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## Ouch! Recruitment of Overweight and Obese Adolescent Boys for Qualitative Research

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## Ouch! Recruitment of Overweight and Obese Adolescent Boys for Qualitative Research

### Abstract

The purpose of this study is to examine the complexities of recruiting overweight and obese adolescent boys for qualitative research, discuss specific recruitment considerations for this population, and offer guidance to researchers interested in recruiting overweight adolescent boys. Three overweight adolescent boys and six community professionals participated in this study. Data collection methods included fieldwork observations (60 hours) and person-centered interviews (N=9). Emergent themes revealed that establishing trust, understanding the sensitivities of discussing obesity, and considering adolescent boys' fears of sharing personal information may have enhanced recruitment success. Researchers should consider the importance of building relationships with professionals who can recruit vulnerable adolescents, as well as the time required to establish trust with both overweight adolescent boys and their parents.

### Keywords

Adolescent Boys, Overweight, Obesity, Recruiting Vulnerable Populations, Community, Qualitative Research

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## ***Ouch!* Recruitment of Overweight and Obese Adolescent Boys for Qualitative Research**

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### **Conceptual Background and Article Formation**

This article brings forth the partial graduate work of a University of Lethbridge graduate student (ZM) entitled *Through Their Voices: Experiences of Overweight and Obese Adolescent Boys*. The purpose of this graduate thesis was to privilege the voices and the day-to-day experiences of overweight and obese adolescent boys as such understanding is currently missing from the literature. The research team was committed to gaining a greater understanding of overweight adolescent boys and how their daily experiences had an impact on their health-related quality of life and physical activity behaviours.

The methods for *Through Their Voices* included person-centered interviewing (Hollan, 2005; Levy & Hollan, 1998) and fieldwork observations (Patton, 2002) to fathom the day-to-day experiences of twenty overweight and obese adolescent males. Twenty participants were to be accrued through purposeful sampling (Patton, 2002). The

sampling criteria were four-fold: boys; aged 14-16 years; overweight or obese; and not involved in an obesity treatment program. It is important to note that this study was community-based, meaning the participants were not attending a clinic or undergoing a clinical intervention, nor were they sought to engage in an obesity related treatment program.

*Through Their Voices* was well supported through funding, the diverse backgrounds of the research team, and an Advisory Committee (clinical, non-clinical and research experts). However, despite this support and expertise, recruiting the proposed sample (N=20) was unsuccessful. In fact, only three participants volunteered. The research team was surprised and disappointed by this sample size outcome; the 'Ouch Factor' occurred, an unexpected shock that occurs while conducting qualitative research on a sensitive topic (Alty & Rodham, 1998). Consequently, fieldwork observations and field notes provoked a new question: *What are the complexities of recruiting community-based overweight and obese adolescent boys into non-anonymous, non-intervention qualitative research?*

Qualitative research methods, including interviews, can provide new information about a phenomenon of interest, fill gaps in current literature, and support professionals by providing relevant information about a specific segment of the population, including children and youth experiencing health issues (Currie, 2003; Herrman, 2006; Sartain, Clarke, & Heyman, 2000). Therefore, to understand the low recruitment outcome, and to answer the question regarding the complexities of recruiting from this population, the research team analyzed fieldwork notes and conducted additional person-centered interviews with the cohesive sample (Morse, 1995) of overweight adolescent boys (n=3), and key community professionals (n=6). Thus, the purpose of this study was to identify the complexities of recruiting overweight and obese adolescent boys, discuss specific recruitment considerations, and finally offer insight to researchers interested in recruiting overweight adolescent boys for qualitative research. This contribution adds to the current literature about recruitment and fosters the potential for enhanced participation of vulnerable populations within research through better informed recruitment strategies (Sutton, Erlen, Glad, & Siminoff, 2003).

## **Review of Literature**

Adolescent boys face particular health risks and have specific health, social, and developmental needs (World Health Organization, 2000a). Consequently, health promotion, prevention of illness, and healthy social development are important to their overall health and well-being (World Health Organization, 2000a). Listening to the voices of boys is recommended to explore and better understand their worlds (World Health Organization, 2000b) to ensure relevant and appropriate health and social interventions.

The prevalence of overweight and obese populations continues to be a major concern within North America, especially among vulnerable populations such as children and adolescents (Belanger-Ducharme & Tremblay, 2005; Ogden & Carroll, 2010; Ogden, Carroll, Curtin, Lamb, & Flegal, 2010; Shields, 2005). Overweight and obese adolescent boys have further been identified as a high-risk group warranting early and vigorous intervention (Berg, Simonsson, & Ringqvist, 2005), as well as prevention and educative

strategies to address their current and future health issues (Steen, Wadden, Foster, & Andersen, 1996).

Lee and Renzetti (1990) observe that sensitivity arises from qualitative research that intrudes into people's private lives and experiences, as well as explores things held sacred by them. Overweight and obese adolescent boys are subject to being overtly bullied and victimized by their peers, i.e., name calling, teasing, being punched or kicked (Buckmaster & Brownell, 1988; Murtagh, Dixey, & Rudolf, 2006; Pearce, Boergers, & Prinstein, 2002). Overweight boys are less likely to be nominated as close friends by their peers (Staffieri, 1967), are less satisfied with their looks, and have fewer friends (Berg et al., 2005). The reported feelings and experiences of overweight boys suggest that overweight adolescents are a particularly vulnerable population.

Non-clinical researchers often encounter difficulty recruiting and retaining participants from vulnerable populations such as adolescents (Flaskerud & Winslow, 1998; Moore & Miller, 1999). Reported in the literature are recruitment challenges and issues related to vulnerable adolescents in the following areas: pregnant adolescents into research studies (Kaiser & Hays, 2006); alcohol, tobacco and substance prevention programs (Zand et al., 2004); adolescent recruitment in school-based research (Harrington et al., 1997); and the recruitment of adolescents into qualitative tobacco research (McCormick et al., 1999). However, research discussing the challenges of recruiting overweight and obese adolescents, and boys in particular, for qualitative research was not located.

A systematic review of the literature identified that researchers have used social marketing, referrals from community and colleagues, as well as health system recruitment to access vulnerable populations (UyBico, Pavel, & Gross, 2007). Specifically, recruiting adolescents into qualitative studies necessitates direct and personal communication with key community professionals such as community program leaders, school health professionals, physical education teachers, and religious youth ministers (Flaskerud & Winslow, 1998; McCormick et al., 1999). This was a key strategy used for *Through Their Voices*. However, although key community professionals were aware and supportive of the research study, they were unable to provide direct assistance in the recruitment of participants.

Few strategies have been reported in the literature for the recruitment of overweight and obese adolescents (boys and girls) for qualitative research. Strategies identified include the use of flyers and posters in community locations (physician offices, malls, grocery stores), the use of local media outlets (Thomas & Irwin, 2009), through schools by obtaining formal school board authorization (Wills, Backett-Milburn, Gregory, & Lawton, 2006), and as well as informally approaching schools and school personnel to identify prospective participants (Amiri et al., 2010; Power, Bindler, Goetz, & Daratha, 2010).

In summary, there is a need to understand the lives of overweight adolescent boys to support them in their quest for health and quality of life. However, recruiting this population for qualitative research can be particularly difficult considering their daily social struggles. Although researchers have reported the challenges of recruiting vulnerable populations, and specifically vulnerable adolescents, no research was located which addressed challenges specific to the recruitment of overweight adolescent boys. Therefore, research on recruitment with this population can assist researchers in

preventing inappropriate or misguided recruitment strategies and possibly unrealistic sample size expectations (Harrington et al., 1997).

### **Researcher Context**

The authors represent diverse backgrounds in both research and experience. Zachary Morrison, MSc, is a Coordinator in the Sport and Wellness Department at Medicine Hat College, Medicine Hat, Alberta, Canada, and has worked in the area of health promotion and exercise science for the past ten years. Dr. David Gregory, RN, PhD, is Professor and Dean, Faculty of Nursing, University of Regina, Regina, Saskatchewan, Canada, and has conducted qualitative research with a variety of vulnerable populations during the past 25 years. Dr. Steven Thibodeau, PhD, RSW, MFT is a clinical social worker and counsellor who has worked with a variety of vulnerable populations in Alberta, Canada for over 25 years. Dr. Jennifer Copeland, PhD, is an Associate Professor of Kinesiology at the University of Lethbridge, Lethbridge, Alberta, Canada. Dr. Copeland's research interests are in the area of physical activity and health with a particular interest in measuring and monitoring physical activity behavior during important life transitions.

Each author has specific research interests in gaining an understanding of this population. The current quality of life and future health implications of obesity among adolescents is an authentic interest for each researcher. The diversity of the research team, including expertise in qualitative methodology, physical activity, health, counseling, and experience working with vulnerable populations, was essential to conducting qualitative exploratory research with this population.

### **Method**

#### **Study Setting and Sample**

The *Through Their Voices* study was conducted in Medicine Hat, Alberta, Canada, a city of 60,426 residents, where 10-19 year-old boys make up 6% of the population (City of Medicine Hat, 2008). Given these demographic statistics, and the prevalence of obesity among adolescents (Belanger-Ducharme & Tremblay, 2005; Ogden et al., 2010; Shields, 2005), the research team was confident that the proposed sample (n=20) would be accrued easily. However, as noted, only three overweight adolescent boys volunteered for that study. Based upon fieldwork observations from months of recruitment effort, understanding the complexities of recruitment was sought from the existing adolescent participants (n=3) and local community professionals (n=6). Person-centred interviews were conducted with both overweight adolescent boys (volunteers from *Through Their Voices*) and six community professionals (family physician, youth centre coordinator, youth program manager, overweight adult who was also a member of a Child and Youth Advisory Council, high school youth worker, and registered dietician). This convenience sampling technique offered a cohesive sample, i.e., those who share similar characteristics to address the research question (Morse, 1995). This approach is also suggested to achieve saturation of the data (Morse, 1995).

The three adolescent boys were between the ages of 14-16. Precedence has been established for this age range within this population by other researchers (Berg et al., 2005; Steen et al., 1996; Thomas & Irwin, 2009). The three boys were “nominated” for *Through Their Voices* by physicians and other health-related care providers who were cognizant of the boys’ obesity, for example, Body Mass Index (BMI). The researchers chose to not weigh the boys but relied on the nominators to refer overweight and obese participants. The boys were not weighed as the researchers did not want them to be judged yet again; moreover, weighing the boys would have likely undermined trust with the researchers. Thus, the numerical extent of their obesity remained unknown.

As stated in the literature, key community professionals are vital for recruiting vulnerable populations for research within the community (Flaskerd & Winslow, 1998; McCormick et al., 1999). The research team identified six key community professionals who represented different backgrounds to offer an overall perspective about the recruitment outcome.

The research team acknowledges there are no explicit sampling size guidelines or power analyses available for qualitative research designs (Morse, 2000), and thus, the sample size is often a matter of judgment (Sandelowski, 1995). The trustworthiness from this sample is offered through triangulation of the person-centered interviews and fieldwork observations, since sample size not only refers to the number of interviews but the quality of the data (Morse, 2000) and number of observations (Sandelowski, 1995).

### **Trustworthiness**

“Trustworthiness answers the following question: How can an inquirer persuade his or her audiences (including self) that the findings of an inquiry are worth paying attention to, worth taking count of?” (Lincoln & Guba, 1985, p. 290). Trustworthiness to understand and describe the complexities of recruitment was attained through the following criteria: credibility, transferability, and confirmability (Lincoln & Guba, 1985).

Credibility was established through triangulation of the data (i.e., fieldwork observations and interviews), and peer debriefing through regular meetings of the research team. The researchers established transferability of the findings by ensuring detailed and specific descriptions of the processes conducted throughout the study, thus providing readers the opportunity to determine if the findings are relevant to their contexts. Confirmability was constituted through the accountability of the research team with the Advisory Committee, as well as reaching consensus of the findings.

### **Ethics**

All recruitment efforts were conducted with the utmost respect for participants (i.e., the language arising from “overweight/obese status” was minimized, while emphasizing well-being and quality of life). All professional participants and adolescent participants (including their parents) were given a letter of invitation to participate in the interview. This letter described the interview process, potential questions, steps to protect anonymity, and explained that each interview would be digitally recorded, as well as noting that participation was voluntary and withdrawal could occur at any time, without consequence during the study. No participants withdrew from the study.

The *Through Their Voices* research study received ethical approval from the University of Lethbridge Human Subjects Research Committee. An amendment was added to the *Through Their Voices* ethics application to explore the low recruitment outcome, and conduct further research with the sample outlined in this article. All adolescent participants signed assent forms and their parents signed consent forms. The professional participants also signed consent forms.

Each participant was given an acronym (for example EO = Edmonton Oilers) and all tapes, transcriptions and researcher notes were titled and dated. All data collected were stored in a secured locked location and will be disposed of as confidential waste after five years.

## Data Collection

Fieldwork observations (Patton, 2002) recorded in field notes were the first form of data collection to understand the recruitment complexities of overweight and obese adolescent boys. Recruitment efforts for *Through Their Voices* were conducted over a ten month period and included approximately 60 hours of fieldwork observations. Fieldwork observations involved interaction with parents and community professionals. These experiences were reflected in the field notes kept by the primary researcher (ZM). The observations, field notes and literature formed the basis for the interview questions posed to the adolescents (N=3) and key community professionals (N=6) to understand why these concerted recruitment efforts failed.

Given the knowledge deficits of the recruitment of overweight adolescent boys, a qualitative approach was justified; further, the specific method selected to understand recruitment challenges with this population was person-centred interviewing. Levy and Hollan (1998) suggest the use of person-centered interviews as a method to clarify the relations between various kinds of communities and the socio-cultural contexts of members within those communities. Employing this process of interviewing provided opportunities to generate new information and theoretical understanding (Levy & Hollan, 1998) concerning the recruitment of overweight adolescent boys.

The professionals and overweight adolescent boys were approached by ZM to participate in an interview lasting approximately sixty minutes. All participants were given a choice for the location of the interviews, i.e., the participant's home, place of business, local community college, or another participant-preferred location. Furthermore, given the importance of establishing trust and ultimately rapport between the participant and the researcher (Berk & Adams, 1970; Cutcliffe & Goward, 2000; Dickson-Swift, James, Kippen, & Liamputtong, 2006; Fontana & Fey, 1994; Irwin & Johnson, 2005), especially when studying sensitive topics (Corbin & Morse, 2003; Renzetti & Lee, 1993) among vulnerable populations (Moore & Miller, 1999), ZM held multiple pre-interview meetings and telephone conversations with both the parents and the three adolescent boys.

A semi-structured interview guide was used to ensure interview question consistency. For example, ZM asked all participants to provide feedback on the recruitment strategies used during the *Through Your Voices* study which proved unsuccessful (see Table 1). Similarly, participants were prompted for guidance and suggestions regarding future recruitment strategies.



*Table 1. Categorized Recruitment Strategies Used During the Through Your Voices Study*

Category	Examples of recruitment strategies
Social marketing	Newspaper advertisements and articles in the local newspaper Television interviews describing the project, and requesting volunteers E-mail correspondence through local Volunteer Centre, requesting volunteers for project Newsletter to teachers within the area
Community outreach	Mail out of recruitment posters to all local faith organizations Face-to-face meetings with youth workers, school counselors, and leaders at key youth organizations E-mail correspondence with a variety of community leaders and youth-based organizations Posters at a variety of locations (grocery store, youth centre, YMCA, high schools, health department)
Referrals	Word of mouth through increased awareness of the research project within the community through colleagues and friends who work with youth Requests from participants and parents to refer volunteers for the research project
Health system	Presentation to health professionals who were members of a local Obesity Prevention Committee Face-to-face, mail out [hard copy] and e-mail correspondence with a variety of health professionals including dietitians, public health nurses, and family physicians Letter to all physicians from local Chief Medical Officer describing research project and a call for participant referrals

Note: Examples of recruitment strategies are categorized based on UyBico, S. J., Pavel, S., & Gross, C. P. (2007). Recruiting vulnerable populations into research: A systematic review of recruitment interventions. *Journal of General Internal Medicine*, 22(6), 852-863.

## Data Analysis

The research team was part of the data analysis process (Jacelon & O'Dell, 2005). Through the primary researcher (ZM), and in consultation with the research team, data were collected, sorted, arranged and then interpreted (Jacelon & O'Dell, 2005). Fieldwork notes and the literature formed the basis for the interview questions, while the interview transcripts provided the means to form emergent themes from the data. The primary researcher (ZM) was responsible for keeping detailed fieldwork notes comprised of his field observations and self-reflection. These fieldwork notes and observations offered a first step in gaining insight into the complexity of recruiting overweight

adolescent boys. Thus, the fieldwork notes were integral during the beginning stages of data analysis as the research team discussed the outcomes of the data collection results. The interview transcripts were read multiple times to immerse the primary researcher (ZM) in the data (Burnard, 1991). The data analysis process (Jacelon & O'Dell, 2005) for this study was as follows: ZM took lead in coding open field notes and interviews; the research team then reviewed these coded text segments and engaged in consensus building dialogue, i.e., the team agreed (reached consensus) about the coded field notes and interviews; and finally, themes were identified and agreed upon by the research team.

Participants are identified through acronyms. Acronyms for the adolescent participants were based on each participant's interests (i.e., EO for Edmonton Oilers, MB for Motor Bike, and GP for Guitar Player). This approach contributed to the anonymity of the participants as well as giving each participant an identity within the findings. The acronyms for the professional participants are based upon their professional community role (i.e., CYAC for Child and Youth Advisory Council, YC for youth centre, FP for family physician, HSYW for high school youth worker, YPM for youth program manager, and RD for registered dietitian). Throughout the findings, participants are referred to by their acronym.

All professional and adolescent participants reviewed the recruitment strategies completed throughout the recruitment phase of the *Through Their Voices* study and agreed that the strategies were comprehensive and thorough. The participants were also unanimous in their perspective that the four categories of recruitment (i.e. social marketing, community outreach, referrals, and health system) offered a broad reach to obtain participants for the study. However, the interviews revealed why these recommended recruitment strategies were unsuccessful. Although the number of interviews was limited (N=9), data supporting these three themes were densely populated throughout the interview data. Thus, based upon the sampling techniques, detailed description within the data, and the consensus process used to establish themes through data analysis, it is reasonable to suggest that data saturation was reached (Morse, 1995).

## Results

Findings revealed that professionals within the community were aware of the research study. In addition, community members knew of overweight adolescent boys who could have participated in the study. The fieldwork notes offered initial insight that suggested the sensitivity of the topic of overweight and obesity as well as the need to develop trust with an outside researcher contributed to the low recruitment outcome. Analysis of the interviews provided confirmation of the fieldwork observations, and offered a deeper understanding as to the complexity of recruitment. Three emergent themes surfaced as a consequence of data analysis: *Establishing Trust and Connections as Part of the Recruitment Process*; *Discomfort with Recruiting Overweight Adolescent Boys and Approaching their Parents*; and *Sensitivity of Weight among Boys*. These three themes provide insight into the complexity of recruiting from this vulnerable population.

**Theme 1: Establishing Trust and Connections as Part of the Recruitment Process**

Through interviews with the professionals and adolescents it became clear that broaching research participation with overweight and obese adolescent boys occurred through an adult whom the participants and their parents trusted; for example, a physician, teacher, or community professional. It is essential that researchers foster trust and connections with overweight adolescent boys and their parents prior to obtaining adolescent assent and parental consent for their participation in a study. This process of obtaining assent and consent has ethical considerations, i.e., the necessity to develop a participant/researcher relationship during recruitment prior to obtaining formal consent to participate in the study. For the professionals, it was important that they trusted the researcher and fully discerned the research intent. For the boys, despite the presence of a trusted adult, they hesitated to engage both the researcher and the purpose of the study. Adolescents voiced that they remained uncomfortable speaking to a stranger (i.e., researcher), suggesting the importance of establishing relationship and connection prior to obtaining assent.

The confidentiality thing was my biggest thing because um...I would either have to do research on it myself to make sure that you know before I promote it (i.e., the study) to somebody, like to make sure that I'm not advocating to give them something that you know is going to be uncomfortable... (Professional CYAC)

For me to walk up to someone (i.e., overweight boy) and be like just assume that they know that they might be overweight ah...could cause a problem, so if...I mean if I identified I would probably talk to the family, and talk through like a group process, not just be like hey...you're possibly overweight, check this out. (Professional YC)

"I think that when you do...when you do the selection, I think that you have to be careful with the questions that you ask, that because not only that you are selecting them, they are selecting you. (Professional FP)

Just because, I don't know you at all, none of my friends know you. No one knows you. You could be some friggen hobo for all I know. I'm not going to come meet you, if you're a stranger. (Adolescent MB)

Cause I wouldn't like know you and stuff like that and, see I am not open to people I don't know kinda thing. I have to get used to them. (Adolescent EO)

**Theme 2: Discomfort with Recruiting Overweight Adolescent Boys and Approaching their Parents**

Through fieldwork observations, it was clear that local professionals were aware of the study and understood its intent. However, many professionals working with this

population were not comfortable approaching parents and/or overweight adolescent boys to discuss their weight with the intent of recruiting them into the study. During the *Through Their Voices* recruitment process many professionals and community members mentioned that they knew of a boy(s) who met the research criteria. However, the professionals and community members were unsure, cautious and insecure with respect to approaching the parents and/or the boys since the recruitment poster and the purpose of the study confirmed, for the boy and his parents, that he was overweight or obese. This theme emphasizes that a recruitment plan, which simply identifies techniques such as social marketing, health system, and community outreach may reach the intended target population, but may not produce the desired participant sample.

The poster overall is great, but I would be really cautious in the way that I would approach someone with this poster. Because if they had never seen themselves or identified that as an issue and I'm putting that perspective on them, the way that they can react to that is like a whole can of worms. (Professional YC)

I would find it difficult even approaching an overweight obese adolescent to say, 'Could you be part of the research project. ...' You need to be very careful how that's worded and how you would approach young people about that, because it's sensitive to begin with. (Professional HSYW)

The first thing that comes to my mind, even when you ask me ah...to hand those things out [posters], how do I approach the parents? Cause I can't approach the kids. It's hard ah...it's...and again I don't know if it's my insecurity of approaching parents, because I'm not sure of how to approach it. (Professional YPM)

Parents don't want to acknowledge that their children are overweight or if they say, hey you might be interested in this kind of thing...it might feel like finger pointing to say, oh you're...this would be something you could do...so that might be a bit of your barrier. (Professional RD)

### **Theme 3: Sensitivity of Weight among Boys**

The boys themselves were highly sensitive with the topic of overweight and obesity. It was difficult for them even to say the words "overweight" or "obesity" as the participants would often refer to their weight as 'that' or 'the thing'. In essence, the boy distanced his weight from his sense of self. Moreover, the boys were hesitant to share personal perspectives about their obesity, especially in front of other boys. This sensitivity was the main obstacle to implementing snowball sampling amongst the recruited participants and thus snowball sampling was abandoned.

Like I said, I wasn't really necessarily scary, I was ah...it's...I don't know, it's like anxious, worried with what are they going to say, what are they going to look like is a fact, like that's the thing. (Adolescent MB)

I don't know, maybe people would be kinda embarrassed I guess, I don't know. Like, I don't know, if people are walking around they're not going to tell your friends to stop and wait, so you can read this ad [poster] for a group for that! (Adolescent GP)

Cause a lot of people are probably not open about it, kinda thing. (Adolescent EO)

Seriously that's what we thought it'd be personal, personal stuff. That's what we thought together. We were like ah shit, personal sharing. We don't want to answer all that in front of the guys. (Adolescent MB)

### Discussion

Simply applying pre-existing and general recruitment strategies about vulnerable populations (see Table 1) to overweight/obese adolescent boys was not adequate. Such strategies were not commensurate with the accrual of non-clinical, community-based overweight adolescent boys for participation in a non-anonymous qualitative study that focused on their life experiences. Similarly, general recruitment strategies that were used with adolescents (McCormick et al., 1999) and overweight teens (Thomas & Irwin, 2009) were not effective in meeting sample size expectations.

Central to recruitment failure was not recognizing the heightened sensitivity surrounding the topic of overweight and obesity among professionals, parents, and adolescents, especially within the context of a non-clinical research study. This sensitivity directly constrained the efforts of professionals, parents, and boys to recruit participants. Recruitment strategies were effective in notifying the community (i.e., local professionals) in the *Through Their Voices* study; however, these community members were uncomfortable presenting any research related information to the overweight boys and their parents. Simply stated, the professionals did not wish to implicate the boys as overweight or obese given the negative consequences associated with this condition and therefore, were unable to follow through with the assistance of recruitment.

Themes 1 and 2 in particular identify the importance of establishing trust with the parents of overweight adolescent boys. The sensitive nature of this topic may prompt a heightened parental protective shield around the boys, a likely result of the suffering experienced by the boys through bullying and teasing on a daily basis (Buckmaster & Brownell, 1988; Murtagh et al., 2006; Pearce et al., 2002). Of the three adolescent participants who were recruited, it was a matter of assuring both the parents and boys that their participation in the research project was going to be safe, both emotionally and psychologically. Pre-interview strategies to build trust and relationship were established through multiple meetings and telephone conversations by the primary researcher (ZM) with both the parents and the boys. The establishment of connection, trust and rapport were further related to the researcher's ability to convey a safe interview environment. This was achieved by ensuring sufficient time to allow adolescent participants to reach their own comfort level before discussing sensitive topics; providing participants with the opportunity to discuss their topics of interest (as they set direction for individual

interviews); identifying natural openings to broach sensitive topics; and holding interviews at locations chosen by the participants.

The third theme provides insight into snowball sampling; a common qualitative recruitment method. The three adolescent participants were unable to discuss research participation with other overweight boys. Developing masculinities during adolescence can potentially constrain boys from talking about their bodies, as well as sharing thoughts and feelings concerning their personal health with other boys (Connell, 2005). Hargreaves and Tiggemann (2006) also acknowledge that adolescent boys may be unwilling to share their thoughts and concerns on sensitive topics, such as body image, within a boys' group. Similar to the findings regarding the difficulty of saying words such as overweight, a qualitative study by Wills et al. (2006) found adolescent teens that were overweight or obese did not refer to themselves with those particular words. This resistance to "body talk", as in sharing personal and/or intimate body knowledge and experiences with other boys, became manifest in our attempt at snowball sampling.

Findings suggest that gaining entrance into the lives of overweight/obese adolescent boys necessarily involves building connection and trust. Researchers are wise to establish relationships with key community professionals (e.g., dieticians, family physicians, and school personnel) to ensure commitment and support of the study is obtained from this cohort. Although there is no guarantee that such commitment directly translates into recruitment activities, the established relationship provides opportunities for mutual support and problem solving. Researchers and professionals may further consider that the establishment of rapport and trust with the boys may actually begin with the boys' parents.

Recommendations for recruiting overweight and obese adolescents initially involves recruiting community professionals (i.e., identify key community professionals and establish a collaborative relationship between researcher and community professionals). Key community professionals are those who are in daily contact with the specific vulnerable population. It is important to recognize that community members can serve as intermediaries between the researcher and parents. Trust must be established between the researcher and community members, parents and ultimately the boys during the recruitment phase of the study before parental consent and adolescent assent can be freely offered. Recommendations for establishing parental and adolescent trust include the de-emphasis of overweight and obese bodies and a focus on the boys as persons in the language/message of recruitment; recognize the parental role in the recruitment process and take steps to build trust by addressing parental concerns through connection and relationship; consider that overweight adolescent boys are likely unable to initiate discussion regarding their bodies, which may be a rationale for rejecting snowball sampling; and consider the ethical implications of the consent and assent processes when initiating relationships with both the parents and boys during the recruitment phase, but prior to their participation in an interview.

Study limitations constrain the transferability (Lincoln & Guba, 1985) of the findings. The research was conducted in one mid-sized city and the overweight adolescent boys were from similar socio-cultural backgrounds. Although data saturation was achieved, a larger and more diverse sample may have fostered a greater breadth and depth of understanding of the phenomenon. The professionals who participated in the study provided a limited representation of those who may commonly work with

overweight adolescents. Thus, the authors recommend further validation of the findings through additional qualitative and mixed method research designs.

There are real complexities associated with the recruitment of overweight and obese adolescent boys into non-anonymous qualitative research studies. In this study, we are provided with a better understanding of such recruitment challenges. Furthermore, the findings should be of assistance to qualitative researchers who are committed to this and other vulnerable populations. The “ouch factor” provided the opportunity to reflect on and further discern how to enhance the recruitment of overweight and obese adolescent boys. There are indeed lessons to be learned from unexpected outcomes in qualitative research.

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