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Realities and Myths of Safety Issues for Community Researchers Working in a Marginalized African American Community

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Abstract Community psychologists often conduct research in collaboration with marginalized communities in which safety is an issue. However, we rarely talk about what specific safety issues we experience and how we deal with them. Our story describes the realities and myths of neighborhood safety that were experienced in a low-income African American neighborhood of Chicago, while collaborating on a project designed to increase access to the Internet to obtain health information. We examine both the challenges experienced and our responses in the context of a community intervention planned, implemented, and evaluated by a partnership team composed of various stakeholders. Critical lessons such as the importance of building on community strengths and the need to be aware of our own biases are discussed.

Keywords Marginalized community · Stereotypes · Safety · African Americans

In the fall of 1998, a partnership between a community-based organization (CBO), a grass roots group, a local hospital, and a university team was funded by a grant from the U.S. Department of Commerce to develop and implement a three-year community-based health initiative. In this health initiative, members of a low-income African American neighborhood in Chicago were provided with training

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and equipment to access health information and to address health and safety issues utilizing the Internet as a tool. The initiative was largely sponsored by a community health organization that supported programs directed toward youth, health promotion, and community development.

A vast body of literature had suggested that the digital divide—differently increasing rates of computer and Internet access based on demographic characteristics—is marginalizing minority communities (Crockett, 2002; Rhode & Shapiro, 2000). The primary emphasis of the intervention was to introduce health information and disseminate health resources through the use of the Internet. The secondary goal was to increase overall residents' access to the Internet. The Principal Investigator for the project was a doctor from a nearby hospital who was concerned by the fact that residents of the target community had the highest use of emergency room services compared to other populations and neighborhoods in the city and also had both the lowest use of health resources from the community and the lowest access to health information (City of Chicago, 1999). It was a concern of the sponsoring community-health organization that while health information was being widely disseminated via Internet, African Americans had the lowest rate of access to the Internet (D'Alessandro & Dosa, 2000; Nickelson, 1998; Rhode & Shapiro, 2000).

The project design involved the training of about 42 block leaders who were provided with individual training, equipment, and ongoing trouble shooting. The intervention focused on providing 24-hour e-mail communication with local physicians, links to quality health information, instruction on accessing primary care services at local health clinics, and access to updated health promotion activities via a scrolling banner on the project's home web page. The project's web page had been developed with the block leaders' input obtained in two focus groups. Leaders received a WebTV (a

unit that connects to the television set and provides internet connection), a color printer, monthly payments for Internet connection, paper for the printer, and ongoing technical support. Leaders were instructed on how to connect with one another and how to download and print information. They were also asked to train others on their block on how to use the Internet via the WebTV.

The focus of our story is on the realities and myths of issues of safety experienced during the development, implementation, and evaluation of the Internet initiative in the community. We will begin with a description of the context of the story, followed by the specific challenges and responses, and end with a discussion of the lessons learned.

Community context

The intervention was conducted in a predominantly African American community. This community has a high level of community organizing, including many community leaders and activists, well run block clubs, and a community grassroots group composed of block leaders. Block leaders held monthly meetings to identify, discuss, and address issues of concern. At the same time, this community was struggling with a number of social and economic issues. The community has higher rates of unemployment and poverty than Chicago as a whole. In 2000, the unemployment rate was 17.4%, and the proportion of residents living in poverty was 24.1%, while in Chicago, the unemployment rate was 10% and the poverty rate was 19.6% (United States Census, 2000). The community was also struggling with a high incidence of crime and drug activity. These issues often placed the neighborhood in the spotlight of negative sensationalist mainstream media outlets within the city.

The project involved weekly meetings at the sponsoring community-based organization (CBO) with the entire interdisciplinary project team. The sponsoring CBO had been a catalyst for improving the neighborhood with a number of grassroots community development projects emphasizing health. The CBO was also the sponsor of the grassroots group composed of block leaders who participated in this project. The interdisciplinary project team included people from the community as well as others from partner agencies and institutions. Team members from the community included: two African American female block leaders, two African American female residents who were trained to assist in conducting interviews in the community and had previous experience with similar projects but had chosen not to be block leaders, and one African American female CBO staff member. Team members who were not community residents included: an African American male who worked at the CBO as the technology coordinator, a Caucasian female public health nurse with expertise in informatics from a nearby hospital, a Caucasian male doctor from the hospital who was the project's

Principal Investigator (PI), a Caucasian female sociologist who was a CBO staff, a Hispanic female community researcher from a local university (Yolanda, the first author), and a Caucasian female graduate student (Leah, the second author). Meetings were held weekly for three years at sites that alternated between the CBO and the hospital. None of the weekly team meetings were held at the university site.

Yolanda was clearly different from the target population in race and socio economic status. She is a Latina woman who grew up in a middle class neighborhood in South America. She was approached by the PI of the project to direct the evaluation of the intervention because she had experience conducting a successful participatory evaluation with a local agency (see Suarez-Balcazar & Orellana-Damacela, 1999) and because she had established a strong relationship with African American CBO staff and activists from the community. Furthermore, the PI wanted a community researcher with an empowerment and participatory approach to conduct the evaluation and contribute to the project. The partnership followed key frameworks and principles of university-community collaborations and Participatory Action Research (Balcazar, Keys, Kaplan, & Suarez-Balcazar, 1998; Foster-Fishman, Berkowitz, Lounsbury, Jacobson, & Allen, 2001; Suarez-Balcazar et al., 2004). Consequently, block leaders planned the program, selected the web page logo, selected the web page content, and assisted in the implementation of the intervention.

The community in which the project took place was known as a "dangerous neighborhood." It was not unusual for the city's major newspapers and other local media to depict crime and drug-related incidents occurring in the neighborhood. We had all been exposed to negative media portrayals of the community before beginning the project. Although not all partnership members lived in the community, all were from the city's metropolitan area and resided in the city or in nearby suburbs.

Block leaders were very aware of others' perceptions of their community and critical of the treatment they were receiving from those in positions of authority, such as the city government and the police. From the onset of the project, block leaders felt comfortable sharing comments such as the following with us: "Everyone thinks we are dangerous people because we live in this neighborhood, and what you will find are mostly women like me," spoken by a hard-working volunteer, with a part-time job, raising two grandchildren. Other comments included: "We feel discriminated against; if we call the police, they don't come because they are afraid to come," "We have professionals in our community, decent people and many adults who love their neighborhood," "The other day I ordered something through a catalog and they didn't want to deliver the package to my house because they think it is not safe." As we grew closer to the community residents and block leaders, we took on a very supportive role

by listening and acknowledging members' concerns, volunteering at community events, and attending their grassroots meetings.

Despite our efforts to understand the community, we had safety concerns as leaders shared stories of crimes with us. During the first year of the project, a female teenager from the community was abducted and later found dead, which was publicized in the city's newspapers on the front page. During this tragic event, the community felt abandoned by the city while the police offered little help in apprehending the murderer. Furthermore, the community was upset that only the negative event–the abduction and killing of a female adolescent–made it into the newspapers, but nothing was said about the community galvanizing, organizing, and conducting vigils, nor about how these efforts spear-headed the eventual capture of the culprit with little support from the police department.

Challenges and responses: The realities and myths of neighborhood safety

The reality of safety issues was that crime statistics for this neighborhood were high compared to other neighborhoods in the city of Chicago. As part of the project, census data and maps of the community were used to assess the placement of WebTVs so that every block had one leader with a WebTV. One member of the partnership team had a connection with the police department, and through this contact we were able to have access to a complete report of the types of crimes happening on each street in the neighborhood. Interested in addressing issues of safety, the sponsoring agency recommended examining crime data because residents had mentioned that they did not attend health-related programs at night, in part, because of safety concerns. The information was mapped using a Geographical Information System (GIS) in order to monitor crime activity and provide this information to the block leaders. Leaders could then view the GIS crime maps on their WebTV units using a password.

One of the challenges for us was to decide how to use these data. Having access to the crime data was discussed at team meetings, and team members thought we could post the crime data on the web page. However, community residents were opposed to this idea. Leaders did not want to have the data available to just anyone searching the project's web page. After several discussions, leaders suggested having the crime data available only with a secret password and only to the block leaders who could decide whether they wanted to share that data with other residents. The team then implemented the leaders' recommendation. Leaders thought that crime data, posted on the web page, would make their neighborhood look bad and would drive some residents away. Some leaders then decided to share the GIS information with

block club members to alert residents of crimes happening on their streets and for block club members to plan actions to prevent future crime. We asked community leaders if they wanted us to continue mapping crime data, and they decided they did.

The knowledge of the streets with the high incidence of crime brought in another safety challenge regarding data collection. Surveys on sense of community, empowerment, and attitudes and knowledge of the use technology completed by the 42 block leaders were to be completed by a comparison sample of residents to test differences at pre and post test. Based on feedback received from the CBO, mailing surveys was not an option, as this strategy had not been successful in the community. The one strategy that had been recommended by the team and endorsed by the block leaders and the CBO was door-to-door canvassing. Based on the GIS and residents' recommendations, the new challenge became how to gather survey data on the streets that had high incidence of crime. After several discussions with team members, we developed a very pragmatic response to the challenge: A few streets identified by leaders and CBO staff as having the highest incidences of crime were not considered in the door-to-door canvassing for the comparison group. The two female African American residents from the community, who were trained to collect data and conduct door-to-door interviews along with us, spoke openly about not wanting to visit some streets. We understood that by not doing so we were threatening the representativeness of the sample of residents, but all team members thought it was most important to protect the safety of the canvassing teams. Comparison survey data was not collected on about five blocks. Furthermore, the leaders recommended that block members exert caution in these streets when coming to grassroots group meetings at night. The partnership team also shared "caution notes," when collecting data from the rest of the neighborhood, such as going in pairs involving one person from the community and another one from the outside.

We realized that by having daily crime data available and by discussing these issues weekly at meetings, we were further sensitized to issues of safety. We were also affected by the fact that often during meetings, community members would report shootings that had happened during previous nights, and how the community was responding to those events (e.g., vigils, meetings with the police and the Alderman, etc). We also learned through stories from residents that some blocks were safer than others. Incidents happening in the community contributed to our uneasy feelings regarding safety, yet they also taught us about the residents' resilience.

Another challenge regarding the realities of safety was that the original plan was for leaders to let other neighbors into their homes and allow them to use the Internet, disseminate information to them, or train them on how to download health information. This strategy was introduced during the

individual training with each block leader. A few months into the project implementation, we realized that this part of the intervention was not happening. When this issue was discussed at a focus group, block leaders unanimously opposed letting some of their neighbors into their homes because they did not trust them, did not know them well enough, and/or thought it was not safe to do so. Therefore, based on advice from the block leaders, ten WebTVs were placed at community centers where all residents could use them. This step involved delays and extra efforts to coordinate with the local recreation centers, public high school, and after-school care centers to become part of the project. Once the WebTVs were installed and the appropriate staff were trained, the WebTVs proved to be very popular among neighborhood kids who loved having easy access to the Internet. With this experience, we felt quite naïve and realized that although we thought we knew the community well, we were not fully aware of the day-to-day concerns of community members.

Despite our previous experience working in African American communities and the level of positive rapport we were developing with the leaders, we also were influenced by the myths related to safety and fell into the trap of stereotyping community residents. Yolanda trained the graduate student and two community residents on how to conduct door-to-door 10 minute interviews. During this training, safety issues were discussed. Interviewers were instructed to take safety precautions akin to living/working in any large city. Interviewers were also instructed to cross the street or leave a block if they saw individuals that made them feel uncomfortable, saw suspicious activity, or any person that looked "suspicious." One day during a door-to-door canvassing, the two authors saw a young man who looked "suspicious" coming on the same side of the street, felt afraid, and crossed the street to avoid the individual. Later on, to our surprise, we saw the same young man at the community center running a dance class, in a room filled to capacity with about 40 kids dancing to rap music. This same young man was described by agency staff as an excellent student and mentor who devoted many hours as a volunteer at the center.

The above incident made us realize that although we had developed good rapport with and were well accepted by team members, grassroots leaders, and CBO staff (e.g., often greeted us with hugs, invited us to their meetings) we were interacting with the larger community based on negative stereotypes. We had the stereotype that African American males that fit certain patterns, such as that of wearing baggy clothes, low-cut pants, and having big body frames were likely to be dangerous. We were judging others based on our own bias, supported by negative portrayals perpetuated by the media about what constitutes a "suspicious" person. Perhaps we stereotyped because we became over-sensitized about safety issues given our discussions of crime incidents in the community. In fact, in the eyes of

community residents, as outsiders we were probably the ones who looked suspicious. We felt badly about our stereotypes and realized that we could not judge residents by their appearance, yet we also became more sensitive to the predicaments that community members were experiencing.

Reflection

When working in a community that is facing economic and social hardships, it is challenging for researchers to recognize the negative events that pose safety concerns while also acknowledging the positive responses to marginalization coming from the community. Unfortunately, the negative often overshadows the positive, and researchers are more likely to distance themselves by avoiding contact, limiting community visits, or by working through intermediaries or third persons, such as hiring others. The residents we were working with had not given up on their community, and they were openly fighting crime and emphasizing safety. They used the WebTV to organize efforts such as meetings with law enforcement officers, holding vigils at corners known for drug activity, posting street signs, advocating to the city for street light posts to be placed on dark streets, and calling the police. As researchers we are challenged to follow their lead.

We observed how leaders were reaching out to young adults and youth and creating a number of community development efforts to improve their community. We felt inspired by the community's hope and faith in their neighborhood. We felt satisfied with the intervention and believed the project was successful in many ways (Masi, Suarez-Balcazar, Cassey, Kinney, & Piotrowski, 2003; Suarez-Balcazar, Kinney, Masi, Cassey, & Muhammad, 2005). Leaders were using the WebTV as a tool to access information and resources and to communicate with one another to advance their community development efforts. The WebTV project, in a way, was supporting their efforts to improve the community (see Suarez-Balcazar & Kinney, 2002). For example, leaders were using the WebTV unit to obtain free seeds and advice for the construction of a new community garden, and to obtain information for a health fair. Furthermore, leaders felt great having access to technology and using the Internet. Some of their comments included: "I never thought technology would be so easy to use here in my neighborhood." Block leaders also said: "I feel tremendous pride in my new skill," "technology changed my life because I have a new way of gaining access to information and communicating," "I can communicate with the other leaders easier than before I had the WebTV," "I feel empowered because I have a sense of what is happening in my community and the world."

Despite the project's success we experienced many diversity challenges, such as the safety issues discussed in this paper. Although most team members had experience working in the same community and we came to the

community feeling prepared, we realized through the weekly experience with residents that inadvertently we were still holding negative stereotypes. Therefore, we realized that being genuinely interested in the welfare of the community and knowing some of the leaders of the community was not enough to free us of negative stereotypes. Reading about marginalized communities is not a sufficient antidote, as most literature and statistics portray these communities negatively and only contribute to stereotypes of communities and individuals. Unfortunately, communities of color are often subjected to a variety of stereotypes perpetuated by media outlets, misinterpretations of statistical data (e.g., Census), and negative research reports. In particular, television, film images, and newspaper articles are more likely to depict African American males in negative ways (Spigner, 1994; Zilber, 2000). Sometimes, researchers' biases when reporting about communities of color, or when using Whites as the norm for comparison, contribute to the maintenance of these stereotypes (American Psychological Association, 2003; Fisher et al., 2002).

According to Aronson, Wilson, and Akert (1999) stereotypes are unfair and limit our ability to see individual differences within a class of people. Individuals have their own right to define their own identity without fearing discrimination, oppression, prejudice, and judgment based on a single standard (Rappaport, 1987; Trickett, Watts, & Birman, 1994). Communities of color are weary of being portrayed in negative ways. A block leader said to us, "we are tired of people coming to our community assuming the worst. A researcher from a local university once approached me and said she wanted to come to the community to study violence... my first thought was why is she assuming, before getting to know my community, that we are a violent neighborhood?" As illustrated by our story, oppressed groups such as this African American neighborhood, experience a number of everyday inequalities (Bond, 1999). The stereotypes faced by residents of this neighborhood have contributed to actual acts of prejudice and discrimination against the group (e.g., non-delivery of packages, police not responding to calls, lack of access to technology). These experiences of discrimination have been described by researchers as forms of sociopolitical oppression (Serrano-Garcia & Bond, 1994; Watts, Griffith, & Abdul-Adil, 1999).

One important way to respond to the challenges described in this paper was to focus on community strengths. As part of the evaluation component, we collected WebTV stories about the impact that the use of technology was having in the lives of the leaders. These stories were collected during our bimonthly phone interviews with the block leaders. The stories included narrative descriptions of successful uses of the WebTV (see Suarez-Balcazar et al., 2005). We collected 450 stories in three years. In an effort to balance the report of negative news such as crime data, we began (with the block leaders' support) to report these stories at meetings, post them on the web, and make them publicly available. For example, five to fifteen minutes of the monthly grassroots meeting agenda were devoted to the technology project where we reported only positive stories. The sharing of narrative stories and the number of stories was very well received by community members. This was, in fact, one of the aspects of the project that they liked the most.

By attending grassroots group meetings, we not only met hard working, hospitable, caring individuals, but it also affirmed the central importance of spirituality in their lives. Spirituality provided hope for the future of the community and was a way to cope with issues of safety. We observed how all meetings began and ended with an uplifting prayer. We also observed that many of the narrative stories shared by the block leaders and many of the email messages shared through the project's Listserv were about spirituality. We included spirituality as an important aspect to observe and study, and more importantly, as a strength of the community. The spiritual messages became a source of support and networking for residents, which is a defining feature of sense of community (see Sarason, 1993). Researchers have highlighted the fact that spirituality plays a critical role in the survival of oppressed groups (Moore, Kloos, & Rasmussen, 2001). Among African Americans in particular, spirituality is a source of empowerment, mutual support, and a vehicle for social change in the face of adversity (Mattis & Jagers, 2001; Taylor & Chatters, 1991).

While we recognized issues of safety, we also paid attention to identifying strengths and community assets. We continued to work in a "shoulder to shoulder" capacity, to learn about the community's assets, and to focus on getting to know its members until the project ended and was gradually taken over by the CBO and the grassroots group. Out of a genuine interest in developing a good relationship with the community, we avoided using scientific jargon, involved leaders and CBO staff in all the pertinent decisions about the intervention, allowed the leaders to take control of the program, and followed collaborative frameworks of participatory research (Jason et al., 2004; Selener, 1997). Once we knew the community and the residents that we were working with, we uncovered a complex reality—positive events, as well as negative events and people involved in illegal activities. However, it is important to realize that the drug trade and resulting underground economy are a response of members of the community to the economic marginalization and lack of real opportunities for social mobility, especially, for males in the community.

In our many conversations with the block leaders, we realized that gender was a factor related to safety in many ways. Most of the community leaders we worked with were women who were more concerned about issues of safety than the men, whether they were from the community or not. In

fact, the only two males on the team, one African American and one Caucasian, never expressed concerns about safety. Past research indicates that we as women are more concerned about safety and crime issues in part because we see ourselves as more vulnerable and we are indeed more likely to be victims of crime (Riger, 1999). Yolanda personally also felt particularly vulnerable as she is a petite Latina woman. However, given our previous successful collaborative experience with the community, we took precautions and never felt threatened. Despite our concern for safety, in three years of the project which involved weekly meetings, monthly grassroots evening group meetings, and 90 home visits for data collection, we never experienced any real threats to our safety.

This project provided important lessons about our working in a marginalized community facing a number of economic and social challenges, such as crime, while at the same time responding to adversity in many positive ways. The following is a discussion of the most important lessons we learned.

First, we realized that we all have biases that we need to acknowledge and be aware of. The American Psychological Association's new guidelines on multicultural education and commitment to cultural awareness (see APA, 2003) speaks to this issue: "Psychologists are encouraged to recognize that, as cultural beings, they may hold attitudes and beliefs that can detrimentally influence their perceptions of and interactions with individuals who are ethnically and racially different from themselves" (p. 382). As researchers, we need to be aware of our own attitudes and perceptions about others who are different from us, as we might be more biased than we think (APA, 2003). We need to avoid being carried away by negative descriptions in the media and crime reports, incorrect interpretations of census data, and research reports about communities of color. By accepting stereotypical portrayals of communities of color, we neglect to see the real picture, and this contributes to acts of discrimination and prejudicial attitudes (APA, 2003; Comas-Días, 2000; Fisher et al., 2002; Peffley & Hurwitz, 1997; Suarez-Balcazar, Orellana-Damacela, Portillo, Rowan, & Andrews-Guillen, 2003).

Second, we also learned that the minority community we were working with shared multiple realities and, while objectively safety was a concern, we had to deal with both the myths and realities of safety. We realized there is a tension between what is a myth and was is real. As suggested by Bond (1999), community research in diverse neighborhoods implies recognizing multiple realities and acknowledging differences. We learned that as researchers we needed to be aware of the multiple realities within marginalized communities. Through three years of project involvement, we learned that the community was very heterogeneous. While

we recognized issues of safety, we paid attention to identifying strengths and community assets.

The third lesson we learned was the importance of focusing on community strengths. The community we worked with had strong levels of community activism, high level of community participation in grass roots groups, and a high number of community action projects to actively fight crime and address issues of safety, health and youth development. A strengths approach is one of the cornerstone principles of our field (Dalton, Elias, & Wandersman, 2001; Prilleltensky, 2001). In addition, listening to residents' experiences of oppression provided opportunities for reflecting about our own biases. When we changed our strategy and stopped framing the community based on over-generalized interpretations and crime data, we were able to recognize community strengths, such as spirituality and the high level of voluntarism among residents. Spirituality, cooperative practices, high levels of community participation, and strong family and neighbor ties have been described as strengths and sources of support in African American communities (Dunn & Dawes, 1999; Kloos & Moore, 2000; Mattis & Jagers, 2001; Moore et al., 2001; Snowden, 2001). Building on community strengths, listening to people's experiences, and working closely with them within a participatory action approach represent potential responses to diversity challenges.

The final implication of our story was the importance of allowing block leaders to have a voice in the intervention project. Following a PAR approach, block leaders became involved in all decisions regarding the planning, implementation and evaluation of the initiative. This approach facilitated the open discussion of issues of safety described in our story and it also provided a milieu for block leaders to express their concerns and share their views with us regarding their neighborhood and the Internet initiative. We think that residents were more open to discussing these issues and expressing their frustration with the police, the media, and others in positions of power because we had developed rapport with them and paid careful attention to developing a trustful and respectful relationship.

To conclude, we find it of most importance for community researchers to find forums to discuss the process of doing action research with minority communities and reflect on the many lessons about diversity that we learned from our communities. It is thanks to our diverse communities that we get the opportunity to engage in exciting and most challenging projects.

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