GUIDELINES FOR ENTRY INTO AN ABORIGINAL COMMUNITY

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Abstract / Résumé

A qualitative research project addressing the issues of fetal alcohol syndrome (FAS) and fetal alcohol effects (FAE) was conducted in a northern community in Canada. Gaining entry into this community in a culturally sensitive manner was a major part of the project. In this article, the theoretical components of cultural sensitivity are followed by a discussion of the stages of entry into a community. Eighteen specific, culturally sensitive guidelines for entry into a community are presented. These guidelines provide essential information for those planning to study Native or other ethnic communities.

Un projet de recherche qualitative portant sur les problèmes du syndrome d'alcoolisme foetal (SAF) et les effects foetaux de l'alcoolisme (EFA) a été réalisé dans une communauté du Grand Nord canadien. Pénétrer la communauté d’un point de vue culturel constitue un point important du projet. Dans cet article, les composantes théoriques de la sensibilité culturelle sont suivis d’une discussion sur les différentes étapes d'intégration à la communauté. Les dix-huit lignes directives spécifiques et sensibles à la culture qui ont permis l'insertion dans la communauté sont présentées. Ces lignes directives fournissent des renseignements essentiels pour les personnes projetant d'étudier les communautés autochtones ou d'autre origine ethnique.

Historically, research conducted in Aboriginal communities has been done at the discretion and under the direction of White professionals. As a result, Aboriginal people have become cautious when research is proposed for their community. It is now recognized that the research questions and subsequent research direction must come from the community. The focus of research then becomes the betterment of the community rather than the betterment of the investigator or other stakeholders outside the community. Researchers should be instrumental in the research process rather than being in the centre of the process (Ryan, personal communication, April 22, 1994). This shift highlights the importance of cultural sensitivity in the research process.

In response to an invitation from the Dene people to the Arctic Institution of Canada, we explored the concerns and beliefs of people in a Northwest Territories community about fetal alcohol syndrome (FAS) and fetal alcohol effects (FAE). A review of the literature provided very little guidance with respect to entering such a community in a culturally sensitive manner. Although the research project was initiated by a Dene organization, which is responsible for overseeing many projects throughout the Dene Nation, the organization also allowed and encouraged issues and projects to be worked out at the community level. The fact that the Dene organization asked for work to be done on FAS/FAE did not automatically mean entry. Acceptance could only be provided by willing Aboriginal people. The contact person could not, and would not, dictate how the project was accepted or directed by individual community members and council. This person did, however, provide an opportunity for entry into the community through the invitation for research of FAS/FAE and facilitating our stay, as researchers, at the Dene Substance Abuse Treatment Centre. How we conducted ourselves within that context determined the perception of our sincerity and ultimately our entry.

The objective of this article is to: 1) provide insight into the process of entry into a community, and 2) present culturally sensitive guidelines used to establish a trusting relationship with that community. These guidelines were developed as the study on FAS/FAE unfolded and as the researchers responded to the guidance of the Dene and to their own intuition and sensitivities. It is now, in retrospect, that specific guidelines, which we sought prior to the study, have become clear. This article reviews the process of entry into an Aboriginal community, and not the results of the FAS/FAE study.
Cultural Sensitivity

Cultural sensitivity in research is defined by Henderson (1992) as research done with a raised consciousness concerning the impact of a culture on: 1) the persons and/or phenomena being studied, 2) on the research process itself and 3) perhaps most importantly, on the researcher. So far, there is very little literature that deals with cultural sensitivity with respect to Aboriginal communities in Canada. The issue of cultural sensitivity in the counselling process has been the subject of many authors (Schinke et al., 1986; Moore, 1992; Dillon, 1994; Holaday et al., 1994). However, this information is of limited use in the context of the relationship between a researcher and a community as it addresses the issue at only an individual level. Kagawa-Singer and Chung (1994) attempted to address cultural sensitivity at the community level when they developed a paradigm for culturally based care for Japanese and Chinese cultures. Their paradigm incorporated the unique way each culture defines and works to achieve universal, basic needs such as safety, security, integrity, and a sense of social belonging. These authors' intention was to use this paradigm to tailor health care to specific cultures. However, their paradigm is not directly applicable to the Aboriginal culture.

In much of the published literature, cultural sensitivity implies that a "dominant" culture has an important educational or health care program that can be applied to another culture in a "culturally sensitive way". This perspective of cultural sensitivity is supported by Parfitt (1994) who found that western nurses working in Third World countries saw themselves as knowing what was right for others and were essentially activists seeking to "do" many things. The danger with this approach is that health professionals may perceive their strategies for achieving health as superior or more effective than the alternative ways of the culture they came to help. This is a subtle form of ethnocentrism.

Four limitations to understanding what cultural sensitivity is, have been discussed by Ridley et al. (1994):

1. A variety of terms have been used interchangeably with cultural sensitivity such as: "cross cultural competence, cross cultural expertise, cross cultural effectiveness, cross cultural responsiveness, cultural awareness and culturally skilled" (Ridley et al.:125). This proliferation of terminology demonstrates the vague and huge definition of what cultural sensitivity really means.

2. It is recognized that a continuum of cultural sensitivity exists. This continuum moves from prerequisites of culturally responsive behaviour (knowledge, attitudes and perceptions) to culturally
responsive behaviour (the expression of values and setting culturally relevant goals) to the effects of culturally responsive behaviour (high client satisfaction and rating researchers as trustworthy). The problem is that there has been little documentation of hypothetical or actual examples of what each of these indicators mean.

3. The third limitation to understanding cultural sensitivity is that "researchers and scholars tout cultural sensitivity as essential to therapeutic success, but do not explain how to achieve it or why it is necessary" (Ridley, et al.:127), which implies a lack of theoretical grounding.

4. Lastly, there is a lack of instruments measuring cultural sensitivity and appropriate research designs. A tool developed by Pruegger and Rogers (1993) to measure cultural sensitivity was not appropriate to our use as it focused on the degree to which individuals valued or tolerated different cultures rather than how one could express and communicate cultural sensitivity.

The main focus of this paper relates to the lack of theoretical grounding and inadequate description of indicators. By providing examples, we have tried to address these issues.

Stages of Entry Defined

Cultural sensitivity is required when conducting research so that entry into a community will result in an effective working relationship with community members. The stages of entry into any community have been identified by Johnson (1984) and Hutchinson (1985) as stopping, waiting, transition, and entry. Stopping occurs when one is impeded in entering a community through formal or informal means. This stage is crucial to moving into consecutive stages as movement is contingent on how the activities and intentions of the researcher are perceived by the community. If there is no progression through the consecutive stages, the project will be terminated or, if it is pursued, the results will be erroneous as community members may not share their genuine reflections. The second stage, waiting, is closely related to the stopping phase as community members assess whether the researcher is worth trusting and worth the investment of their time. It is not until the transition stage that the researcher becomes truly involved in some community activities. Entry, the final stage, occurs only when trust is established and feelings and reflections are shared openly with the researcher.
In our observation, gaining entry into a community can move through different stages with different individuals and groups even within the same community. This process is not necessarily unidirectional and may move backwards, as well as forwards, through the stages of entry. This issue has not been addressed in the literature. Another aspect which is not addressed in the literature is that the process of entry not only depends on the researcher gaining entry into the community but also on the community developing a relationship with the researcher.

Simply knowing the theoretical stages of entry into a community may be of little practical value to a researcher. It is important to identify how the theoretical process of entering into an Aboriginal community is put into practice (operationalized). Awareness of this process could help researchers be cognizant of the barriers they themselves may create to open, honest communication. Researchers need specific, practical guidelines that can be followed when entering a community. The general methodological guidelines for conducting culturally sensitive research that have been proposed (Slattery, 1987, Henderson et al., 1992) are not comprehensive and do not address the Canadian Aboriginal population specifically. Goulet (1993) describes his experience of learning about dreams from Dene Elders but did not outline any specific guidelines. Some guidelines for working with Native communities have been formulated by Erasmus and Ensign (1989). However, their focus was on facilitating economic development in the community rather than on health concerns (i.e. healthy public policies). Although some of their advice about how to establish and maintain a rapport with community members is applicable, health issues may be more personal and involve more self disclosure. Therefore, these guidelines must be adjusted.

The Study

Representatives from The University of Calgary were invited by a Dene organization to conduct an exploratory study on perceptions and beliefs of community members about FAS/FAE. This study was started during the spring of 1994. Gaining access to community members was not easy and straightforward, and much was learned about entering an Aboriginal community. In the following section, the four stages of entry into a community will be discussed as they were experienced in this research project.
The Research Process

The Stopping Stage

An Aboriginal person was designated as our contact person by the Arctic Institute of Canada and the Dene Cultural Institute for the duration of time the study was conducted. This person made arrangements for us to stay at an alcohol treatment centre during the research period. Initially, we were disappointed with this arrangement as we believed that living in the home of a Dene family would enhance acceptance into the community. We also expected that after one week at the treatment centre, we would interview members of a small Dene community rather than remain in the treatment centre which was located in a larger Aboriginal/White community. It soon became apparent that this would not occur. The Dene did not want researchers who were unknown to them, to rush in and talk about such a sensitive issue.

Initially, the contact person seemed cautious and reserved as brief introductions to the personnel at the treatment centre were made. A formal meeting was held on the second day to share the literature review and possible research strategies. At that time, no permission was given to start interviewing Aboriginal people. At the treatment centre, the clients quietly watched us, strangers, who would be living in their dormitory. We felt alone and blocked. There seemed to be no progress. According to the stages of entry into a community, this was the stopping stage.

The Waiting Stage

At the formal meeting, we were directed to interview White people, to find out what their beliefs and perceptions were about FAS/FAE. The explanation for this was that the Dene needed to know whether support systems and professionals themselves were ready to provide the physical care required if the Dene started facing the realities of FAS/FAE and also, more importantly, whether professionals were sensitive to the emotional and spiritual pain related to such an issue. Therefore, for the ensuing two week period, we interviewed many White professionals, agency personnel, and private individuals as the Dene watched our progress. Gaining entry with the White population was not an issue as we were generally accepted and there were few questions about our credibility. This could have been due to the lack of cultural barriers between us or because FAS/FAE was not perceived as their immediate problem.

During this time, as we lived at the treatment centre, relationships and trust were established with the clients through informal activities. We monitored our activities carefully so that interactions with clients did not
become therapeutic in nature. This would have over stepped our boundaries and interfered with the work of the Aboriginal counsellors. Initially, male clients were more friendly. Women were more reticent, not even bringing out their crafts for the first few days. Once acceptance by the group occurred, however, casual conversation and doing crafts together became a reality.

The Aboriginal counsellors and other Dene seemed to evaluate us unobtrusively. This was the waiting stage. Throughout this stage, the Dene assessed our approach and work with the White population as well as our informal activities at the treatment centre. After a period of time they deemed us worthy of their investment of time.

The Transition Stage

After two weeks of interviewing only White people and having limited contact with the Dene liaison person, we felt we had gained little insight regarding the Aboriginal peoples' beliefs about FAS/FAE. At this time, one of the researchers left the community as planned. I again expected to be directed out into a small Dene community to conduct interviews. However, instructions were given to talk with Dene counsellors and visitors at the treatment centre who had monitored our behaviours during the previous two weeks. Unlike the first half of the project, I conducted no formal interviews. Conversations were spontaneous, generally during coffee and smoke breaks. I carefully listened to the concerns and perceptions of the Dene and recorded these in a journal as soon as possible following each conversation.

During this stage, the contact person suggested to seek permission from the Chief and Council to talk with some Elders in the community as Council must give approval for interactions with Elders (Erasmus, 1989). Permission was denied, stating that Elders would have nothing to talk about because FAS/FAE was not seen as an issue in the community. The interaction with Chief and Council provided the opportunity to start the process of entry into the community outside the treatment centre even though it was initially stopped. Other Dene people indicated that discussing the topic of FAS/FAE was new to the community and that the Chief and most of the Council were not ready to explore this potentially painful subject. Later, however, one Council member privately asked for more information and expressed concern about children in the community.

Despite the setback at the Council level, the process at the treatment centre moved from the waiting phase to the transition phase. Several occurrences marked this change: more reserved, older clients came and voluntarily discussed family matters; some female clients told stories of
what the Elders had said; and an ex-client told about past abuse. I was included in conversations with staff, in drum dancing, in barbecues, and in some social events outside the treatment centre.

The Movement Toward the Acceptance Stage

Throughout the study, interactions with the contact person occurred only through initiation by us to provide updates on the data collection. I experienced frustration and confusion because the process moved slowly and because we were monitored in an indirect manner. The informal network of communication worked very well, and the contact person would have been appraised immediately of any concerns. Being on my own seemed to be more conducive to interactions and joint activities with the Dene. However, the contact person did indicate the results of the project were helpful because of the skill and cultural sensitivity we both exhibited which facilitated an openness in the discussion of FAS/FAE. However, regardless of what was achieved, the final stage of entry into the community, when feelings and issues are openly shared with a researcher, was never fully reached.

Guidelines for Entry into a Community

The following recommendations provide guidelines whereby cultural sensitivity can be incorporated into the research process. These guidelines are not comprehensive nor applicable to all settings but may be useful to other researchers anticipating research in a Native community. If entry into a community occurs, the research results will more accurately reflect the issues of the community and ultimately, will be more helpful to community decisions.

Be Prepared for the Uncertainty of the Process

A researcher must not have any preconceived ideas regarding the specific outcome of the process and must realize that he or she cannot control the process. What was originally envisioned and what the Dene suggested was different. If we had insisted on talking to Elders or going to a smaller or another Dene community, we might have invalidated the research process and results.

Recognize that the Aboriginal People are in Charge and Be Patient

Although living at the treatment centre was advantageous because many activities occurred there, it was also a challenge, for us as we were both nurses. Being a nurse, it was difficult at times not to step in and do things for others or help in a physical assessment. The Dene, however,
communicated this boundary of roles through verbal and non-verbal means. Waiting also occurred when direction was given to interview White people rather than any Dene, and when the Chief and Council did not want the Elders to be interviewed. There were many times when we wanted to go ahead and actively conduct research, but waited instead for the right time to approach the issue and to gain permission from those guiding our activities. Respecting the instructions given to us allowed us to finally gain entry into the community.

Consider the Implications of the Number of Researchers

In this case study, initially two researchers worked with the community. One researcher left midway through the process. The advantages of working together was that the frustration, confusion, and loneliness experienced at the stopping stage was not as acute and we were able to use each other for consultation and confirmation of what was sensed or observed. Another advantage was that because of our differences in background and in health care experience, we could augment each other in understanding the complex issue of FAS/FAE.

The disadvantage may be that having two researchers coming into a community may slow progress through the initial stages because two people may be perceived as threatening. It seemed as if the openness in sharing by the Dene increased when only one researcher was left in the community. This may be because the previous stages were already worked through or it could be because one individual was seen as less intrusive than that of two outside researchers.

When a community requests research be conducted, the benefits and risks of having one or more outside researchers in the community must be considered. This decision may have an unknown but profound effect on the entire process.

Be Honest About Your Motives

Researchers must reflect on their motives about working with Aboriginal people. Motives are communicated through many actions that are analyzed quietly without a researcher even being aware. One may acknowledge intellectually that the work is done for the betterment of a community. However, this may be challenged either subtly or directly. For example, those who worked at the centre or visited would ask me questions about the research and what I was doing. Once this was followed by the question, “Are you just coming to get information and leave like everybody else?” It was at this time I also discovered that my activities had been closely evaluated to determine my motives, honesty, openness, and other personality traits crucial to the process. The errors of past researchers were used
to confront and to test what my motives and intentions really were. This seemed to open the way to sharing the pain related to the FAS/FAE problem in the Dene community. When people started sharing this pain, I gained insight in the depth of the spiritual and emotional pain that is so much hidden behind the laughter of the Dene people. These experiences forced me to reevaluate my own personal motives for doing this research.

Be Yourself and Participate in the Community

Erasmus (1989) advised community workers to be as informal as possible: be who you are, be "human", do not play "a role", and dress appropriately because people sense insincerity and role playing. Participating in community activities, such as bush riding, playing volleyball, going for walks, watching the river break up, and attempting beadwork facilitated mutual trust and communication.

Monitor Feelings

I remained at the treatment centre for the entire period of the project. At times, I felt frustrated, lonely, and missed guidance. There was a need for me to work through those feelings. This, perhaps, helped me to better understand what Aboriginals experienced when they were displaced from their homes and families during illnesses such as tuberculosis or during pregnancies to hospital-based care by White health care professionals. This experience provided an opportunity to become more aware of what it was like not to be in control and not to be a part of the dominant society.

On more than one occasion, the intense emotional and spiritual pain of the community was sensed. At times, I reacted with physical symptoms, such as nausea, when exposed to this pain of spirit. Initially I attempted to rationalize these feelings and to understand it from an intellectual perspective. However, this coping mechanism was ineffective. Instead, the Dene encouraged me to acknowledge and accept these feelings. While one must recognize these feelings, at the same time, these same feelings must be worked through for the benefit of others in the community and the project.

Be Ready to Teach and to Share Ideas

We went to the community with the assumption that the purpose of qualitative research was to listen to what people had to say about the issue of FAS/FAE and not to influence the decisions of the community by teaching. However, this was only part of the process that was expected by the Dene. We were consulted by both Dene and Caucasian members of the community on specific issues of FAS and were asked about recent research on the topic. We were also asked to lead discussion groups with foster parents and with staff members of organizations about FAS/FAE. We
discovered that we were considered a resource for information as well as facilitating a discussion within the community. The research process included sharing from both sides.

**Be Prepared for the Unexpected**

Some of the most valuable times during the project were spontaneous conversations or activities. These included coffee breaks or meal times with individuals sharing stones of past experiences and pain. In the unexpected situations, honesty about why I was in the community facilitated more open communication. It was during one such occurrence that the intensity of the pain associated with FAS/FAE was poignantly shared.

**Allow for Time**

A researcher must allow time to listen to stories of events. This form of communication places little value on and adheres to no strict schedules. It takes time for people to feel comfortable and trusting enough to talk about the real issues (Erasmus, 1989). When opportunities to listen arise unexpectedly one must take the time and make the most of that opportunity. The duration of a month provided the time to move from the stopping to the waiting and then into the transition stage with some individuals. However, it was insufficient time for the acceptance stage (Johnson, 1984; Hutchinson, 1985) to occur.

**Be Sensitive**

The purpose of this study was to assess issues surrounding FAS/FAE. Initially, we planned to tape-record the interviews. However, as the process was less structured than anticipated, no tape-recorder was used. It became clear to us that using a tape recorder would be a deterrent to open, spontaneous communication because of the complexity of the issue. The benefit of not using a tape recorder was that we learned to listen more attentively, which may also have facilitated better communication (Barnsley, 1992). Another benefit is that the people felt freer to communicate. Even note taking at times seemed inappropriate because of the intensity of the conversation.

**Recognize and Respect the Spiritual Component**

The philosophy of Aboriginal culture is deeply rooted in spirituality which is based on love, respect, and kindness. The Dene historically lived according to this code. When organized religion came, the Dene had no problems fitting into a religion that preached love and peace but problems arose when Dene spirituality was forgotten in favour of religion. Some religions still maintain that Dene spirituality is heathen. The split between traditional
Dene spirituality and organized religion was evident in some polarization of families within the community. Researchers need to be sensitive to the repercussions of religious involvement or dynamics in the community as this will have implications on who is perceived as trustworthy in confiding to about spiritual and emotional pain.

**Consider what Facilitates Interaction with Community Members**

Living at the treatment centre was advantageous as it was a central meeting place for some cultural and social events. This provided the opportunity for us to integrate into the community more quickly. As the experience evolved, it became evident that this provided a unique opportunity to interact informally with many different people. Otherwise this may have taken months or years. The people who came to the centre came from many different areas of the north and they held many different positions: Aboriginal counsellors, Elders, prominent political personnel, casual friends, and community workers. When researchers consider an accommodation, the neutrality of the place and how it facilitates the inclusion of community events should be considered.

**Enjoy and Allow Humour**

The presence of humour is one sign that a researcher has moved into the transitional stage (Johnson, 1984; Hutchinson, 1985). For us, this stage became evident more quickly with clients than with community members. To a newcomer, Aboriginal people are quietly polite and the lack of humour may not be detected. When humour does occur however, a researcher then becomes cognizant of its significance. Humour for us took the form of jokes, tale-telling about nature to see how gullible White city people were, laughing about the colour of our skin, or laughing at my attempts (which the Dene said sounded like infant-babbling) to learn another language.

**Contribute to the Community in Economic Terms**

Pragmatic concerns such as transportation affected the project. At the start of the project, we rented a car, but as other options were discovered, I car-pooled with an Aboriginal family. In addition to helping this family financially, it provided me with the opportunity to socialize and feel a part of the community. Other economic contributions to the Aboriginal community included buying crafts from individuals rather than stores and attending a fund raising tea and a flea market. It is not known what effect these occurrences made on the project, but they helped me feel integrated into the community. These types of actions however, needed to be considered and enacted carefully as they could have the appearance of taking sides through monetary recognition of some and not of others.
Respect Confidence and Guard Against Taking Sides

The longer I stayed in the community, the more people talked about issues and about other people in the community. Some issues discussed were: 1) the influence of the churches on the community and how church doctrine had divided the community, 2) accidents or murders that caused dissension in the community, and 3) comments about individual indiscretions or weaknesses. All this knowledge created a psychological and emotional challenge for me to remain neutral. When sharing the results of the project, I found I needed to find a balance between guarding confidentiality and relating to the contact person what this community was saying. The ethical component of confidentiality in research is threatened in some northern communities due to the small population size.

Follow the Lines of Authority and Thus Show Respect For It

Initial work for the project was done in the White community, therefore seeking approval of the Chief and Council was not considered until a trusting relationship was developed with the contact person. Although the Chief and Council denied permission to interview the Elders, the process of meeting the Council facilitated discussion about the topic, and made it clear that their authority was recognized. Young adults in the community indicated they generally respected elected officials more than the Elders, as the Chief and Council usually have worked through some of the abuse issues as part of the elections requirements, whereas some Elders did not live what they taught. Seeking approval from the Chief and Council is vital to this process as it shows a recognition of the autonomy and rights of an Aboriginal community.

Be Aware of General Etiquette Expectations

Although living with a Dene family in a remote community was not an option for us, the following are some guidelines on Dene etiquette (Ryan, personal communication, April 22, 1994). When staying with a family it is not customary to knock when entering the home, but to just enter and say hello. Food is always available on the stove and on the table, with no set meal time and everything being communal. Anything, including what one might place in the refrigerator, becomes available to anyone. In the case of food allergies and concern about contaminated drinking water (especially at river break up), options are to drink tea instead of water as the water is boiled, or to drink bottled water or fruit juices. One needs to be honest while at the same time careful not to offend.

Some types of thank you gifts to individuals of families can be towels, blue metal camping plates, tea kettle, wool shirts, bright scarves, thermos
pots for coffee, stacking plastic bowls with lids, and fishing knives. Tobacco and candy are well accepted but not advised because of related health issues. The only exception is giving tobacco at a funeral as it has a special meaning at the time.

These are just some examples of etiquette for the Dene. It is important to be aware of and honour the customs of the community a researcher is working with. Therefore, one should try and find out about these before entering into a specific community.

Maintain Ongoing Consultation

Ongoing consultation between the two researchers, with a representative from the University, and with the community liaison person facilitated a better understanding of the process and avoided unnecessary problems or errors in the qualitative research process. In addition, ongoing consultation is necessary to facilitate the reflection process that is required by the researcher to understand the adjustment to a new cultural setting. The foundation to much of this collaboration was the presence of a trusted and highly skilled Aboriginal contact person. Throughout the process, it is the responsibility of the researchers to maintain ongoing communication and consultation.

Discussion

The value of this study is that the theory of cultural sensitivity and entry into a community can be further understood through concrete guidelines that were developed and refined in a Dene community. In addition, we discussed some important issues regarding entry into an Aboriginal community. If researchers are aware of the stages of entry into a community and how best to facilitate this process, harm may be avoided and more valid research results may be obtained. When problems are encountered, these can be better understood and addressed if researchers are cognizant of general guidelines that facilitate entry and cultural sensitivity.

There were times in the research experience that, upon reflection, were critical turning points. Only after these periods had been passed was the importance of certain behaviours appreciated. A Native person in Alberta wisely counselled me as I contemplated how I should act within the Native community. He advised: "Just be yourself as they will know your spirit, whether you are true or whether you are false" (Henry, personal communication, April 25, 1994). "This is particularly difficult, yet critical during the stopping stage of entry. This is the essence of respect that has a spiritual and philosophical component that will never be fully defined. Truth and
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caring is an expression of the spirit and the Native community is sensitive to this phenomenon.

These guidelines about how to facilitate the entry process will help express the respect one has for another culture and will help enhance the communication of caring for community members. Caution must be taken when generalizing these guidelines to other research, other communities, or other cultures. How each guideline is applied must be considered individually.

It must always be remembered that activities which truly communicate cultural sensitivity (i.e., the operationalization of cultural sensitivity), as well as entry, must include the philosophy of learning from and sharing with others. Examining and discussing underlying feelings and issues may take months or even years. Effective qualitative research therefore requires a commitment to this philosophy and to the entire process of research.

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