
Tracking Homeless Women in Qualitative Longitudinal Research

Emma Williamson, Hilary Abrahams, Karen Morgan
and Ailsa Cameron

Senior Research Fellow, Centre for Gender and Violence Research, University of Bristol
Honorary Research Fellow, Centre for Gender and Violence Research, University of Bristol
Research Associate, Centre for Gender and Violence Research, University of Bristol
Senior Lecturer, Centre for Research in Health and Social Care, University of Bristol

› **Abstract_** *This paper looks at the use of 'tracking' within a longitudinal study concerned with the service use and needs of homeless women. By reflecting on the process in relation to both ethical and practical considerations, this paper suggests that the successful retention of participants in this study (58 percent), as well as the ability to know more about those who did not continue in the research, was the result of four key elements. These were: the relationship between the research team and participants; the relationship between the research team and services; the role of service user advisors; and the importance of recognising respectful values across the research and within the research team itself. This paper also considers how the issue of tracking within research, as well as participants' views on this process, can offer insights into the ways in which service providers might better explain and utilise information-sharing across different statutory and voluntary sector services.*

› **Key words_** *Homelessness, gender, tracking, qualitative longitudinal research*

Introduction

Research into homelessness in the UK and elsewhere has, in general, focused on a particular aspect of the experience of homelessness, such as sex work, substance abuse or involvement with the criminal justice system, and has provided a 'snapshot' of the situation at one moment in time (Steele *et al.*, 2003; Christensen *et al.*, 2005). More recently, the value of longitudinal research, i.e., following a cohort of service user participants over a prolonged period of time, has been recognised (Pickering *et al.*, 2003; Abrahams, 2010). This research method enables a greater understanding of the situations that can lead to an increased risk of homelessness and of the way in which some homeless individuals move into and out of homelessness (Bootsmiller *et al.*, 1998). Because research is being conducted over a long period of time, there can be an increased understanding of the chaotic nature of life on the streets and in hostels and a grasp of the factors that affect the extent to which participants are able to engage with services designed to assist them.

This paper outlines the approach to following a group of homeless women over a two-year period, and discusses the ethical, practical and methodological challenges involved. Results and recommendations from the findings of the research itself are available elsewhere (Abrahams *et al.*, 2013; Williamson *et al.*, 2013).

Longitudinal Research with Homeless Populations

This paper contributes to a body of research that has explored the methodological challenges of recruiting, following and maintaining long term contact with various different homeless communities. The literature on homelessness and longitudinal research includes a focus on women with a history of interpersonal domestic violence (Clough *et al.*, 2010); sexual assault survivors (Campbell *et al.*, 2011); homeless men and women with substance misuse (Scott *et al.*, 2005) or dual diagnosis issues (Bootsmiller *et al.*, 1998); and younger people at risk of homelessness with alcohol issues (Boys *et al.*, 2003). Much of the literature recognises that maintaining contact with homeless individuals over a period of time is both labour intensive and time consuming, requiring flexibility and perseverance (McNaughton, 2005). A creative and innovative approach (Nind *et al.*, 2013), as well as an understanding of the pressures that homeless people are subject to, are further factors in maintaining a high level of continued response and engagement with the researchers.

A number of consistent themes emerge in this literature relating to the different types of methodological approaches of the studies. Most refer to the importance of using a range of methods including: the use of participant incentives at varying levels; a mixture of phone calls and letters; interim contacts with participants to maintain contact; and collecting a range of possible third party individual contacts,

both family and professional, through whom tracking activities can take place. In terms of the tracking process, the literature appears to fall within two camps: those articles which concentrate on the ways to improve attrition rates and those which focus on the ethical issues inherent in this process.

Additional factors that emerge within the research in terms of increasing the possibility of keeping track of homeless people over time include: focusing on the competence, skills and training of the researcher in order to ensure relationships of trust with participants (Conover *et al.*, 1997; Bootsmiller *et al.*, 1998); the use of 'searchers' – other homeless people paid to track those whom researchers are finding it difficult to find (Sosin *et al.*, 1990; Boys *et al.*, 2000); service user advisors involved in the tracking process to advise researchers on where they might access missing participants (Clough *et al.*, 2010); and the use of special cards, birthday and Christmas for example, to further enhance the relationship between the research team and participants (Bootsmiller *et al.*, 1998). One study (Conover *et al.*, 1997) also advocated the use of a research office, where participants could come, contact could be maintained and incentives could be given for the participants to return.

Not all of the studies address the ethical issues inherent in 'tracking' and instead are more focused on attrition rates (Ullman, 2011; North *et al.*, 2012). Research on this topic also refers to the concept of 'assertive tracking' (Caton *et al.*, 2005), which recognises that due to life circumstances this population may be less stable and more difficult to find using conventional research methods than the wider population.

In an article focused exclusively on the ethical issues of conducting longitudinal research in this area, Scott and White (2005) identify the key ethical concerns that arise in the course of tracking this group of service users. These were: informed consent; confidentiality; relationship boundaries between participant and researcher; duty to warn and break confidentiality; autonomy and privacy; the ethics of incentives; and finally, data integrity.

Whilst the majority of longitudinal studies inevitably address these issues when contemplating the methods that will be chosen to track participants over time, these dilemmas and discussions are often not reported within the study papers. Indeed, Campbell *et al.* (2011) noted the lack of reporting of methodological concerns in longitudinal research in the field of violence against women. Their review of existing longitudinal research in the field of sexual violence reported, primarily, a lack of data being reported in relation to attrition, and less on the methods used to achieve these rates (Campbell *et al.*, 2011). This paper also raised some important questions about the use of compensation and incentives in longitudinal research. Many of the studies mentioned above used financial incentives, as did the study which is the focus of this paper. Campbell and colleagues found that financial incentives ranged mostly from \$10 – \$60. They did find however that

“the two studies with the highest retention rates were also at the high end of the compensation range”, with these two studies giving \$60-\$80 and \$50, respectively (Campbell *et al.*, 2011, pp.452).

Whilst compensation is recommended ethically, in order to avoid coercion, it is important that the amounts offered do not interfere with the ability of the participant to make a free and informed decision about participation. Campbell also reports that some studies provided free therapy and/or course credits as incentives, but this is not discussed further, either in relation to the impact on the ability to give free consent or in relation to the impact this might have on the generalizability of methods across different welfare and support systems.

Finally, in relation to existing research on longitudinal research, much of the literature (Scott and White, 2005; Clough *et al.*, 2010; Ullman, 2011) recognises the need to have highly trained, skilled researchers who have the ability to develop a good rapport with participants, sometimes referred to in relation to ‘respect’ (Clough *et al.*, 2010). Whilst it is encouraging that respect and trust were discussed, the literature sometimes failed to acknowledge the inherent contradictions for researchers whose task of recruitment and avoiding attrition might in some situations compromise the ability to respect a participant’s desire to withdraw from the research. For example, Bootsmiller *et al.* (1998), whilst reporting an older study, unquestioningly report that researchers are paid by piece rate, and that incentives were offered in the form of bonuses for the number of participants successfully tracked. The study authors fail to discuss how this might undermine the researcher’s focus on the relationship between themselves and the participant if their own payment is incentivised in this particular way.

The current study describes the process of tracking homeless women during the research on which this paper is based. It focuses on the different methods of recruitment and retention, and provides a discussion of the ways in which methodological decisions were made. We also highlight some of the ethical issues which arose within the study and which are outlined here in relation to the wider literature on longitudinal research, and discuss how collaboration with others in the project helped us to carry out the research, whilst remaining mindful of the impact on participants and potential participants.

The TARA Project

Tara¹ is a longitudinal study which has followed a group of homeless women over two years in order to identify how their experiences and needs changed over time as they moved on, and to gain a fuller understanding of their complex needs, including their social care and health needs. It has also sought to identify the barriers that service providers face in engaging with homeless women over a sustained period of time, in order to understand how best to support women themselves to access, and maintain engagement with, support services. Additionally, we hoped to be able to devise appropriate targets that could be used to monitor the effectiveness of services for homeless women and provide an evidence base for social care practice.

The project built on previous research commissioned by local service providers (Henry *et al.*, 2010; Williamson *et al.*, 2010), which took a snapshot view of the provision of services to homeless women and evaluated a specific emergency women-only service. During the dissemination phase of the previous research, the value of providing longer-term perspectives that better capture the ongoing process of homeless women through the system became apparent. As a result, funding was obtained for a longer study.

Ethical Considerations

This study received ethical approval from the host institution's relevant university departmental Research Ethics Committee. This involved the committee reviewing all of the recruitment materials, research tools and tracking processes. In addition to the general ethical concerns of conducting research with human subjects, longitudinal research raises some specific concerns about privacy and consent.

¹ The name 'Tara' was adopted as a result of a suggestion made by a member of the research team. The full title of the project 'A Two Year Study of the Social Care and Health Needs of Homeless Women and Women at Risk of Homelessness in Bristol' was considered cumbersome and also likely to be seen as stigmatising to participants. 'Tara' is regarded as a member of the Buddhist pantheon, but is also prominent in Hinduism. She is traditionally regarded as being the mother of liberation, founder of the Buddhist feminist movement and a committed feminist who symbolises compassion, healing, serenity, mercy and success in achievement. The name seemed to resonate from the outset with all our interviewees, whether or not they had any religious views. As the research continued, we began to find that spirituality was of considerable importance to many of the women we spoke to and the choice of name, which we discussed with participants as necessary, was very much appreciated by them.

'Tracking' as the name of the process

The centre where the research took place has worked for many years with a wide range of individuals who have experienced abuse and complex trauma in their lives. In this context, 'tracking' often has negative connotations, representing a process whereby abusers have stalked and harassed their victims over long periods of time, using a variety of methods and adapting to new technological resources (Humphreys and Thiara, 2002; Perry, 2012). Using this term in reference to a process intended to be beneficial to all concerned felt extremely problematic and somewhat at odds with the feminist and participatory values which the centre espouses.² The team looked at a range of other terms but has always come back to the position that the idea of 'tracking' individuals inevitably involves a power imbalance between those being followed and those doing the following (Oakley, 2000; Williamson, 2000).

A meta-analysis carried out by Pickering *et al.* (2003) of studies relating to homelessness in the UK and USA showed that this is the term most widely used by researchers and we decided to retain this term, albeit reluctantly, to link our study to the wider cohort of research in this area.

Confidentiality

Linked to our work in the area of gendered violence was an awareness of risks to service users of any breach of confidentiality. In our previous research and in other projects, it was evident that women were fearful of repercussions following the interviews should any information be compromised. Their fears related to current and previous partners, pushers, pimps, other residents in hostels and staff members. They were assured that no information would be forthcoming from the researchers without their full consent, albeit within the normal limits of confidentiality described below, that every interview would be cleaned of any names or indicators of identity and that no personal names would be used in any quotes.

In relation to the limits of confidentiality (Williamson *et al.*, 2005), participants were informed at the outset that, whilst we would maintain their confidentiality, if they were to tell us about a risk of significant harm to themselves or others, we would have a duty to discuss this disclosure with a third party, most likely a key worker from within the service where the participant was recruited. We were clear that no action would be taken before discussion with the individual concerned. It was our experience that participants understood these limits to confidentiality, as they formed part of their agreements with a range of service providers. There was one

² Feminist values can be seen as concerned with issues around power and control and a commitment to collaborative working with participants, who are seen as experts in their own lives and able to share their experience and give informed opinion, rather than being seen merely as providing information. Research should be carried out with care for participants' rights, mutual respect and attention to transparency and reciprocity (Edwards, 1993; Glucksman 1994).

incident during the project which resulted in an informal discussion with a service manager about general safety concerns, but the normal safeguarding policies were not enacted as no specific details of potential harm to any specific service user had been forthcoming. In this case, the service manager was able to alert staff to ensuring that their normal safeguarding policies were being used within the unit.

Consent

As part of our project, we wanted to be able to ask service providers about the service being provided to the participant. Consent was always established in writing and researchers talked through all aspects of every consent form before participants were asked to sign. To do this, women were asked to give specific written consent for us to approach named workers, whether a) to confirm that a service was being provided, b) to confirm that it was provided and subsequently used, or c) to obtain an idea of progress. These three levels of consent were identified through discussion with the project's active service user advisors and advisory group. Providing a choice of full or partial consent (with 2 options) to tracking gave participants control over whether we were allowed full or partial access to information about them by a third party.

It was made clear to participants that we would honour whichever option was selected. This aspect of tracking is discussed in greater detail later in this paper but it is important to note that in many longitudinal studies, consent to track individuals through services and workers was generic and gave participants little choice about who could be contacted and at what point (Caton *et al.*, 2005). All the consent-to-track forms that we used referred to specific services used and had a defined end date. Irrespective of the completed written permissions, consent was enacted in the research as a continuous process. If participants became upset or wished to stop the interview, we adhered to their request. Participants were told repeatedly that they did not have to answer all questions and were reminded that if they did not want to go into detail they could answer yes or no, or ask us to move on.

External partners

In addition to the external ethical review of the research methods and recruitment materials, the project also sought advice from the project advisory group, which consisted of other researchers, local and national service providers, and ex-service users. The involvement of service user advisors was a crucial asset in the development of the research (Abrahams *et al.*, 2014). We were extremely fortunate that three of the four women who had presented at a dissemination event for the previous research were willing to act as advisors to this project. Their knowledge and expertise gave us insights that proved integral to the project. All three advisors brought their practical experience of accessing a wide range of services to the project and offered

us invaluable advice throughout about how to recruit and maintain contact with homeless women and about how to ask particularly sensitive questions about their experiences. These women acted not just as advisors to, but also as ambassadors for the project. In developing this relationship, we provided training for the advisors – both in terms of the initial dissemination event by supporting the women to build their own confidence to speak publicly, and latterly by providing seminars on research methods. Where possible, meetings took place at the university as an active attempt to break down the barriers between the advisors and the academic institution (Williamson, 2000). We like to think that by the end of the project, the university was a place in which the advisors felt comfortable. All three advisors have gone on to paid and voluntary work where they have used some of the skills from being advisors to this and other projects (Abrahams *et al.*, 2014).

Methodology

The following outlines the key aspects of the methodological approach of the research. This includes issues related to recruitment, the research process and tracking. It is important to clarify that the research team consisted of four experienced qualitative researchers, three of whom were involved directly in the field interviews, the majority of which were conducted by two of the team.

Recruitment

Over the four months between September and December 2011, the research team recruited and interviewed a total of 38 women. Women were recruited from a range of places: a women's emergency night shelter; a different women's hostel with varying levels of support for alcohol and drug issues; and hostels for sex workers and those in contact with probation. In total, women were recruited directly from 11 services. We also tried to recruit women not currently using residential services through flyers placed in other spaces including soup kitchens, libraries and young people's services. At the second-stage interviews six months later we re-interviewed 28 women, and at the final stage, 22 women were still engaged with the project.

In terms of the initial recruitment process we were able to visit the major service providers working in the field and talk directly to workers about the project. We then visited the services to talk to potential participants in communal spaces as a way of explaining what we doing. Some women were informed of the research by their key workers, others responded to posters placed in the hostels. If individuals were interested in taking part, further information in the form of a small leaflet was supplied to women by the research team, and arrangements were made for an interview. In some cases, especially within the women-only night shelter, the interviews were carried out immediately. In other cases, they were scheduled for the

following day, bearing in mind the problems we knew women had in keeping/remembering appointments and the number of different services they might be accessing. The research used a purposive sample with the aim of trying to recruit 40 women into the initial cohort. In order to try and increase the diversity of the sample, a number of specific service providers were approached. For example, services aimed at black and minority ethnic women (BME), as well as services specifically for young people.

Process

At the first interview, women were reminded of the purpose of the project and asked to sign a consent form. At the end of the interview, they were asked to give consent (discussed fully later) for researchers to talk to their support workers. All of the initial cohort indicated that they were prepared to take part in further interviews, and a contact form was then completed with their current address and mobile number or email address. We also asked for as many contact points as possible, including family, friends and one or more named agency workers. Detailed notes were taken to ensure that any contact via family or friends would be safe and not endanger, either emotionally or physically, the participant. This enabled us, in seeking further interviews, to use both primary contact points (i.e., directly with the woman) and secondary access, which was achieved primarily via third party service providers. Women were also given a project business card with our names and contact numbers and asked to tell us if they moved on or changed their mobile number and if they were happy for us to keep in touch between interviews and, if so, what the preferred method was.

As compensation for taking part, women were given £20, details of which were not included within the information sheet to avoid possible inducement/coercion, and were also sent a personalised card signed by their interviewer. Some women were surprised to receive any remuneration; others rapidly informed their friends and fellow residents. We later learned that although the cash incentive was welcomed at first, by the time of the subsequent interviews taking part had become more important, and many at first refused the money. From an ethical perspective, we discussed at length the issue of providing financial incentives for participation in the research (Fry *et al.*, 2006; Singer and Couper, 2008). The cards, however, proved to be of far greater importance and some had kept all of their cards and contact notes over the duration of the project, displaying them to the researcher on subsequent visits. This was an important part of the ongoing recruitment and retention process and highlights the importance of the researcher/participant relationship.

Tracking

In deciding on the approach to following women during the project, it was considered to be important that, wherever possible, interviews and contact should be made by the same researcher. This strategy enabled rapport and trust to build and undoubtedly contributed to the level of contact we were able to maintain. This is an approach recognised by other researchers (Bootsmiller *et al.*, 1998), who have suggested that the relationship between the researcher and participant is perhaps even more important than any financial incentives to participation. Initial follow-up contact was made about two months after the first interview. The contact via mobile phone was kept deliberately short and simple, and women were asked to text back 'OK' to confirm they had gotten the message. In actual fact, quite a few of them responded with detailed and encouraging messages, indicating that they had found the interviews helpful. On the other hand, a number of the women had 'forgotten' the interviews and needed prompting by a call to the mobile number before they could relate to the research project. Others had indicated they only wanted letter contact; in this case, a stamped addressed envelope was included in the letter. The research team shared tips and knowledge, and much practical learning took place during this early follow-up. This included: not ringing in the morning, as those on any form of medication took time to surface, as do sex workers; that women may not respond because they have no credit on the phone and to try again a few days later; and that some women were very wary of calls from withheld or unknown numbers. In this final case, a short text, indicating whom it was from and that a call would be made from the same number in five minutes, proved surprisingly effective.

Findings

The following sections address the findings of the study in relation to the perspectives of the participants, data from the tracking processes and reflections from the research team. This includes: how we made tracking work; comparing women who were successfully tracked to those who were not; tracking through third party agencies; the relationship between the research team and participants; potential harm to participants; and the relationship between the research team and service providers.

Making 'tracking' work

In terms of the women's responses to our attempts to stay in contact with them, of the thirty-eight women who participated initially, nine sent a basic response to the follow-up text message and a further nine responded very positively, giving details of where they were and what they were doing. Two women who did not respond had been assessed at interview as having minor learning difficulties. They were

subsequently visited informally and expressed their wish to remain with the project. Of those who forgot that the interview had taken place, two were in the middle of personal crises and after further text messages, recognised the research and said they were happy to engage with the researcher again. A further four in this category were in poor mental and physical health and responded in a confused manner. Their caseworker confirmed they were still in residence (within specific services) and willing to participate in further interviews. A further one was traced via her caseworker and was keen to continue. The remaining eleven women did not respond to the initial contact made by the researchers; in some cases their whereabouts were not known, in others the caseworkers agreed to try to make contact.

Breaking these figures down into the various services within which recruitment took place shows considerable differences between the various agencies. It might have been thought that the temporary nature of the night service (and the fact that it was closed down six months later, creating the need for women to move on) would mean that the women there would be less likely to respond than those in the more settled hostels, but this was not the case.

By the time we approached women to carry out the second interview, four months after the initial follow-up and six months after the initial interview, the situation had changed again. Some of those who had responded very positively to the interim contact now came back to us to say that they were in education or employment and, although happy to tell us how they were, felt too busy to give an interview. Others let us know, either directly or via caseworkers, that they had returned 'home', and some failed to respond to the approach. In this latter situation, two approaches were made to contact the women, after which no further attempts were made, since it was an essential part of our ethical procedures to respect their privacy and ensure that our contact measures could at no time be considered harassment. We confirmed that we would be happy to meet up again if they so wished. On the other hand, contacts with former and current caseworkers, and following the leads women had given us, enabled contact to be made with six of those previously missing, and a total of twenty-eight interviews were able to be carried out.

A similar process of making contact was carried out between the second and third interviews. Inevitably, given the problems they were dealing with (Williamson *et al.*, 2013) and the temporary nature of much of their accommodation, some had moved on (often more than once) and we were not able to contact them or no response was received from our approaches. Others contacted us to report their whereabouts or give new phone numbers. One woman, missing from the second interview cohort, made contact again and was interviewed as part of the third wave. A total of 22 women were interviewed at the final interviews, giving a 58 percent response

rate from the initial cohort of 38 women. In terms of findings, it is important to recognise that tracking women for the purposes of conducting follow-up interviews is not the only outcome of this approach.

Comparing women who were tracked with those who were not

As a result of the methods we used to track progress, we have been able to see how women move through the housing system and what has happened to all but one of our original interviewees. Of the 16 women we were not able to track at the final stage: two had returned to the family home (one abroad); three had moved since the first interview and were in supported housing; two had returned to their partners (at least one to an abusive relationship); two had not moved and were still in supported housing; one was recalled to prison; and one woman was residing in an assessment unit with her baby. We were unable to glean any details on one woman from the original sample. All the information pertaining to the other women was obtained through service providers thanks to the previously obtained written consent of the participants

In terms of housing and location, there appeared to be little difference across the participant group and those women who chose not to continue participation in the study. However, our analysis of the issues faced by these two groups – which included experience of mental health issues, domestic and sexual violence, child abuse, drug or alcohol misuse, involvement within the criminal justice system and sex work – showed that the non-participating group disclosed fewer of these issues. This may represent a bias in the sample so it is important to consider why these differences might have occurred. In this regard, we believe there are three possible explanations: 1) this group of women were not experiencing as many complex issues as the participant group and therefore moved on with their lives and out of the research, 2) they did not disclose the issues because they had less opportunity within the latter interviews to do so; we were aware that some of the issues were only discussed in later interviews where trust and relationships had been established, and finally, 3) these women may have been in denial about the issues they faced and therefore were not in a position to address them, disclose them to us or engage with the relevant services.

There are a number of reasons why the research team was able both to get permission from participants to follow their progress through different services, and to maintain contact themselves with participants over the course of the research resulting in such a high level of continuing engagement with the project. These included: the careful management of secondary tracking through third parties; the relationship between the research team and participants; the relationship between the research team and service providers; and the involvement of service user advisors in designing the approach.

'Tracking' through third party agencies

As outlined in the consent section above, in order to facilitate the tracking of women through third party agencies and in order to be able to obtain information about participants' current situations if they moved away, each participant was asked if we could speak to a named worker from specific services about their progress and/or use of service. In terms of securing consent to contact specific services, many women were in contact with more than one service; therefore, the number of consents given by participating women ranged from zero to four. A total of 48 full consents and 16 partial consents were given during the initial interview phase. Some additional consents were obtained during subsequent interviews where women engaged with additional service providers. It was interesting that when giving multiple consents, participants gave either full or partial consent to all of the services they gave us permission to access. Also noted was that participants were more likely to give partial consents if they were accessing services related to the criminal justice system – for example, the police or probation services. This suggests that in terms of personal information collected for the purpose of research, participants were less comfortable sharing information about potentially criminal behaviours than information about drug/alcohol use and/or mental health support. This finding raises questions about the level of consent collected from other potential participants of longitudinal research. Much of the research outlined at the outset of this paper talks about consent to track participants but does not highlight the specificities of this consent, how it is explained to participants or the limitations of the consent given. Whilst our findings suggest that, on the whole, participants were happy to give us full consent to access information from a range of services, this was not always the case.

Relationship between research team and participants

By ensuring that the same researcher was responsible for interviewing and maintaining contact with participants, a relationship of confidence and trust could be developed, both within interviews and in the periods between each phase. By doing what we said we would and not breaking our promises to the participants – for example, by contacting them when we promised and turning up on time – we were able to build a relationship of trust. Connected to this issue was recognising the reasons why women might be participating in the research. In our third and final interviews, we explored why women had taken part, and their reasons ranged from a strong desire to help other women to needing the payment which we offered for each interview (£20 – €25.51), although, as discussed earlier, this appeared to matter less as time went on.

I have to be honest with you, as I've said to you before, all I heard was is you get £20 for speaking to someone, and I was skint and I needed a drink. So that's why I hung about. But when you contacted me again and you come out the next time and you basically explained what it was like before, it was nice to hear that someone reminded me what I was like, where I've come to in my journey, know what I mean? From where I started to where I am now, it's just like I just can't believe it's been nearly a year.... And I've made so many changes in so many things within a year, it's been really nice you know... [...].It's like it's nice now, I don't do it for the money now as I said to you. The last time you come I didn't even realise I was getting the money.

Whilst we did not advertise the payment at any of the interviews, in one of the services it became apparent that 'word got around'. However, as this quote illustrates, whilst some women may have participated initially because of the payment, this enabled the team to build a meaningful relationship with participants that enabled ongoing contact with the research. This participant continued:

you're such a lovely lady, <name>, you know even last week I felt really upset I had to let you down... you accepted that, you know, you said 'Come on (name), I'll still take you for a coffee and that' and 'I will still come round to see you', you know, and I thought why, she's still coming to see me, that's nice, you know. So yeah somebody else would say 'oh she's just taking the piss now', you know what I mean, but you've not thought that, you know.

'Sticking with' participants, meeting them for a coffee or a chat, and taking an interest in their lives, irrespective of whether they continued to take part or not, enabled us to maintain relationships we might otherwise have lost. This required the recognition that due to the chaos and complexity of some of the women's lives they would inevitably have to cancel appointments, may be unwell, or might have to prioritise other things in their lives above the objectives of our research. Recognising first and foremost that the women who took part were people, not just participants, enabled us to develop relationships that resulted in greater levels of participation.

Well I wanted to carry on, that's why I phoned you back on the new phone number and everything, cos I wanted the project to see that from where I was to where I've got to, yeah, to see there is organisations out there that help women. And that's why I gave you a new phone number to say, please get in touch, you know, cos I wanted to tell you, you know, what's happened.

[Interviewer: so how did you feel about being asked to take part on the project?] Um... I felt quite privileged that people were going to listen to what I had to say... so yeah I'm quite privileged really. [And do you know why you agreed to take part, can you remember why?] Cos like... I agreed to take part I think because... to give a little back to what people have given me.

A number of participants actively contacted us to let us know that their circumstances had changed and/or that they had new contact details. As illustrated in the first extract above, this was often motivated by a desire to help other women, to thank the services that had helped them, and by an emotional investment in the relationship with the research team. As the second extract demonstrates, this relationship was based partly on giving homeless women a voice through the research process.

Potential harm to participants

One of the main concerns of the research team was the potential harm to participants in answering questions about very personal and difficult issues in their lives (DVRG, 2004). In this respect the team took advice from the service user advisors about what and how to ask about different issues. The involvement of service user advisors and their importance in the tracking and recruitment process is discussed later. We were aware from some of the discrepancies in information provided during different interviews that there were times when women chose not to discuss certain issues, but as they developed trust in the motives and behaviour of the researchers, they would often reveal more information in a later interview. In particular, issues related to the women's own children and their past experiences of childhood abuse were among the most difficult for them to explore. In this respect we felt confident that women were comfortable not answering questions we asked.

[Interviewer: And what about the questions – was it intrusive? Was it...] Well I didn't find it intrusive. Like you said, if I didn't want to answer I never had to answer anyway. But no there was no intrusive questions, none at all. [Okay, right anything we could have done better.. to get more done, anything else we could have asked?] I don't think so to be honest with you, I think you're absolutely brilliant, I've got to be honest.

As the extract illustrates, this participant was clear in her understanding that she did not need to answer questions if she did not want to and, despite being asked some difficult questions, did not feel that the process was intrusive. Again, this is partly due to the excellent advice we received from the service user advisors and the wider advisory group about how to ask these questions. It was also due to the highly skilled researchers, both of whom had many years of experience interviewing women with complex trauma.

[Interviewer: And what about the questions we asked, did you feel uncomfortable with anything?] No, not at all. Not at all. How has it worked out for you doing the project? [It's been really interesting...] Has it? [really really interesting, yes.] What have you found out? Any major things that you've found out? [Well what we're going to do is...I'll talk to you about it now actually...we are having an event..]

Finally, in terms of the relationship between researchers and participants, we worked hard within the research team to recognise the contribution of participants. The event referred to by the researcher in the extract above was a final participant event, which we ran to feedback the research findings prior to the academic conference and which was organised around the needs of the different participants. For the research team, this was an important stage of the research and recognised that the relationship between the team and participants did not end after the data collection but was part of the motivation to effectively disseminate the findings to commissioners and service providers. As with the recruitment of the service user advisors for this project, some of the women who took part in this research may well decide to act as advisors to future research. The secondary purpose of the participant event was to provide a clear ending to this part of the research. Some women talked about the difficulty of ending relationships with key workers, and whilst we were not providing a service as such, we wanted to make the end of the project as clear as possible. Again this was discussed at length with the advisory group. Given the close relationship that had developed between some participants and the researchers, which is evident in some of the quotes above, we wanted to make clear that the research was at an end, thank participants for their involvement, give them feedback from the anonymised results and celebrate their lives. There are a number of issues that are raised here in relation to the involvement of participants within the research process beyond the participant role. A separate paper is currently being written which addresses these issues in more detail (Abrahams *et al.*, 2014). However, it is important to note here that irrespective of what this type of involvement is called – service user involvement, participants' perspectives or public patient involvement – much more consideration needs to be given to the practical support that service users with complex issues might need in order to facilitate their participation in such activities.

Relationship between research team and service providers

As discussed earlier, the Centre where this research took place has a long history of activist research within the local community and has worked hard to maintain and enhance good relationships. The research team had developed these relationships during the previous research (Henry *et al.*, 2010; Williamson *et al.*, 2010) and this continued in the planning phase for the current project. Involvement from services and commissioners included having representatives from key agencies on

the project advisory group, so that they were aware of the objectives of the research, the methods being used and, again, were able to trust that the team was conducting themselves within the parameters they had set. In this respect, being able to pay smaller organisations for staff time on the advisory group meant that this type of engagement was possible. As two service providers noted at the final advisory group meeting, they were much more likely to respond to emails requesting help from our team because they trusted us as a result of their involvement on the advisory group and had confidence in what we were doing. Very few of the published papers on other longitudinal work discuss the relationship between service provider staff and the research team in detail.

Our engagement with service providers also included the development of relationships with front line staff. Staff had been given feedback from the previous research during a dissemination event in 2010 which was free for them to attend and which resulted in a wider knowledge of the research and the team. At the start of the current research, we liaised with services at the initial recruitment phase as well as through contact during the tracking phases. By conducting interviews on service premises, staff were aware of who we were and what we were doing. This helped when we were trying to locate participants, as services were willing to forward letters or messages to clients on our behalf.

Due to our previous research in this area and the impact of that research, managers and front line workers had confidence that the research team would not exploit the participants, their service clients, and that we would ensure the appropriate dissemination of findings to themselves and commissioners in the area. Many services were aware that we had engaged service users in the dissemination phase of our previous research from feedback they had received from those service users.

It was important in our dealings with services to recognise the different pressures that staff and managers face. We were always careful to make explicit that we knew that assisting the research was an additional task on top of sometimes difficult workloads and other stresses. This meant making time when visiting premises to listen to staff, find out about new changes in service contracts and, where we were able, to offer support.

Reflecting on the process

As indicated earlier in this paper, the research team was aware from the outset that the term 'tracking' is, itself, problematic and somewhat at odds with the values which have enabled us to nurture the relationships which have, in turn, enabled us to follow women over the course of the project. As Pickering *et al.* (2003) highlight, the process of following the lives of homeless individuals must be undertaken with

extreme sensitivity: "It would certainly be highly unethical to undertake a study that would make participants feel stigmatised or that would have a detrimental psychological impact" (2003, p.33).

Our aim was to treat the women with the same respect as any other members of society, but at the same time we were in possession of knowledge obtained from service providers about how they were engaging with services. Given this contradiction and the content of the material we were dealing with, there was considerable emotional stress on all the team and a need to be aware of how this was impacting on us (Scott and White, 2005). This required constant reflexivity on the part of the researchers and examination of how we were working at each stage of the project to an extent that might not normally be considered appropriate. Whilst the longitudinal homelessness research recognises the need to provide training for field researchers (Ullman, 2011), it also often fails to recognise the skills of those staff, particularly where recruitment is financially incentivised (Bootsmiller *et al.*, 1998) rather than based on the recognition of the expertise of those staff. The team on the current project met regularly to discuss the ethical and personal dimensions of their work and followed detailed protocol as regards their personal safety and emotional well-being. A 'buddy' system enabled debriefing and a chance to reflect with another researcher after each interview and after each detailed feedback session with the team leader. One researcher commented:

It was a privilege to listen to these women and feel that they trusted us to enable their voices to be heard in a wider context. But it was highly stressful to listen to their experiences and balance this with the knowledge from service providers while maintaining feminist values. Without the constant support of everyone on the team it would have impossible to do so.

This quote highlights the importance of emotional support for the research team to enable them to engage appropriately with research participants whilst maintaining values of respect. It recognises the importance of making the safety of researchers central to the other ethical concerns of tracking participants over time.

Conclusion

This paper has outlined the tracking process utilised within the TARA project and discussed throughout the methods and processes used, as well as the different responses and feedback to those from research participants, service providers, service user advisors, and from the research team themselves. The methods used in the current study – multiple personal and service contacts; consent to track through third party agencies; compensation and/or incentives; and the building of respectful relationships between researchers and participants/service providers

– are those broadly identified by Pickering (2003) and commended by McNaughton (2005). In this research, the potential participants represented an exceptionally vulnerable and hidden population. The research team collaborated closely with service user advisors, advisory group members and agency staff to ensure that the tracking and recruitment methods being utilised did not unduly impact on the well-being of the participants. There are key lessons to be learned from this process, which may assist researchers in other fields in ensuring that they engage with participants in an ethical and appropriate way.

Underpinning all of the relationships within the research project are the underlying values brought by the key stakeholders. What worked within this project was the way in which these were facilitated by regular meetings and discussion and by upholding an overall ethos of compassion and respect. For example, by sending a text message to a participant, taking cakes on a visit to services to thank staff, or asking for and incorporating people's opinions in feedback to those responsible for the commissioning of services. Four key elements have been identified through this process: the relationship between the research team and participants; the relationship between the research team and services; the role of service user advisors; and the importance of recognising values across the research and within the research team itself.

In terms of the implications of this for future research, we found that if participants were actively engaged in the process, they were, on the whole, happy for the research team to 'track' their use of services and location over time. The exception was in relation to the use of statutory services connected to the criminal justice system – for example, the police and probation. In terms of social care practice, this research found that participants wanted a much better and clearer dialogue about how their personal information might be shared in a way that recognised their complex and multiple needs. For example, during the dissemination phase of this research, participants discussed the idea of a 'passport', which would highlight the issues they faced and remove the necessity for them to recount in detail, over and over again, traumatic and difficult life events and problems. In this respect, participants are aware that services might share information about them but wanted to be involved in deciding how this would work in practice to their benefit. This demonstrates that whilst tracking needs to be done sensitively and within the boundaries discussed with potential participants, participants saw our request to track them within a wider context of information-sharing across services that are there to help them. The findings of this study, therefore, have implications not just in terms of the methodology of tracking research participants, but for service providers concerned with ensuring that information-sharing protocols and procedures are appropriate to the needs of service users more generally.

Acknowledgement

This paper is based on findings from independent research funded by the National Institute for Health Research, School for Social Care Research. The views expressed in this paper are those of the authors and not necessarily those of the NIHR School for Social Care Research, the Department of Health, NIHR or NHS.

› References

Abrahams, H. (2010) *Rebuilding Lives after Domestic Violence: Understanding Long Term Outcomes* (London: Jessica Kingsley Publishers).

Abrahams, H., Joseph, J., Powell, L., Williamson, E., Morgan, K., Cameron, A. and Henry, L. (forthcoming 2014) Service User Involvement in Longitudinal Research, *International Journal of Qualitative Research in Services*.

Abrahams, H., Williamson, E., Morgan, K. and Cameron, A. (2013) Voices from the Street: Health and Social Care Needs of Homeless Women, *Te Awatea* [University of Canterbury, New Zealand] 11(1) pp.2-7.

Bootsmiller, B.J., Ribisi, K.M., Mowbray, C.T., Davidson, W.S., Walton, M.A. and Herman, S.E. (1998) Methods of Ensuring High Follow-Up Rates: Lessons from a Longitudinal Study of Dual Diagnosis Participants, *Substance Use and Misuse* 33(13) pp.2665-2685.

Boys, A., Marsden, J., Griffiths, P. and Strang, J. (2000) Drug Use Functions Predict Cocaine-Related Problems in Young People, *Drug and Alcohol Review* 19(2) pp.181-190.

Boys, A., Marsden, J., Stillwell, G., Hatchings, K., Griffiths, P. and Farrell, M. (2003) Minimising Respondent Attrition in Longitudinal Research: Practical Implications from a Cohort Study of Adolescent Drinking, *Journal of Adolescence* 26(3) pp.363-373.

Campbell, R., Brown Sprague, H., Cottrill, S. and Sullivan, C.M. (2011) Longitudinal Research with Sexual Assault Survivors: A Methodological Review, *Journal of Interpersonal Violence* 26(3) pp.433-461.

Caton, C.L.M., Dominguez, B., Schanzer, B., Hasin, D.S., Shrout, P.E., Felix, A., McQuiston, H., Opier, L.A. and Hsu, E. (2005) Risk Factors for Long-Term Homelessness: Findings from a Longitudinal Study of First-Time Homeless Single Adults, *Research and Practice* 95(10) pp.1753-1759.

Christensen, R.C., Hodgkins, C.C., Garces, L.K., Estlund, K.L., Miller, M.D. and Touchton, R. (2005) Homeless, Mentally Ill and Addicted: The Need for Abuse and Trauma Services, *Journal of Health Care for the Poor and Underserved* 16(4) pp.615-622.

Clough, A., Wagman, J., Rollins, C., Barnes, J., Connor-Smith, J., Holditch-Niolon, P., McDowell, S., Martinez-Bell, E., Bloom, T., Baker, C. and Glass, N. (2010) The SHARE Project: Maximising Participant Retention in a Longitudinal Study with Victims of Intimate Partner Violence, *Field Methods* 23(1) pp.86-101.

Conover, S., Berkman, A., Gheith, A., Jahiel, R., Stanley, D., Geller, P.A., Valencia, E. and Susser, E. (1997) Methods for Successful Follow-Up of Elusive Urban Populations: An Ethnographic Approach with Homeless Men, *Bulletin of the New York Academy of Medicine* 74(1) pp.90-108.

DVRG [Domestic Violence Research Group – University of Bristol] (2004) Domestic Violence and Research Ethics, in: M. Smyth and E. Williamson (Eds.) *Researchers and their 'Subjects': Ethics, Power, Knowledge and Consent*, pp.195-211. (Bristol: Policy Press).

Edwards, R. (1993) An Education in Interviewing: Placing the Researcher and the Research, in: C. Renzetti and R. Lee (Eds.) *Researching Sensitive Topics*, pp.181-196. (London: Sage).

Fry, C.L., Hall, W., Ritter, A. and Jenkinson, R. (2006) The Ethics of Paying Drug Users Who Participate in Research: A Review and Practical Recommendations, *Journal of Empirical Research on Human Research Ethics: An International Journal* 1(4) pp.21-36.

Glucksmann, M. (1994) The Work of Knowledge and the Knowledge of Women's Work, in: M. Maynard and J. Purvis (Eds.) *Researching Women's Lives from a Feminist Perspective*, pp.149-165. (London: Taylor and Francis Ltd).

Henry, L., Abrahams, H., Williamson, E. and Cameron, A. (2010) *Mapping Study of Services for Homeless Women in Bristol* (Bristol: University of Bristol).

Humphreys, C. and Thiara, R. (2002) *Routes to Safety* (Bristol: Women's Aid Federation of England).

McNaughton, C. (2005) *Crossing the Continuum: Understanding Routes out of Homelessness and Examining 'What Works'* (Glasgow: Simon Community Project).

Nind, M., Wiles, R., Bengry-Howell, A. and Crow, G. (2013) Methodological Innovation and Research Ethics: Forces in Tension or Forces in Harmony?, *Qualitative Research* 13(6) pp.650-667.

North, C.S., Black, M. and Pollio, D.E. (2012) Predictors of Successful Tracking Over Time in a Homeless Population, *Social Work Research* 36(2) pp.153-159.

Oakley, A. (2000) *Experiments in Knowing: Gender and Method in the Social Sciences* (Cambridge: Polity Press/New York: The New Press).

Perry, J. (2012) *Digital Stalking: A Guide to Technology Risks for Victims* (Bristol: Network for Surviving Stalking/Women's Aid Federation of England).

Pickering, K., Fitzpatrick, S., Hinds, K., Lynn, P. and Tipping, S. (2003) *Tracking Homelessness: A Feasibility Study* (Edinburgh: Scottish Executive Social Research).

Scott, C.K. and White, W.L. (2005) Ethical Issues in the Conduct of Longitudinal Studies of Addiction Treatment, *Journal of Substance Abuse Treatment* 28 S91-S101.

Singer, E. and Couper, M.P. (2008) Do Incentives Exert Undue Influence on Survey Participation? Experimental Evidence, *Journal of Empirical Research on Human Research Ethics: An International Journal* 3(3) pp.49-56.

Sosin, M., Piliavin, I. and Westerfelt, H. (1990) Toward a Longitudinal Analysis of Homelessness, *Journal of Social Issues* 46(4) pp.157-174.

Steele, R.W., Ramgoolam, A. and Evans J. (2003) Health Services for Homeless Adolescents, *Seminars in Paediatric Infectious Diseases* 14(1) pp.38-42.

Ullman, S.E. (2011) Longitudinal Tracking Methods in a Study of Adult Women Sexual Assault Survivors, *Violence Against Women* 17(2) pp.189-200.

Williamson, E. (2000) Caught in Contradictions: Conducting Feminist Action Orientated Research Within an Academic Evaluated Research Programme, in: J. Radford, M. Friedberg and L. Harne (Eds.) *Women, Violence and Strategies for action: Feminist Research, Policy and Practice*, pp.136-148. (Milton Keynes: Open University Press).

Williamson, E., Goodenough, T., Kent, J. and Ashcroft, R. (2005) Conducting Research With Children: The Limits of Confidentiality and Child Protection Protocols, *Children and Society* 19(5) pp.397-409.

Williamson, E., Henry, L., Abrahams, H. and Cameron, A. (2010) *Evaluation of the Women's Night Service in Bristol* (Bristol: University of Bristol).

Williamson, E. Morgan, K., Abrahams, H. and Cameron, A. (2013) *The TARA Project: A Longitudinal Study of the Service Needs of Homeless Women: Research Findings* (London: LSE, NIHR School for Social Care Research).