper helped the PR to obtain sufficient recruits on a single day (convenience).

The Center Director introduced the PR to the group of Senior Center members who were present. She emphasized the PR’s status as an African-American researcher whom they should be proud to support, and members demonstrated great pride in this (race-matching; sanctioning). After wishing the celebrants a happy birthday and introducing herself, the PR went on to tell them of the benefits of integrative reminiscence work (face-to-face). The PR also described the role of research in bringing evidence-based interventions to communities (benefits). The PR gave the details of the research design and protocol, including completing the questionnaires, then opened a question and answer session (clarifying and emphasizing benefits). A weekly stipend was paid to those who participated in the study and healthy refreshments were provided each morning (incentives). The same interviewer administered the baseline and follow-up assessments, and all assessments were printed using a large and bold font size (age-sensitive recruitment and study materials).

These known trust-building methods are routinely used to recruit and retain older African Americans into scientific research studies, yet the quandary over how to insure this groups’ consistent participation remains. For this reason, in the present study we implemented two additional procedures to encourage participation in the study. First, mutual awareness of shared experiences can create a resonance between the researcher and participants. Second, the practice of recognizing older African American’s worth and dignity can generate a natural and felt appreciation from participants whose history in the US may have heightened their tendency to notice respectful treatment. We will detail these two additions to standard
recruitment procedures as methods for resolving the dilemma around recruiting (and retaining) older African Americans into scientific research studies.

A strategy for achieving strong results in recruiting, retaining and engaging older African Americans in scientific studies

Steps taken in this intervention study produced an innovative strategy that achieved unusually strong results in recruitment, retention and engagement of older African Americans over three waves of assessment. In addition to using known trust-building recruitment and retention methods, this strategy requires the researcher 1) to demonstrate honor and respect toward the elders through high-level hospitality; and 2) to highlight experiential similarities between the researcher (or the research team) and participants. The method requires the researcher to adapt to the pace of life lived by older people when working with them, and to determine the ways in which the researcher and participants are living out a connected story.

Honoring African American elders’ dignity through high-touch hospitality

The innovative approach employed in this study to recruit and retain participants is grounded in both the general African cultural heritage of respect for elders (Beugr’e & Offodile, 2001; Johnson, C., 1995; McAuley, 2001; Myers, L., 1993; Schiele, J., 2000) and the more specific practice of recognizing older African American’s worth and dignity given their long history of being dishonored in the US. In African and African diasporic cultures, age is traditionally perceived as strongly correlated with wisdom. Age has been the observable referent for a long life of experience and consequent knowledge (Beugr’e & Offodile, 2001), and older African Americans are likely to retain this perspective.

Most cultures likely demonstrate some form of respect for elders in the society, and the form of respect practiced is naturally context dependent (Sung, K., 2001). In the case of African American elders, the concept of ‘dignity’ might best capture the cultural form of respect practiced and appreciated. The US Civil Rights Movement emerged as a demand for respect for the dignity and humanity of African Americans, and many older African Americans were an integral part of that movement (Frame, Wiggins, & Braun, 1996; Morris, A., 1984). Their long history of being dishonored and disrespected by the majority culture makes this a particularly sensitive issue. Thus a position of deep respect for older African Americans that preserves their dignity is likely to be noted and appreciated.

This approach is also grounded in evidence-based practices emerging from research on hospitality in service industries. Hospitality research emphasizes a responsive service delivery model that engages older consumers, and intentionally reinforces the dignity and worth of older people and their decisions. Relevant to the approach taken in this project, hospitality research suggests that the quality of clients’ experiences is heavily determined by their emotional response to a service or program, rather than simply a rational calculation of costs and benefits (Pullman & Gross, 2003; White & Yu, 2005). In fact, client interest and loyalty are maximized when clients experience the emotion of delight or a similar positive affect (Victanno, Verma, Plaschka, & Dev, 2005). Consistent with African cultural heritage
and with hospitality research, the PR respected the dignity of the older adults in the study, was highly responsive, and fostered positive emotions at various opportunities throughout the project.

Specifically, in planning the initial encounter with potential participants, the PR designed and printed inexpensive but aesthetically pleasing invitations designed to appeal to an older person. The breads and fruits for the morning refreshments were selected from a local bakery and grocer all the participants regarded highly; indeed, familiarity with the source of refreshments was commented on positively by participants. The amount of time and thought invested in preparing for the encounter likely made participants feel appreciated as most people do when they receive a special invitation or are treated as valued guests.

The hospitality approach involved prompt responsiveness to pragmatic problems relevant to the study. When a new level of parking lot surveillance was instituted, unexpected parking tickets were paid by the PR. When a participant took a taxi in order not to miss a session, the taxi fare was also paid. One participant asked the PR for feedback on a model she developed for engaging older adults in meaningful conversation. The PR discussed the participant’s model with her over lunch. These and other more pragmatic activities served to enact the felt connection established by other known trust building strategies. Additionally, each month of the year between follow-ups, participants were mailed birthday cards, and all received cards during the holiday season. At the conclusion of the study, a duplicate poster presented to the Annual Meeting of the Gerontological Society of America was presented at the center. Through these activities, the researcher joined the participants at the level of their lived experience and provided concrete acknowledgement of their importance.

Maximizing trust through experiential similarity

The racial similarity and the history and culture shared by the primary researcher and participants were unexpectedly superseded by quite specific and particularly meaningful experiential similarities between them. Although all the strategies previously described likely helped to gain participants’ trust, knowledge of experiential similarity between the researcher and participants clearly cemented it. Studies have shown that experiential similarity (having had a similar problem or condition) is a major predictor of who will be supportive or non-supportive in a stressful situation (Pillemer, & Suitor, 1996). Further, support from experientially similar others is more effective than support from persons who have not had the same experience (Gottlieb, 1985). These studies suggest that those who have experienced a similar problem or condition can usually be counted on when it matters, and that shared experience justifies trust.

Sabir, Pillemer, Suitor, & Patterson (2003) distinguished between the more structural similarities of age, education, and gender and experiential similarity. They found that rather than these structural similarities or even psychological similarity, having shared or currently sharing a similar experience is what predicts successful support relationships. In the present study, part of the PR’s personal life story was shared during recruitment to clarify the personal relevance of the research project. The story also revealed particular experiential similarities between the PR and participants. An abridged attempt to capture the quality of the revelation follows:
"The title Dr. precedes my name these days but it’s been a long journey to here, and I want to tell you a little of how I got to this name and to this work by reading you a few vignettes from my life story." This introduction gained the audience’s attention. “My mother named me after a river she discovered when my father was in the military. My mother is now mentally ill and so it means a lot to me that she remembers this.” The audience came to full and undivided attention. “…We were one of the poorest families in our small Alabama town.” Heads nodded in recognition and resonance encouraging the PR to go on. “…I was a single mother of a two-year old when…..” The PR sensed doubts dissipate at this point and herself recognized as authentic.

“The exercise of working through these difficulties in my life gave me a kind of release and clarity and stability I didn’t have before, and I became deeply interested in the life story. I returned to school at age 38, and here I am now at age 46 with a Ph.D. from…..” A full sonorous applause erupts from the audience, catching the PR by surprise.

It became increasingly clear over the ensuing weeks that the researcher’s life story overlapped with those of the participants in important ways, revealing specific experiential similarities in several life domains. This was a rigorous randomized controlled design with a complex and demanding protocol. It required substantial time and effort over an eight week period, and deeply engaging exercises for two hours of each of the eight weeks. Such demands might have posed a barrier to participation over the course of the study, yet participation, engagement and commitment remained high throughout. We believe that specific and meaningful experiential similarities between the researcher and participants may have improved participants’ buy-in to the rigorous research design, and accidentally produced a replicable strategy for ameliorating the problem of distrust of research among older African Americans.

**Meaningful experiential similarities**

Over the ensuing weeks, it surfaced that practically all of the participants moved to New York City from the deep south of the United States during the Great Migration of the 1930s–40s in an attempt to escape dire socio-economic conditions and to improve life chances for their families. During recruitment, the researcher spoke of journeying to New York by way of Atlanta from poverty in Southern Alabama in the 1970s for the same reasons, though the socio-political circumstances had changed somewhat. The PR’s story of her own journey resonated with the participants deeply, both in terms of the difficulties in the experience and in terms of their long-held hopes for their children and their children’s generation.

Sixty-six percent (66%) of the older adult participants in this study attended at least some college, and 11% completed at least a master’s degree. These statistics portray the high value placed on education by these participants, and their use of education to improve their socioeconomic status. Education was the singularly trusted way to circumvent the employment and income restrictions placed on African Americans in US society. During recruitment, the researcher spoke of eventually earning a Ph.D. from an Ivy League
institution, a statement that elicited full, sonorous, and unanticipated applause from the audience.

Stories during the sessions revealed participants’ struggles in surmounting a range of challenges in obtaining their education, in raising their children, in locating meaningful employment and satisfactory living circumstances, and more. Their satisfaction in finally making their way to meaningful occupations and meaningful lives was palpable. During recruitment, the PR spoke of similar struggles, of a return to college at age 38 to pursue the terminal degree, and of gaining employment in the field of work she finds the most meaningful. The efforts and sacrifices these achievements required was known first-hand by these participants, and this shared knowledge and experience generated strong resonance.

Finally, although it might be difficult to convey the subtle familiarity experienced between the PR and participants who, except for two, were all direct descendants of Africans enslaved on US soil, there is sufficient empirical evidence of significant differences in income, health, and assimilation among various African heritage groups in the US to justify this similarity serving as a notable element of the project’s success (Dodoo, 1997; Read, J. 2005; Ogbu, 1992, 1994). An intensely sympathetic awareness (Trevarthen & Aitken, 2001) that the PR attributes partly to this shared history underlaid all the group’s interactions.

The PR and participants all migrated from the Southern United States for economic reasons; valued and used education to improve socio-economic circumstances; surmounted similar obstacles in finally achieving a meaningful life; and shared a similar African-American heritage. Out of these shared experiences emerged a certain level of familiarity. We believe this deep sense of familiarity helped to circumvent the distrust that may have arisen at the beginning of this study, for as the data below shows, recruitment, participation, and engagement proceeded seamlessly and at high levels.

Results

Recruitment

Recruitment of a sufficient number of participants for research studies is often lengthy, time consuming, and expensive (Rowland, Fisher, Green, Dunn, Pickering, & Li, 2004). This was not the case in the present study. After the presentation, individuals who were interested were invited to register for the project. Registration took place with senior center staff who screened out those who were ineligible. The total number of participants sought for the study was (64) sixty-four. Seventy-four (74) eligible Center members expressed interest. Eleven of the 74 did not respond to telephone calls, so there was no further contact with them. One refused because she would be out of town on several of the session dates. Sixty-two participants completed the baseline assessment at Time One. Since we do not know how many Center members received information about the study, either at the Center presentation or from board members who may have told Center members about the study, we cannot calculate the actual recruitment rate; however, we wish to note that all participants in the study were successfully enrolled on the day of the presentation. See Table 1.
Retention

Attrition in longitudinal studies is quite common (Little, 1995), however, in the present study the retention rate remained high throughout. At Time Two, immediately following the intervention, 59 of the original 62 participants completed the assessment for a 95% retention rate. One participant was too ill to participate; one dropped out after attending two sessions; and one stopped responding after completing the first assessment.

At Time Three, six months post-intervention, all living participants completed the assessment at a dinner meeting arranged by the PR for the participants and prepared by a known caterer from the community. Fifty-six (56) of the 59 completing at time two completed the final assessment, for a 90% retention rate. All missing participants were deceased, thus all who could attend did attend. (See Table 1.) Although a systematic comparison with retention rates in similar studies is beyond the scope of this article, we would note that retention is typically substantially lower in other studies, despite their intensive use of conventional methods to promote retention of older African Americans (cf., Hudson, Leventhal, Contrada, Leventhal, and Brownlee, 2000).

Participation and Engagement

While many studies address participant retention across waves of assessment, few speak to the quality of participant engagement in the research project. Participants demonstrated extraordinary commitment to the present study. Attendance at the weekly sessions remained consistently high throughout the eight weeks (See Table 2). Only one person was absent more than once, and she was absent only twice. In most cases, absences were preceded by advanced notice of a doctor’s appointment. Participants remained fully engaged in reviewing their life narratives throughout the eight weeks, and several have maintained contact since. In sum, recruitment, retention, and engagement were highly successful in this program, despite a lengthy and demanding protocol.

Replicability of the Approach

An important limitation of our approach to enhanced recruitment and retention of participants is that it was developed in a single study under specific conditions. The investigator conducting the study came from a very similar background as the participants, not only in terms of race, but also in terms of important developmental life experiences. The question thus arises: to what extent can this successful approach be used by other researchers? How likely are study participants to be this homogenous among themselves and with the researcher? The principle value of experiential similarity as a cue for trust is already established, thus the intentional application of experiential similarity between researcher and participants can in fact be useful for recruitment and retention purposes. Homogeneity among participants is typical in intervention studies where participants are recruited based on some shared condition such as diabetes or depression or social isolation. Homogeneity between researcher and participants can be explored and highlighted in a number of ways.

Although not articulated as we have done in the present article, emphasis on experiential similarity as a method for accessing and understanding research participants has a history in qualitative sociology. An example is the work of Irving Zola, a prominent medical
sociologist, who after years of denying his own disability (wearing a leg brace as a result of polio in childhood) embraced it as a way of approaching research on disabled persons. In one major study of a community of persons with disabilities in the Netherlands, Zola returned to the use of a wheelchair to further emphasize his similarity to the individuals he was studying. In a method he termed “socio-autobiography,” he merged his role as social scientific observer with his experiential similarity to the observed, allowing him to gain participants’ trust to an unusual degree (Williams, 1996; Zola, 1982). Thus this method can be replicated by researchers who are willing to identify the intersections. When the points in common between researcher and participants are not as apparent, we recommend they be actively sought and highlighted as it might prove advantageous for recruitment, retention, and engagement efforts.

One way might be to broaden the time frame within which a similarity might be found, particularly in the case of large scale studies. For example, although a 25-year old graduate student researcher was not a World War II veteran, perhaps her grandfather or uncle was. A small amount of historical research plus the grandfather’s or uncle’s story might produce anecdotes and lessons around which to connect with participants in writing or in person. A shared experience might be losses due to war, both of which the young graduate student and the WWII veteran might have experienced directly or indirectly, although one might assume that the more direct the similar experience, the more intense the sympathetic awareness. The shared similarity might be time spent in or knowledge of a certain geographic region of the world.

Another method is to focus on experiences that reach the threshold of ‘meaningful’ for all persons, though cultural variations would apply. Lifespan psychologists have identified a limited number of core human motivations or drivers for choices and actions. Among these are the drives to survive, to remain safe, to connect, to clarify one’s own identity, and the drive to express one’s identity in ways useful to society (Maslow, 1954; Erikson, 1950). According to lifespan psychology, at any given time and in one way or another, each person is engaged in one of these. The researcher might ascertain which is most prevalent among potential participants. In the present study, resonance was experienced around intense sacrifice for the opportunity to express identity. The shared resonance was ultimately about the longing, in Wakefield’s (1998) terms, “to externalize the self” and the eventual satisfaction of that longing. In the preceding example, both the graduate student and the World War II veteran would have experienced one or all of these motivators.

A third way to identify similar experiences between the researcher and participants is to tap the similarity that brings the research group together. In intervention studies, groups of research participants are assembled because they share some issue of concern in common, and it is not difficult to find researchers who connect to the problem under study on a personal level. In a study of diabetes, for example, all the participants might have engaged in the health behaviors leading to diabetes. It could be that many people have to work to control these behaviors, including those who have not developed diabetes. Perhaps a similarity between the researcher and the participants could be found around efforts to control those behaviors, particularly within cultures where the behaviors are normalized. To provide another example, similarity between researcher and participants is not unusual in...
caregiving research, as many adults have had at least some experience assisting an older relative. In each case, the researcher could employ experiential similarity as a mode of increasing participant engagement in the project.

We acknowledge that the intensive level of experiential similarity with participants described in this article is not possible in all studies. However, intersections between the lived experiences of the researcher and participants are always possible to some degree, due to the nature of human experience. Although a researcher may not have experienced a “Great Migration” from the South to the North, he or she may have experienced similar upheaval and can refer to that as a point in common with research participants.

An important question is how the techniques we propose might affect the objective nature of the research design. It is important to distinguish between the use of experiential similarity in the recruitment and retention process, as opposed to the research design and data collection process. Indeed, the present research was a controlled intervention study, and therefore introducing subjectivity into the research activities would not have been desirable. Our point is that the use of experiential similarity in the recruitment process is a useful method for establishing trust and assurance that the research will be conducted in a mutually rewarding and sensitive fashion. Based on this distinction, we do not view using similarity between researcher and subjects in recruitment efforts as affecting the objectivity of the research design itself. In addition, except for the demographics, the assessment instrument for the study was comprised of quantitative measures of self-reported health, answers to which seem unlikely to be affected by the personalized approach to recruitment and retention.

It would not be unreasonable for readers to wonder whether curtailment of researcher curiosity is implied in this suggested use of similarity between the researcher and participants. We would note that researchers would not be restricted to conducting intervention research only on populations to whom they are similar, of course. The older adults’ high-level responsiveness to our recruitment and retention efforts justifies our interest in exploring the potential value of experiential similarity; however, the experiential similarity need not be solely between the primary researcher and the participants. Given that many projects are now conducted by research teams, our experience suggests that including one or more experientially similar members on the team can be a worthwhile investment. Such a “Recruitment and Retention Specialist” would appropriately take primary responsibility for hospitality, as he or she will have been selected to flexibly and appropriately respond to participants given their shared similarity - leaving all the researchers freer to the world of research exploration and discovery and protected from over-extension.

Most importantly, the question whether this is a replicable strategy is an empirical one and generates testable hypotheses. Given NIH’s call to improve the science of including women and minorities in intervention studies, we would argue that studies that test the effectiveness of various methods are needed. The present study suggests that experiential similarity and hospitality increases recruitment, retention, and engagement, but these should be replicated in future research. We would encourage further research on questions such as these:
• Including principles of hospitality and respect with other known methods for recruitment and retention of older African Americans will improve the success of recruitment and retention efforts.

• Explicitly emphasizing similarities between researcher and participants will improve recruitment and retention of older African Americans.

• Including an experientially-similar individual on the research team (as described above) will improve the success of recruitment and retention of older African Americans.

Research along these lines can shed additional light on this type of enhanced recruitment and retention strategy and the degree to which investment in it achieves improved results.

Finally, it is important to consider whether the payment of a weekly $10 stipend played an overly influential role in the successful recruitment and retention of participants. Participants were retired older adults so even those receiving retirement benefits were likely living on a fixed income. Literature on the ethics of incentives suggests that small stipends such as this are common, and may influence the participation of low-income persons (Erlen, Sauder, & Mellors, 1999). The sample in this study was in general not impoverished. Although we do not have income data on the sample, education reflects socio-economic status and over two-thirds of the participants had attended some college. In addition, we selected a stipend level that was anticipated to be low enough not to dramatically affect participation. Although the stipend might have influenced the retention to some degree, the $10 stipend offered was relatively low compared to amounts offered in biomedical research in which retention rates are much lower than the present study, and not enough to justify participation after accounting for the cost of attendance.

Limitations and Conclusion

The methods we propose here are most appropriate for recruitment for intervention research, and less applicable for other research modes such as surveys. Given that recruitment for time-intensive intervention studies provides the most difficult recruitment challenges, we believe the findings are highly useful despite this limitation.

The study participants were recruited from a geographically restricted, well-known senior center in Harlem, NY. Additional experience with recruitment and retention based on hospitality and experiential similarity is necessary to determine that the approach works well in other geographical areas. In addition, the participants tended to be better educated than the general population of older African Americans (Administration on Aging, Department of Health and Human Services, 2013), which may have affected their participation. Finally, recruitment occurred in a senior center environment, which tends to attract more mobile and socially integrated older persons. The approach should be tested in projects in which older persons are recruited from the general community.

Unfortunately, information on the non-participants was not available. Despite these limitations, the very positive results in recruitment, retention, and engagement strongly suggest further expansion and evaluation of this model.
The high initial investment at the beginning of this study paid off extensively, not only in terms of successful recruitment, retention and engagement, but also in the ease of conducting future research studies at the CHSCC. The current study, conducted in 2005, established such a good working relationship with the center that it formed the basis for a major intervention study in arthritis pain management by other members of our research team (Chen, Reid, & Pillemer, 2013). Even as late as 2013, when the second author returned to interview center members for a different project, participants in the current study were still fondly referencing this project. The personal nature of the PR’s approach to recruitment, retention and engagement, as opposed to a more mechanistic approach, created a halo effect for future projects at the center.

The current study suggests that, in addition to trust generated by known trust-building strategies and the trust justified by research clearance through Institutional Review Boards, respect for the dignity of elderly African Americans can yield high dividends in terms of recruitment, retention, and engagement in scientific research efforts. Integrating the researcher’s own story with that of the participants might reduce the sense of distance between them and help to create a deep and mutual sense of familiarity. This sense of familiarity provides a basis for trust between the researcher and participants that serves recruitment and retention efforts.

Researchers’ clear demonstration of meaningful experiential similarity with potential participants, which suggests more than a merely superficial grasp of participant’s lived experience, might help to dispel older Africans’ distrust of scientific research, and improve both the quantity and quality of their participation in research studies. In all cases, experiential similarity would prove more personal and more meaningful than mere structural similarities, such as race or gender or education or age, none of which may in themselves justify the trust experiential similarity elicits.

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**Highlights**

- We present two new ways to attract older African American research participants.
- Experiential similarity increases trust and improves recruitment and retention.
- Recognizing elders’ worth and dignity improves recruitment, retention, & engagement.
### Table 1

Recruitment and Retention Over Three Waves of Assessment

<table>
<thead>
<tr>
<th>Wave</th>
<th>Total Participants Sought</th>
<th>Total Volunteers on first day</th>
<th>Unable to Contact/No Response</th>
<th>Refusals (out of town)</th>
<th>Total Completing Baseline</th>
</tr>
</thead>
<tbody>
<tr>
<td>Initial Contact</td>
<td></td>
<td>64</td>
<td>74</td>
<td>11</td>
<td>62</td>
</tr>
<tr>
<td>Time 2, Immediately Post-Intervention</td>
<td></td>
<td>59 (95%)</td>
<td>1</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Time 3, Six Months Post-Intervention</td>
<td></td>
<td>56 (90%)</td>
<td>3</td>
<td></td>
<td></td>
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</tbody>
</table>
Table 2

Attendance & Participation

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<tr>
<th>Week #</th>
<th>Attendance &amp; Participation</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>30</td>
</tr>
<tr>
<td>2</td>
<td>29</td>
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