

The role and influence of key informants in community-engaged research: A critical perspective

Stacey A McKenna

University of Colorado Denver, USA

Deborah S Main

University of Colorado Denver, USA

Action Research

11(2) 113–124

© The Author(s) 2013

Reprints and permissions:

sagepub.co.uk/journalsPermissions.nav

DOI: 10.1177/1476750312473342

arj.sagepub.com



Abstract

With the national emphasis on engaged and action research approaches to enhance research with communities and improve research translation, conventional social science and health researchers will benefit from greater knowledge and skills in line with the underlying principles of collaboration and participation. One prominent competency is to ensure that researcher and community interests and priorities coalesce and shape all stages of the research and dissemination process. This article includes our reflection on the unique role and purpose of key informants in community-engaged research. Taking a critical social science perspective, we consider the value and challenges involved in selecting and relying on key informants to represent the community and its perspectives. Because key informants inhabit social and professional roles in communities, they are often sought by researchers to provide knowledge and information related to health promotion and education within a community. However, their identification and selection – and their perspectives about what is important and would work best for a community – must be carefully considered. We conclude this article with several recommendations for enhancing community engagement in translational research.

Keywords

Action research, community-engaged research, CBPR, key informant

Corresponding author:

Stacey A McKenna, Department of Health & Behavioral Sciences, University of Colorado Denver, Campus Box 188, PO Box 173364, Denver, CO 80217-3364, USA.

Email: stacey.mckenna@ucdenver.edu

Community-engaged, participatory, and action-oriented research approaches have become increasingly popular in recent years among researchers and funders alike (Fisher, 1997; Stoecker, 2009; Wallerstein & Duran, 2006). Funding by federal agencies encourages community engagement in US programmatic and translational research directed at decreasing health disparities and improving health and health care (Hood, Brewer, Jackson, & Wewers, 2010; Minkler, 2004). The terms community-based participatory research (CBPR), community-engaged research, and (participatory) action research (PAR), are often used interchangeably in reference to research approaches that meet principles of participation, cooperation, collaboration, translation, empowerment, and a balance of research and action (Israel et al., 2003; Minkler, 2004).

Nonetheless, there remains little consensus regarding the most effective means through which to meet expectations of community engagement in research (Cornwall, 2008; Flicker, Senturia, & Wong, 2010; Israel et al., 2003). The concepts of participation, collaboration, and especially empowerment, often vary considerably from one context to another and depend on the relative positions of and relationships between communities and researchers. As such, community-engaged and action researchers must consider such factors as the importance of 'who is participating, in what and for whose benefit' (Cornwall, 2008, p. 269); the details of what a collaboration between researcher and community should look like (e.g. the process of identifying priorities or engaging community members) (Fisher, 1997; Israel et al., 2003); and what concepts such as 'empowerment' look like in the eyes of the community and the researcher (Cornwall, 2008). Work with different communities thus means that these concepts, and the roles of researchers and participants, may play out differently from one study to the next.

While the specific role of the researcher may change from one study to another, perhaps the most important role of the researcher in community-engaged research is in the lending of theoretical and methodological expertise (Minkler, 2004). However, not all social science and health researchers receive the theoretical and methodological training to engage communities as active participants throughout the research process (Deleemos, 2006). For example, many medical, public health, and social science researchers are trained in positivist paradigms, seeking absolute truths through the presumed objectivity and expertise of the scholar (Morris, 2009; Shalowitz et al., 2009; Singleton & Straits, 2005). Even when rejecting the positivist paradigm, they often conduct research that is shaped by researcher, rather than participant or community, priorities (Deleemos, 2006; Horwitz, Robinson, & Seifer, 2009; Minkler, 2004).

Furthermore, the realities of funding and publishing frequently reinforce the distance between communities and researchers (e.g. researchers often must submit funding proposals before developing collaborations with communities, or target publications to academic rather than community interests to improve publication probability). Thus, those seeking to engage in CBPR, PAR, or other community-engaged research would benefit from enhanced knowledge and skills that will help them optimize the underlying principles of these approaches

(Horwitz et al., 2009; Israel et al., 2003). This requires a close examination of the recommendations coming from the CBPR and PAR literature and from the social sciences such as anthropology and sociology, in which scholars have long been struggling with the challenges of community engagement and the meaning of true collaboration (Delemos, 2006; Flicker et al., 2010; Horwitz et al., 2009).

In this review article, we consider the role of the key informants over time and across disciplines to inform contemporary action researchers. Understanding the status of key informants in a community and the types of information they provide is essential to community-engaged research in general and action research (AR) projects in particular. These researchers engage not just in the study of communities, but also in research that is of importance to communities. In this review, we highlight the importance and variability of key informant roles described in the literature and relevance of understanding these roles for action researchers.

Prioritizing community member perspectives

While community-engaged research has a number of important principles, the one that is most central to action research is the need to understand the community and its priorities. Thus, the researcher is positioned to help identify and address issues that community members see as important. It is this particular type of collaboration that is the focus of the remainder of this article.

Initiating a collaborative research partnership that facilitates the identification and prioritization of community views about their own needs and interests is fraught with challenges that many researchers may not be prepared to identify or address. Stoecker examined over 280 applications to the Sociological Initiatives Foundation (a major funder of community-engaged research) to consider how applicants conceptualized and proposed achieving community engagement. The study found that community members rarely participate in the development of research priorities, the definition of a research question, or methods selection (Stoecker, 2009). Stoecker proposes that in some cases this may be the result of deadline pressures, but in others it is likely that researchers simply do not consider community members or organizations at early stages of research.

In a review of the literature as well as experience in our own research, we have found that CBPR and PAR researchers often talk with central figures who may serve any of a variety of professional or personal functions in a community (Flicker et al., 2010; McKenna, Iwasaki, Stewart, & Main, 2011; Morris, 2009; Shalowitz et al., 2009; Stephens, 2010; Tremblay, 1957). These key informants often provide 'expert' knowledge (Poggie, 1972; Tremblay, 1957), become integral members of the partnership by serving on community advisory boards or councils (Flicker et al., 2010; Morin, Moaiorana, Koester, Sheon, & Richards, 2003) and participate in in-depth interviews about community needs and priorities (Marshall, 1996; Tremblay, 1957). However, if they do not reside in the defined community or 'interact across multiple roles', they may not constitute community members (Stoecker, 2009, p. 389) or be in a position to speak for community members. While this should not

invalidate the voices of key informants, researchers' frequent and heavy reliance on them in community-engaged research warrants closer examination.

Despite their important roles in communities, key informant ideas about and priorities for a given community do not necessarily match and may even conflict with those of community members. For example, secondary analysis of data from the CBPR initiative Taking Neighborhood Health to Heart (TNH2H), revealed several discrepancies between community members' and key informants' understandings of barriers to and motivations for healthy behavior. These discrepancies highlight the fact that relying solely on key informant perspectives without consideration of community members' could lead to misguided and ineffective community-based programs and policies (McKenna et al., 2011).

Nonetheless, the literature contains little critical reflection on the role and purpose of key informants in community-engaged research, particularly in the area of health. In the remainder of this article, we discuss the value and challenges involved in selecting and relying on key informants to represent the community and its perspectives, especially in the contexts of community engagement and action-oriented research. We conclude with recommendations of how to balance the roles and voices of key informants with those of general community members in research and translation.

The role of key informants in community-based research

Key informants are unquestionably important in community-based research, providing information about the community and helping the researcher make additional contacts. Thus, in defining the community for the purposes of their projects, researchers must recognize the many ways that key informant perspectives can influence the research. Key informants' world views are likely to affect how they define community and what they perceive as community strengths, weaknesses, needs, and potential (Bernard, 1995a; Houston & Sudman, 1975; Morris, 2009; Soucy, 2000; Warheit, Buhl Roger, & Joanne, 1978).

Researchers can strengthen the quality of community-engaged research and its potential for effective translation by recognizing the differences in what community members and key informants may have to offer at all stages of research. First, this means defining who constitutes a key informant and who constitutes a community member, asking whether an individual could be both in particular circumstances, and explicitly considering what one can expect to learn from each. We take this a step further and consider how this information can be used to optimize community-engaged research.

Who is the 'key informant' in community-engaged research?

In ethnographic research, where the key informant role has been examined and developed the most, key informants typically serve as gatekeepers regulating access to people and information and as cultural experts explaining culture to an outsider

(Bernard, 1995a). To fill these roles, Tremblay (1957) suggested that key informants should meet the following criteria: hold formal positions in the community, have knowledge relevant to the study, be willing to share this knowledge, communicate well, and be unbiased or able to reflect upon their own biases. While the key informant in community-engaged research often retains the role of gatekeeper and is relied upon as an expert, the meaning of these roles and thus the criteria for identifying a key informant shift when applied to the unique context of community-engaged and action research.

First, while cultural anthropologists typically seek to understand cultural rules, knowledge, and context (Geertz, 1973), community-engaged researchers tend to be more problem- and action-oriented. Thus, part of the formal role of the cultural anthropologist's key informant will be community membership (Bernard, 1995a; Marshall, 1996), but key informants in community-engaged research often work for activist, professional, government, or non-profit organizations in the community with little or no additional connection. They are not necessarily residents and may not have regular interactions across a variety of social circumstances and roles within the community. Therefore, in community-engaged research, although key informants are sometimes community members, this cannot be assumed (Stoecker, 2009). This aspect of the informants' status in a community is important and will affect the types of information they are able to provide. Key informants who are non-residents cannot provide their own true insider's perspectives; however, their roles in the community may give them significant knowledge about the perspectives and circumstances of community members, especially with regard to particular topics.

In fact, key informants in community-engaged research often have a unique status that may make them experts in a particular knowledge area or gatekeepers to specific segments of the populations, but not general community or cultural experts as one would expect of a key informant in ethnography. Because of this, key informants in community-engaged research are frequently identified because they hold elite (Morris, 2009), privileged (Stephens, 2010), or expert (Soucy, 2000) status that stems primarily from their knowledge about topics of interest to the researcher rather than of great import to the community as a whole (McKenna et al., 2011; Warheit et al., 1978). Key informants' areas of expertise are usually limited to specific areas pertaining to their professional or activist roles in a community, roles that shape their understanding and interpretation of circumstances, behaviors, and motivations for these behaviors (Houston & Sudman, 1975; Poggie, 1972; Warheit et al., 1978).

Therefore, in order for researchers in community-engaged research to identify the most relevant key informants to a given study, they must consider what different informants have to offer based on their roles and status in the community. Depending on one's research goals and stage of investigation, researchers may identify potential informants by considering ways their relative social positions and priorities for the community may impact their role as key informant and the type of knowledge or information the community hopes to glean from them. Of particular relevance to the present discussion is the impact of their community

roles/positions on their ability to serve the study as gatekeepers, priority-setters and information experts.

Gatekeepers. Key informants' position and status in the community influence their roles as gatekeepers; that is, the ways they regulate a research team's access to particular people and information. To gain initial entrée into a community, many community-engaged researchers rely on community advisory boards or individuals and organizations with which they have a pre-existing relationship or shared interests and priorities (Flicker et al., 2010; Morin et al., 2003). These groups often represent specialized segments of a community and although they may officially speak for community members, their perspectives or opinions are again not necessarily representative (Morris, 2009; Soucy, 2000) and they may not be in a position to facilitate access to a sufficiently diverse or representative segment of the community.

For example, in S.M.'s dissertation research with active methamphetamine users, she relied heavily on local harm reduction and outreach organizations in the community to recruit participants. While this strategy greatly facilitated finding potential participants and the development of trust between researcher and participant, it also risked heavily biasing the sample toward individuals in agreement with the harm-reduction ethos and actively connected with community resources. She minimized this potential problem by accessing other users through snowball sampling and trust-building during participant-observation sessions. Had she relied exclusively on key informants from these organizations to facilitate recruitment, she would have missed important perspectives and priorities that perhaps emphasized different philosophies. Thus, while organizational key informants did serve as initial gatekeepers, ethnographic key informants – those who were actual community members (in this case, active methamphetamine users) – were the gatekeepers to a broader segment of the community (McKenna, 2012).

Priority-setters. In cultural anthropology, ethnographers choose key informants 'for their competence rather than just for their representativeness' (Bernard, 1995a, p. 165), recognizing that key informants provide rich data but not expecting their subjective experiences to match those of general community members (even if they are community members themselves). Community-engaged researchers therefore must identify what constitutes competence within their own research paradigm. An action research paradigm in particular calls for community participation from the earliest stages of research, including problem- or priority-identification (Wallerstein & Duran, 2006). Thus, in action research, key informants must be selected not for their ability to provide knowledge about a particular area, but to help researchers recognize, understand and facilitate access to knowledge about community wants and needs. The competent key informant in action research must be able to provide an insider perspective. Because early meetings between researchers and communities will shape research focus and design, it is important to include community members as key informants. In fact, it is the community's research priorities that should shape the criteria for key informants.

Some have argued that the relative wealth, backgrounds, and status positions of researchers as well as activists participating in much community-engaged research makes them more prone to adopt a neoliberal orientation to problem-solving that prioritizes ideas such as education and empowerment over structural inequalities (Bourgois & Schonberg, 2009; Farmer, Walton, & Terter, 2000; Stephens, 2010). For example, Bourgois and Schonberg (2009) have found that, although typically well-intentioned, based on these frameworks, harm reduction activists often emphasize behaviors – such as abstaining from needle sharing – that are not in line with the priorities of impoverished heroin addicts (who often depend on the moral economy of other users to avoid dopesickness and facilitate survival). This moral economy demands sharing, and those who are addicted to opioids prioritize avoiding dopesickness ahead of avoiding the transmission of blood-borne pathogens. Thus, in certain circumstances, research priorities based on harm-reduction philosophies may miss the issues that are most important to the users themselves.

Cornwall (2008) observes that who initiates the research and how they do so also impacts how the research is carried out and what roles researchers, community members, advisory boards and key informants play. Because lead researchers often make decisions about who becomes a key informant, they must know community priorities early in the research process and use this information to define what they hope to learn from key informants (as opposed, for example, to a general sample of community members), and identify how the findings can and will be used.

Knowledge. In her critique of researchers' reliance on informants with proximity to power, Morris notes several important challenges, the most relevant of which is the fallacy that there is an objective truth to be realized. Many researchers interviewing key informants make the mistake of looking to these 'experts' for an objective truth rather than recognizing that subjective perspectives and meanings also arise in these interviews (Morris, 2009). In fact, if appropriately situated in social and community context, key informant interviews provide the opportunity to explore multiple perspectives on and community relations pertaining to a given issue (Kennedy et al., 2008). Researchers, therefore, must identify what knowledge they seek from informants. 'Truth' seeking is best done through direct observation of resources and behavior or interviews with key informants working in and knowledgeable about a particular field.

Indeed, even when key informants discuss relatively straightforward concepts, research illustrates the need to consider how their respective positions within the community affect the information they provide (Houston & Sudman, 1975). Key informant reports are most useful when they relate to their areas of expertise such as their personal experiences or professional roles (Houston & Sudman, 1975; Warheit et al., 1978). For example, a public health nurse may provide accurate information about a community's need for an accessible, affordable flu vaccination program. Yet, this same nurse may not know exactly why some community members do not take advantage such programs when they are available. Such

information should be obtained through other methods, such as qualitative interviews, focus groups or participant-observation with community members.

We do not suggest excluding key informant knowledge from community-engaged research. However, research findings highlight the importance of considering informants' positions and specific areas of expertise to optimally assess and use the information they provide. The identification of informants as 'expert' does not render their judgment superior on all topics. In fact, ascribing the role of key informant to individuals based on elevated status or influence within a community minimizes the participatory intention of community-engaged research, excluding the perspectives of those with less power (Cornwall, 2008; Stephens, 2010) or technical knowledge (Morin et al., 2003).

Of even greater concern than key informants' reporting about a community's observable qualities is their potential bias in interpreting, understanding and translating the social meanings of and motivations for community members' behaviors. Good informants are often thought to be people who are accessible to and can communicate effectively with researchers (Bernard, 1995a; Tremblay, 1957). However, the very traits that make key informants accessible to researchers (such as professional status) often set them apart socially and economically from the community (Bernard, 1995a). Because, as discussed above, key informants may serve as gatekeepers, this outsider status can limit the population to which researchers are able to gain access (Bernard, 1995a). In community-engaged research, key informants' professional roles in communities also shape their interpretations of observable behaviors (Cornwall, 2008; Morris, 2009).

Without critical examination of how privileged positions may impact information provided by key informants, researchers risk understating social inequalities that affect community members (Stephens, 2010). In the CBPR study, *Taking Neighborhood Health to Heart (TNH2H)*, community members identified heart health as an issue of major importance/concern, noting that two mechanisms were especially influential: unhealthy eating and lack of physical activity. However, when the researchers compared community views about why they did not eat healthy diets or engage in sufficient physical activity to those of key informants, clear differences emerged. Although both community members and key informants from community-based organizations identified economic and built environment barriers to eating fresh fruits and vegetables, some key informants attributed it to a lack of community resident knowledge and skills, barriers that were not echoed in focus groups with the community members themselves (McKenna et al., 2011). The key informants' social positions, including their educational paradigms, influenced their perceptions of problems and behaviors in the community and their recommended solutions.

Because of the influence of key informants and because their positions in the community shape their roles and knowledge, even in the case of community-initiated research, it can be challenging to balance the voices of those with power in the community with the community members who are most affected by the research (O'Fallon & Dearry, 2002). Thus, the implication of designing an intervention

based on research dominated by key informants is considerable. Funding and resources could be funneled toward a 'problem' that does not address the real community needs and priorities. Such misdirected efforts are not uncommon in public health interventions (Bourgois & Schonberg, 2009; Stephens, 2010) and well-conducted community-engaged research has the potential to remedy this. Researchers relying only on selected key informants to define a community's problems and assets and to identify potential solutions may miss the key principles of community-engaged research, which, in its ideal form, emphasizes the importance of community priorities and participation, thereby promoting collaborative identification of both problems and solutions (Freire, 1970 [2009]).

How can this information be used to further collaborative research goals?

As community-engaged research funding and prioritization continue to grow on a national scale, more academic researchers will be working with communities to improve the quality and impact of their research. In doing this, it is important that new researchers are able to meet the underlying principles of community engagement. This means involving community member perspectives and priorities from project conceptualization to completion (Wallerstein & Duran, 2006). Therefore, researchers must reflect critically on the information provided by key informants and identify feasible means of accessing and incorporating community member views in their studies. Below, we propose several ways to optimize the collaborative nature of community-engaged research and ensure that collaboration addresses the range of issues important to community members.

Define the community and its members: to optimize the ability of research to improve health and lived experience for those living in a community, it is important that community members define 'community' – their 'units of identity' (e.g. their social relationships and networks, neighborhood boundaries and social interactions) (O'Fallon & Dearry, 2002, p. 157). Because of the dynamic nature of community, it should be defined for each study to constitute the group that will be most affected by the research (O'Fallon & Dearry, 2002; Stoecker, 2009). Researchers may draw from observations, key informant reports, and early interviews with community members to define the community and its members for a particular study. This definition then guides the framing of future research questions and further sampling of community members (Schensul, Schensul, & LeCompte, 1999).

Include community members in your sample: once the community has been defined, researchers may use a number of sampling tools to access a diverse and appropriate range of community member perspectives. A tool commonly used to access a fairly representative sample with small numbers is purposive or criterion-based sampling, in which community priorities and demographics guide the intentional selection of individual representatives (Bernard, 1995b; Schensul et al., 1999). Snowball sampling is another tool that can be useful and

that actively engages community members in the identification and recruitment of other potential research participants (Bernard, 1995b). A combination of the two sampling methods contribute to meeting key CBPR research principles of engaging community members at all stages of the research process (O'Fallon & Dearry, 2002).

Critically examine the social positions and roles of key informants: including or emphasizing the perspectives of community members does not mean excluding those of key informants. Rather, it means reflecting on the social position, socio-economic status, and professional roles of key informants in relation to the communities about which (and often for whom) they speak. This critical approach will elucidate the implications of relying on key informant perspectives in a particular study (Bernard, 1995a; Soucy, 2000; Stephens, 2010), guiding decisions about when it is desirable, or not, to do so.

Balance voices: to optimize understanding of community issues and priorities, community-engaged studies must balance the perspectives of participants from multiple positions within the community, including 'expert' key informants as well as general community members. This is best done by continually looking for missing voices and analyzing why some people may be excluded or find their perspectives are ignored, particularly those who are affected most by the research being conducted (Morin et al., 2003). Investigators often fear that inviting one more person or perspective into their research will cause delay and even invite potential conflict. However, the diversity of knowledge and learning that can occur through ongoing collaboration and participation increases the relevance, reach and impact of the research (Israel et al., 2003; O'Fallon & Dearry, 2002; Wallerstein & Duran, 2006).

Conclusion

The growing popularity of and push for community-engaged research underlie the need for an in-depth review of those factors that distinguish such research from more conventional approaches that claim scholarly objectivity or prioritize researcher priorities over those of the participants and community. In this review article, we have focused on the role of the key informant in community-engaged research in general and action research in particular. We propose that the emphasis on community priorities and perspectives central to community-engaged research shape the role and definition of key informants in such research. Drawing on the highly varied roles of key informants across disciplines and over time, we offer insight into how community-engaged researchers can ensure that key informants in their own work will represent insider community perspectives and help identify and support community priorities.

This article includes concrete suggestions for community-engaged and action researchers working with key informants, and frames the relevance of these roles. To extend and build upon this conversation, community-engaged researchers should continue to reflect on the roles of key informants in their own work, considering how key informants' positions relative to research communities affect their priorities and the information they provide.

Acknowledgement

We thank Davydd Greenwood for leading the review process for the authors of this paper. Should there be any comments/reactions you wish to share, please bring them to the interactive portion (Reader Responses column) of the website: <http://arj.sagepub.com>.

References

- Bernard, H. R. (1995a). Informants. In *Research methods in anthropology: Qualitative and quantitative approaches* (2nd ed., pp. 165–179). Walnut Creek, CA: AltaMira Press.
- Bernard, H. R. (1995b). Sampling. In *Research methods in anthropology: Qualitative and quantitative approaches* (pp. 71–101). Walnut Creek, CA: AltaMira Press.
- Bourgeois, P., & Schonberg, J. (2009). *Righteous dopefiend*. Berkeley: University of California Press.
- Cornwall, A. (2008). Unpacking ‘participation’: Models, meanings, and practices. *Community Development Journal*, 43(3), 269–283.
- Delemos, J. (2006). Community-based participatory research: Changing scientific practice from research on communities to research with and for communities. *Local Environment*, 11(3), 329–338.
- Farmer, P., Walton, D., & Terter, L. (2000). Infections and inequalities. *Global Change & Human Health*, 1, 94–109.
- Fisher, R. (1997). Social action community organization: Proliferation, persistence, roots and prospects. In M. Minkler (Ed.), *Community organizing and community building for health* (pp. 53–67). New Brunswick, NJ: Rutgers University Press.
- Flicker, S., Senturia, K., & Wong, K. (2010). Unit 2: Developing a CBPR Partnership-Getting Started. Developing and Sustaining Community-Based Participatory Research Partnerships: A Skill-Building Curriculum, 2010. Retrieved from <http://depts.washington.edu/ccph/cbpr/u2/u2.php>.
- Freire, P. (1970 [2009]). *Pedagogy of the oppressed* (30th anniversary ed., M. Ramos, trans.). New York: Continuum.
- Geertz, C. (1973). Thick description: Toward an interpretive theory of culture. In: *The interpretation of cultures*. New York: Basic Books.
- Hood, N., Brewer, T., Jackson, R., & Wewers, M. (2010). Survey of community engagement in NIH-funded research. *Clinical and Translational Science*, 3(1), 19–22.
- Horwitz, C., Robinson, M., & Seifer, S. (2009). Community-based participatory research from the margin to the mainstream: Are researchers prepared? *Circulation*, 119, 2633–2642.
- Houston, M., & Sudman, S. (1975). A methodological assessment of the use of key informants. *Social Science Research*, 4(2), 151–164.
- Israel, B., Schultz, A., Parker, E., Becker, A., Allen, A., & Guzman, J. (2003). Critical issues in developing and following community-based participatory research principles. In M. Minkler, & N. Wallerstein (Eds.), *Community-based participatory research for health* (pp. 56–73). San Francisco, CA: Jossey-Bass.
- Kennedy, A., Christie, D., Fraser, C., Reid, L., McKinney, S., & Welsh, M., et al (2008). Key informants’ perspectives on teacher learning in Scotland. *British Journal of Educational Studies*, 56(4), 400–419.
- Marshall, M. (1996). The key informant technique. *Family Practice*, 13, 92–97.
- McKenna, S. A. (2012). The meth factor: Stigma, authoritative discourse, and women who use. Unpublished dissertation, University of Colorado Denver, Denver, CO.

- McKenna, S. A., Iwasaki, P. G., Stewart, T., & Main, D. S. (2011). Key informants and community members in community-based participatory research: One is not like the other. *Progress in Community Health Partnerships: Research Education and Action*, 5(4), 387–397.
- Minkler, M. (2004). Ethical challenges for the 'outside' researcher in community-based participatory research. *Health Education Behavior*, 31, 684–697.
- Morin, S. F., Moaiorana, A., Koester, K. A., Sheon, N. M., & Richards, T. A. (2003). Community consultation in HIV prevention research: A study of Community Advisory Boards at 6 research sites. *Journal of Acquired Immune Deficiency Syndromes*, 33, 513–520.
- Morris, Z. (2009). The truth about interviewing elites. *Politics*, 29(3), 209–217.
- O'Fallon, L. R., & Dearry, A. (2002). Community-based participatory research as a tool to advance environmental health sciences. *Environmental Health Perspectives*, 110(Supplement 2): 155–159.
- Poggie, J. J. (1972). Toward quality control in key informant data. *Human Organization*, 31(1), 23–30.
- Schensul, S. L., Schensul, J. J., & LeCompte, M. D. (1999). *Essential ethnographic methods* (Vol. 2). Walnut Creek, CA: AltaMira Press.
- Shalowitz, M. U., Isacco, A., Barquin, N., Clark-Kauffman, E., Delger, P., & Nelson, D., et al (2009). Community-based participatory research: A review of the literature with strategies for community engagement. *Journal of Developmental & Behavioral Pediatrics*, 30(4), 350–361.
- Singleton, R. A. J., & Straits, B. C. (2005). *Approaches to social research* (4th ed.). New York: Oxford University Press.
- Soucy, A. (2000). The problem with key informants. *Anthropological Forum*, 10(2), 179–199.
- Stephens, C. (2010). Privilege and status in an unequal society: Shifting the focus of health promotion research to include the maintenance of advantage. *Journal of Health Psychology*, 20(10), 1–8.
- Stoecker, R. (2009). Are we talking the walk of community-based research? *Action Research*, 7, 385–404.
- Tremblay, M.-A. (1957). The key informant technique: A nonethnographic application. *American Anthropologist*, 59, 688–701.
- Wallerstein, N., & Duran, B. (2006). Community-based participatory research. *Health Promotion Practice*, 7, 312–323.
- Warheit, G., Buhl Roger, A., & Joanne, M. (1978). A critique of social indicators analysis and key informants surveys as needs assessment methods. *Evaluation and Program Planning*, 1(3), 239–247.

Author biographies

Stacey A McKenna is an Assistant Research Professor in the Department of Health and Behavioral Sciences, University of Colorado Denver, USA, who uses ethnography, discourse analysis, and mixed-methods collaborations to explore issues of drug use, homelessness, health, and survival in small urban and rural communities.

Deborah S Main is a Professor in the Department of Health and Behavioral Sciences, University of Colorado Denver, USA, who conducts mixed methods research on the impact of built and social environments on health and health disparities in urban neighborhoods.