American Journal of Community Psychology, Vol. 37, Nos. 3/4, June 2006 (© 2006)
DOI: 10.1007/s10464-006-9040-9

Navigating Social Class Roles in Community Research

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Published online: 28 April 2006

This paper describes the first author's attempt to collect data in a homeless shelter without attending to her role in the social class hierarchy of the organization. The author's egalitarian approach towards the homeless clients, and her lack of involvement in "staff-only" activities, transgress the social class norms within the organizational structure. While the author is successful in gaining the trust of the homeless clients, her approach alienates shelter staff, especially those in the higher echelons of the social hierarchy. The concepts of classism, world views, and Social Identity Theory, are utilized to discuss the dilemma faced by researchers who want to challenge, or work outside, a setting's status quo.

KEY WORDS: Social class; Social norms; World view; Classism; Social identity theory; Homelessness; Social service organizations; Shelters.

For my doctoral dissertation, I set out to examine how individual and ecological factors may lead providers in homeless family shelters to have either positive (i.e., respectful, affirming) or negative (i.e., condescending, demeaning) interactions with their clients. To that end, it was important to me to include the perspectives of both staff and clients regarding client–staff dynamics in the shelter. Despite these good intentions, I was able to form a strong alliance with shelter clients to the detriment of my relationship with staff. A description of this interaction, and an analysis of some of the factors that may have led to it, are the subject of this article.

CONTEXT

Setting and Participants

The homeless shelter where the study was conducted was a short-term (or emergency) daytime facility where families (i.e., adults with dependent children) could stay between 8:00 a.m. and 6:00 p.m.,[6] store their belongings, eat, use the telephone, and receive assistance from staff in locating housing and/or a source of income—in 21 days or less. During the 5 months of data collection, the shelter housed approximately 43 families a month and employed a total of 16 full-time staff. The reflections and quotes in this article come from participant-observations and semi-structured, qualitative interviews with 17 homeless mothers and 14 staff members.

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[3]Elaine Shpungin is a European-born, white, heterosexual woman, with no disabilities. Both authors came to U.S. with refugee status as part of the third wave of Soviet-Jewish migration. Elaine Shpungin is currently the director of a psychological services clinic, which serves as the primary training site for Clinical-Community doctoral students at the University of Illinois, Urbana-Champaign. At the time of the story, she was a doctoral student at Michigan State University.

[4]While the events in the story occurred to Elaine Shpungin, and the story is written in first person, Mikhail Lyubansky was instrumental in conceptualizing the events in the way they are described in the "Discussion and Reflection" Section. He is a European-born, white, heterosexual man with no disabilities.

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[6] In the evenings, families were bussed to various locations in the city (mostly churches and motels) where they spent the nights.

0091-0562/06/0600-0227/0 © 2006 Springer Science+Business Media, Inc.

Family Demographics

Within the sample of 17 mothers, 60% identified as African-American, 30% identified as Caucasian, and the remainder identified as Bi-racial. Most mothers (65%) reported being unemployed at the time of their shelter stay, but the remaining 35% reported working an average of 38 hr a week, with a mean salary of $9.75/hr. In addition, 60% of mothers reported receiving some kind of government benefits for themselves or their children, and some women reported income from their partners or child support from ex-spouses. Thus, the total monthly income for the sample of families interviewed ranged from $0.00 to $2900.00, with a mean of $879.00 a month. Families had an average of three children with them at the shelter, with a range of 1–7, and a mean age of 7 years (ranging from 3 months to 17 years). In addition, two women in the sample reported that they were pregnant.

Staff Demographics

On average, staff demographics reflected client demographics in a number of ways, especially in terms of race and gender. For instance, staff members were 75% female, with 50% identifying as African-American, 38% as White, and 12% as Bi-Racial. The average staff salary was $11.00/hr, many of the staff had children, and one was pregnant at the time of data collection. However, these general averages mask some notable differences in demographics between staff in different positions; these differences will be described in more detail in a later portion of the story.

Gaining Entry Into the Setting

As a white, middle-class university researcher, I was aware that I would need to attend carefully to the process of gaining entrance into the shelter community (Acker, Barry, & Essevold, 1991; Sixsmith, Boneham, & Goldring, 2003). Also, because one of the main goals of my study was to represent the perspectives of both shelter staff and clients, I hoped to gain the trust and cooperation of both groups (Reid, 1993). Going in, I felt that there were several factors in my favor, but I was also aware of several potential barriers between those I hoped to interview and me.

One thing I thought I had going for me was that I was a woman entering a setting that was managed and dominated by women and where the majority of the clients were women with children. I felt this would make me less intimidating and help both clients and staff relate to me better. I also had several years of experience working with underprivileged families in diverse settings, both as a volunteer and as a researcher, and had gained some valuable skills in connecting to people with backgrounds different from mine. As a first generation Soviet-Jewish refugee, my family and I had also experienced political and religious oppression in the "old country" and mistrust and discrimination in our first few years in the United States. I believed that this helped me relate to other groups who were marginalized or oppressed. Finally, I was trained as a clinician and felt I could connect with many of the service-providers on this level, especially as several of them were working on their social work degrees.

Despite these variables, there were ways in which I felt very far removed from the setting and the people I wanted to study. Because I have no audible accent and am fair-skinned, most people who meet me perceive me as a white American-born woman. At the time of my story, I was a doctoral student in a well-known research university, working towards my PhD in Psychology, while my partner was a first year faculty member in a different university. With his professional salary, we had just purchased a house in a rural setting, about a 90 min drive from the inner city location of the shelter. I was aware of the many unspoken privileges I had as a white, educated, middle-class, woman, especially in comparison to the families I wanted to interview (McIntosh, 1988). Finally, I knew that academicians do not always form positive and mutually beneficial alliances with the communities they study and that I might need to work on convincing the shelter staff that I was well-meaning in my intentions (Markey, Santelli, & Turnbull, 1998).

Based on my awareness of these factors, I focused most of my energy in the initial stages of the study on those groups I perceived as having the most reason to distrust me: (a) the city and shelter administration; and (b) the homeless families. In contrast, I felt that the staff, whose jobs I perceived as being similar to my clinical and community work with disenfranchised individuals, would more naturally accept me. In addition, I thought providers would respond well to my desire to "represent the oft ignored voices" of shelter staff in the homelessness literature.

Using setting-entry methods that had worked for me in the past, I discussed the study with the city Shelter Board and met with the shelter director to gain her approval. During this meeting, I offered to "give back" to the setting in whatever way she thought was most appropriate, and it was decided that I would help occupy the children after school, when there was an influx of little ones in the shelter. The director then introduced me to shelter staff and left me to navigate the relationship without further intervention.

In line with my expectations, I was greeted with friendly openness by shelter providers who asked questions about my study and expressed appreciation for my volunteer work with the children. Over the next weeks, my interactions with the staff remained friendly and collegial; we would exchange greetings, ask about each other's health and make small talk. I did not generally engage in long conversations with staff, as they were busy with other tasks, and I was busy volunteering or "hanging out" with families in the main public area. Initially, as I expected, clients approached me with more reservation and suspicion than providers, but they quickly warmed up to me as I tutored their children and played with the babies. Before long, it was not uncommon for me to be engaged in conversation with family members about parenting, relationships, and life. With a growing reputation among the families that I was "all Right," I had no difficulty recruiting mothers for interviews and even had families express interest in participating in my study before I approached them.

CHALLENGE AND RESPONSE

After being in the shelter setting for several months and having interviewed half a dozen mothers, I felt that data collection was going smoothly and felt accepted and liked by the shelter families. Thus, I did not immediately notice the change in my relationship with the staff, or, rather, in their relationship with me. What I noticed first was that I was not having any success in setting up staff interviews. There never seemed to be a good time, or staff seemed to avoid my inquiries, putting me off until a "later" that never materialized. Next, I began to notice the change in staff attitude. At the time, it felt to me that "the whole staff" had turned against me, becoming sullen, tight-lipped, and downright rude. Looking back now, I see that the frontline staff had, indeed, become more reserved towards me, but it was the back-office staff (the case-workers and Center Managers) that became truly hostile, ignoring my greetings and brushing past me without even a nod. It should also be noted that the shelter director, and her assistant, who were not actually involved in the day-to-day operations of the shelter, remained friendly and courteous to me throughout my whole time at the shelter.

My initial reaction to the situation was one of anger, hurt, bewilderment, and anxiety regarding the success of my data collection. The anger and hurt stemmed from my bewilderment regarding staff behavior, which led to my appraisal of the situation as being unjust. As far as I was concerned, I had not shifted in my friendly and collegial attitude towards the staff. On the contrary, through my awareness of my social class and privileged status, I had made efforts to overcome the barriers between me and the setting participants. If staff members had ever suspected that I was a high-and-mighty ivory-tower type, they should have seen, through my actions with shelter clients, that I was actually a "roll-up-my-sleeves" provider sort, just like them.

Being unable to generate any plausible explanation for the change in staff attitude, I concluded that I may have "overdone a good thing," aligning myself so closely with the clients that I became too much "like them," thereby engendering the kind of disrespectful treatment some clients described to me in their interviews (illustrated by the following quote from a homeless mother):

> I'd hate for them [staff] to be treated like this because they wouldn't be able to take it. I mean, if they got treated the way we get treated—no respect, no kind words—you know, it's constant just, you know, put downs . . .

The fact that many shelter clients reported positive, respectful treatment from the staff did not interfere with my theory or cause me to more critically examine the situation. Instead, my appraisal of the events served to align me even closer with the homeless clients (at least in spirit), and to feel a sort of righteous self-pity regarding the poor treatment I was receiving from staff. Fortunately, I did not have the luxury to sulk, as I very much wanted to conduct interviews with service providers in the shelter. Thus, feeling as though I was "swallowing my pride," I turned some of my energy, time, and positive attention to the staff, in an effort to "earn my way back" into their good graces.

What I thought of as my staff-appeasing efforts consisted of a number of behaviors, such as coming to the shelter during non-family hours to help frontline staff clean and straighten the facility; helping frontline staff serve meals; treating staff at all levels to lunch; and most popular of all, bringing doughnuts into the staff-restricted area several times a week. It was during one of the mornings when I came in to mop and clean the facility that the first sign of progress appeared. One of the frontline staff members pulled me over to tell me "off the record" that they were being strongly discouraged by the Center Managers from participating in interviews with me "during company time"—instructions that ran counter to those of the Center director. The staff member then told me that she had been thinking about it and was interested in meeting with me after work to do an interview. After this, as my efforts with the staff continued and staff members probably talked among themselves, I was able to schedule several additional off site interviews with frontline staff, before finally receiving "permission" from the Center Managers to conduct interviews during working hours.

The final note in this story is that, while having success in recruiting 14 out of the 16 shelter providers, I never was able to schedule an interview with either of the two Center Managers. Although their conduct towards me eventually improved from hostile to civil, they never again treated me with the cordiality and friendliness I had experienced in my first few weeks at the shelter.

Looking back at the events in the shelter with the benefit of hindsight, it seems clear to me that my original explanation of being treated just like a client contains several gaps. First, as I mention above, shelter clients were not uniformly treated with disrespect, and any one client was very unlikely to unleash the disapproval of the vast majority of staff (as was my case at the time). Second, my explanation did not account for the instructions by Center Managers to avoid my study. On the contrary, if there was concern regarding my pro-client bias, it would appear to be beneficial to the staff to tell their side of the story. Finally, as pointed out by one colleague, my social class status did not actually change as a result of my connection to the families: social class is not a fluid construct, and it would have been clear to the staff that I was still a highly educated, middle-class, white woman—to be regarded more as a co-worker than a client.

During the writing of this article, I had the opportunity to reexamine the events of the story with help from a number of thoughtful and insightful colleagues. I have come to believe that my original explanation for my rift with the staff, while on the right track, lacked several important elements—which I will discuss below.

REFLECTION AND DISCUSSION

The events described in this story can be discussed from a number of perspectives, including one that focuses on qualitative methodology and ethnographic field-work. This perspective would consider the implications of the pro-client bias with which I entered the field, talk about my lack of attention to the setting's multiple gatekeepers, and consider the pros and cons of entering a setting from the top down (i.e., starting with the director) (e.g., Deutch, 1981; Jewkes & Letherby, 2001). However, for the purpose of this article, I would like to utilize a diversity lens, focusing on clashing world views between the staff and me, and my transgression of social class norms within the shelter's organizational structure.

Clashing World Views

World Views Regarding Family Homelessness

World views are assumptions, thoughts, actions, and language that express (often unspoken) philosophies and explanations about the behavior of others and can affect the transactions of people with each other (Ibrahim, 1985). My world view regarding family homelessness is that it has structural causes such as a lack of affordable housing, unethical housing practices (i.e., slum landlords), a lack of living-wage jobs for unskilled workers, and changes in the government assistance provided to low-income families (e.g., McChesney, 1990; Shinn & Weitzman, 1994). This world view does not deny that poor decision-making, lack of budgeting skills, and personal characteristics such as mental illness may play a role in homelessness for some families; it simply assumes that, on average, "housed" families suffer from the same lapses of responsibility and personal issues, but have financial resources that allow them to keep their homes despite these troubles.

In contrast to this world view, my interviews revealed that the majority of shelter staff believed that family homelessness was caused by individual-level variables, such as lack of motivation, poor work ethic, a "dependency" on the service-system, and a self-defeating attitude. This was despite or perhaps related to the similarity between the demographics of homeless clients and many of the frontline shelter staff. Research that has examined the world-views of service-providers working with homeless families supports this analysis. For instance, studies have found that service providers are more likely than homeless families to hold families personally responsible for their homeless situation and their difficulty in getting rehoused, citing lack of internal strengths, motivation, and personal attitudes as the biggest barriers for families (Lindsey, 1996, 1998; Stanford Center for the Study of Families, Children and Youth, 1991).

World Views Regarding Social Class Status

Similar to my world view regarding homelessness, my world view regarding class distinctions was that they also have structural, rather than individual, origins. In other words, I entered the shelter setting with the belief that an individual's economic and educational status is largely a product of social, political, and cultural opportunities—and not an indication of that individual's worth as a person. In contrast to this world view, the shelter's organizational structure was based on what I would call classist principles. Classism, like other forms of prejudice, is the belief that an individual's relative superiority is at least partly determined by his or her social and economic status (Skeggs, 2004). Like other "isms," classism employs a number of stereotypes that ascribe specific characteristics to members of a particular social class, and use these characteristics to support distancing and discrimination towards those in lower classes (e.g., Lott, 2002). Like other forms of prejudice, classism can exist on the individual or structural level, the former affecting the beliefs and interactions of one person, while the latter expresses itself in the systematic presence of class-based barriers and benefits within an organization, culture, or society (e.g., the caste system in India).

In line with this description, my interviews and observations revealed that the shelter contained a clear organizational hierarchy which was based on a combination of social roles (client vs. staff) and social class status (lower-class vs. middle-class).

At the bottom of this hierarchy were the homeless clients, who had the fewest privileges, the least amount of freedom, and the lowest (current) economic standing in the shelter. Regardless of the level of education or previous lifestyle of a particular family, they were at the bottom of the tier by virtue of being homeless and needing services (a standing which was in line with an individualistic explanation of family homelessness).

Next in the system were the frontline staff (located in the main public area with the clients). Frontline staff generally had high school degrees (or GEDs), made minimum wage, and lived in relative poverty (mirroring the demographics of many of the shelter clients). Staff members in this group were more likely than other staff to report that they were "living from paycheck to paycheck" and to have had previous experience with homelessness, poverty, and/or the welfare system. Frontline staff had relatively little decision-making power within the shelter hierarchy, experienced relatively little job flexibility, and spent the most time interacting with families in the main public areas. However, like all staff, frontline staff had the authority to enforce shelter policies, to evict families, and to report them to Children's Services. Frontline staff also had access to areas that were restricted to families and used separate bathroom facilities reserved for staff. Thus, while at the bottom of the staff hierarchy, frontline staff clearly had a higher social standing than families.

The next level of the tier was occupied by back-office staff (located in a restricted, cubicled area where families could only enter by appointment). This category included staff members with college educations, annual (as opposed to hourly) salaries, and relative economic stability. In contrast to frontline staff, back-office staff were more likely to report that they came from middle class backgrounds and had not personally experienced economic hardships. Back-office staff had a lot of decision making power in the shelter, had more comfortable private working areas, and mostly interacted with families in the context of structured, task-oriented appointment times. The two Center Managers, while considered to be part of the general category of back-office staff, were technically in charge of all shelter staff and had the most decision making power among this category.

By linking organizational roles, education, and economic variables to decision-making power and

job benefits, the shelter was endorsing a classist organizational structure. Thus, while individual shelter providers may or may not have held classist attitudes, the overall structure supported a classist culture. In this culture, it was normative for both providers and clients to discuss staff in terms of their social class categories and to argue about the superiority of one class of providers vs. another. For instance, in this quote, a back-office staff member discusses incidents of "hollering, sarcasm, and disrespect" by staff, in which she echoes the common back-office sentiment that frontline staff have poor boundaries and interpersonal skills:

> I think we all do it at one point in time. But I think the prevalence of it is [in] the lowest level of staff. I say that because I just don't feel like a lot of our staff—and I'm not trying to be arrogant—but I don't feel like a lot of our entry level staff have the skills and recognize that some of the things they do are not appropriate. And sometimes I feel like some of them don't care. Any time you go into an entry level position—a lot of people go into entry level positions and say, "This is not what I'm going to do forever." So their heart is not in it. Whereas the social service field, although I may not be [working] here for the rest of my life, this is my field. This is what I'm going to do. So I think that plays more of a role in my everyday interaction, things like that. And I understand a lot of things differently, better than frontline staff. And they want to stay in this field forever, and just not have the education to realize some of the things that they do are not appropriate, and should not be done. Because I know from experience a lot of them do not understand the fraternization piece. There are some things they just don't know.

In contrast, in the following quote, a homeless mother expresses a view more commonly held by clients and frontline staff regarding the superiority of frontline staff:

> You know, she [frontline staff person] understands where I'm coming from 'cause she's been in the same predicament. And that to me are the only type of people that can really work with somebody like me—not even that they were homeless, even if they had to the point where they was almost homeless, they still feel for you.

What this type of debate shows is that setting participants at different levels of the social hierarchy "bought into" the principles espoused by the system, rather than questioning the social class divisions that were present in the organization.

Operating Outside the System

Based on my awareness of my privileged social class status and on my world view, my main goal in entering the setting was to show that I did not find social class distinctions to be meaningful. In other words, I wanted to show that I did not believe my higher social class status to be deserved in any way or marked me as superior to anyone in the shelter. In my efforts to ally with the clients early in my data collection period, I gave up most of the privileges and benefits afforded to even the lowest-tier staff: I left the building together with the clients during non-family hours, I used the client bathroom facilities, I sat down with families during meals (as opposed to helping serve them), etc. While many of the frontline staff were friendly with families, I went beyond friendliness when I treated families to meals, babysat their kids, drove them to appointments, and helped them with resumes and job applications. While in my mind I was being a "good service-provider," I was certainly not acting like a proper service provider within the boundaries of this particular shelter's culture. Even staff at the lowest levels of the hierarchy kept some boundaries between themselves and the clients; this differentiation was vital to the smooth interaction of all the social tiers of the organization. In other words, my actions were based on my own values and norms rather than on those of the setting.

In this manner, by going above and beyond the expectations of friendly staff behavior in the shelter, I was disregarding the social class convention of the culture. In addition, by refusing many of the provider privileges to which I was initially welcome as a fellow professional and shelter volunteer, I was further emphasizing my alliance with the families. In light of this appraisal, the staff's behavior towards me, and the particular and more lasting distance of the Center Managers, makes more sense. My entry back into the good graces of the staff also makes more sense with this explanation.

As described previously, in order to employ many of my staff-appeasing behaviors, I inadvertently began to engage in many of the staff privileges I had previously given up: I stayed in the facility during non-family times, I went into the restricted areas to bring doughnuts and take-out fried chicken, and I engaged in staff-only behaviors such as cleaning the facility and serving meals. Although I did these things in order to be helpful (or as one colleague put it, to "grease the wheels a bit"), I believe the behaviors accomplished more than a simple show of kindness and

respect would have (partly because the problem was not really caused by a lack of kindness and respect).

By shifting my behaviors towards the conventions and norms of the culture (i.e., by better recognizing "my place" in the social hierarchy), I allowed the staff to associate with me once again, without a loss of their place in the social order. It is no coincidence, then, that my first interviews were with frontline staff—in fact, with those staff at the lowest level of the eight staff positions—and that mid-level staff (who had more social status to lose) waited until official permission from Center Managers before scheduling interviews with me. It is also no coincidence that Center Managers never recovered their initial warmth towards me. Within the context of the shelter's social hierarchy, their behavior would be well explained by Social Identity Theory.

According to Social Identity Theory (SIT), social identity is derived primarily from group membership and positive identity is produced through favorable comparisons between the ingroup and relevant outgroups (Brown, 2000). In their seminal paper, Taijfel and Turner (1986) stressed three particular assumptions of the theory: (a) that people must subjectively identify with their ingroup; (b) that the situation should permit evaluative comparisons with the outgroup; and (c) that the more comparable (e.g., similar, proximal) the outgroup, the more pressure there is on members of the ingroup to establish and maintain the "us" and "them" distinction.

Within the schema of SIT, staff in the highest tiers (based on our initial similarities) would have particular motivation to distance themselves from me when my behaviors put me outside the boundaries of the provider role (e.g., Hornsey & Hogg, 2000). SIT would also account for the lesser severity of the frontline staff's attitude shift, and for the quicker attitude reversal on their part. Finally, it would explain the reluctance off the Center Managers, located at the very top of the back-office tier (and closest to me in terms of education and pre-existing social status), to reengage with me based on partial enactment of ingroup behaviors.

LESSONS LEARNED

I do not think that the lesson of the story is necessarily about social class, as the situation could have occurred similarly if the setting's ingroup/outgroup distinctions had been set by variables other than professional role or social class status.[7] Instead, I believe that the story is about the tension between working within a status quo in order to be successful in one aspect of research and challenging it in order to be successful in a different respect.

Patience versus Action

As community psychologists, our jobs purposely blur the line between research and advocacy. Going against convention and allying with disenfranchised groups is part of our tool bag. In doing so, we might be promoting social justice, expanding scientific understanding, pushing the limits of the field, or all of the above. How, then, do we navigate settings where our success with one constituency might alienate another? It seems that such situations place us in the proverbial two-horned dilemma. Should we support a structure of which we disapprove in order to get the best possible data from multiple stakeholders? Should we compromise in some way? If so, in what way, how much, and at what point?

When I think about this dilemma, I am reminded of the wisdom of Paulo Freire, who talked about the tension between patience and action in community work (Wink, 1997). If one is so patient with the status quo that one never challenges it in any way, one is complicit. However, if one acts too rashly, misreading the current of the setting, one may use up a valuable chance to make a difference, or even make things worse. The challenge, then, is to balance patience and action in an effort to serve as many of our goals as possible. In my case, it would have been useful for me to understand that I did not need to give up the privileges of a service provider to connect with the clients; it is not what was needed from me and made no difference when I engaged in provider-only behaviors later. It also would have been helpful for me to have awareness of the messages that my behavior sent to the staff; I could have then chosen to enter the setting in a way that respected the roles of the providers while also expressing my respect for the clients. With more insight and understanding into the shelter structure and culture, I could have chosen a path that better balanced patience and action from the beginning, rather than in a reactionary way.

[7] In this particular setting, because racial and gender composition did not differ greatly among staff members in different tiers, or between staff and families, issues of race and gender were not perceived to be salient by most setting participants, while issues of class were prominent (Shpungin, 2003).

Being an Ally

A related lesson to the one above is that a decision to become an ally of a marginalized group should be made consciously, with an understanding of both the benefits and risks of the alliance. By ally, I am referring to a person from a relatively privileged (often mainstream) group (e.g., Caucasian), who connects with, and advocates for, the cause of a relatively marginalized or oppressed group (e.g., African-American community). Generally, the ally takes relatively little risk by becoming aligned with the marginalized group, for the person is still cloaked in the protective garments of the privileged group and has not actually taken on the identity of the oppressed group (i.e., has not actually become African-American). However, a strong alliance with the marginalized group can have some negative ramifications: the ally may become contaminated or sullied in the eyes of those in the privileged group; or the ally may be perceived as disloyal or threatening to the privileged group (if you're not with us, you're against us). In light of my earlier understanding of my shelter experience, it is important to note that the ally is not mistaken for a member of the marginalized group—rather, he or she raises the ire of the privileged group precisely because he or she is one of the privileged. (To use an extreme example, we can look at the treatment of white, civil rights advocates in the 1960s by the white, mainstream community). The lesson here is not to avoid such alliances, but to enter into them having weighed the various consequences (positive and negative) before they occur.

Self-Examination

Finally, the process of re-examining the situation has taught me an important lesson about self-reflection and analysis. A lot of literature focuses on the dilemmas and challenges of conducting qualitative, collaborative, participant-observation research in diverse communities (e.g., Christensen, & Dahl, 1997; Jewkes, & Letherby, 2001; Labaree, 2002). However, much less is said about the process of writing up the results of this research, in which our power as academics and disseminators of information can go unnoticed (Standing, 1998). By being unreflective at this last stage of the journey, we can undermine our careful efforts during the data collection and analyses stages. I believe that, here too, collaboration is a vital component. Without the help of colleagues, both anonymous and known, I would have remained at a very different place in my attempts to understand the events and my role in them.

REFERENCES

Acker, J., Barry, & Esseveld, J. (1991). Objectivity and Truth: Problems in doing feminist research. In M. M. Fonow & J. A. Cook (Eds.), *Beyond methodology: Feminist scholarship as lived research* (pp. 133–153). Bloomington IN: Indiana University Press.

Brown, R. (2000). Social identity theory: Past achievement, current problems and future challenges. *European Journal of Social Psychology*, *30*, 745–778.

Deutch, C. P. (1981). The behavioral scientist: Insider and outsider. *Journal of Social Issues*, *37*(2), 172–191.

Hornsey, M., & Hogg, M. A. (2000). Assimilation and diversity: An integrative model of subgroup relations. *Personaity and Social PsychologyReview*,, *4*(2), 143–156.

Ibrahim, F. A. (1985). Effective cross-cultural counseling and psychotherapy: A framework. *The Counseling Psychologist*, *13*, 625–638.

Jewkes, Y., & Letherby, G. (2001). Insiders and outsiders: Complex issues of identification, difference and distance in social research. *Autobiography Studies*, *16*(2), 41–50.

Labaree, R.V. (2002). The risk of 'going observationalist': Negotiating the hidden dilemmas of being an insider participant observer. *Qualitative Research*, *2*(1), 97–122.

Lindsey, E. W. (1996). Mothers' perceptions of factors influencing the restabilization of homeless families. *Families in Society: The Journal of Contemporary Human Services*, *77*(4), 203–215.

Lindsey, E. W. (1998). Service providers' perception of factors that help or hinder homeless families. *Families in Society: The Journal of Contemporary Human Services*, *79*, 160–171.

Lott, B. (2002). Cognitive and behavioral distancing from the poor. *American Psychologist*, *57*(2), 100–110.

Markey, U., Santelli, B., & Turnbull, A. P. (1998). Participatory action research involving families from underserved communities and researchers: Respecting cultural and linguistic diversity. In B. A. Ford (Ed.), *Compendium: Writings on effective practice for culturally and linguistically diverse exceptional learners*. Reston, VA: Council for Exceptional Children, Division for Culturally and Linguistically and Diverse Exceptional Learners.

McChesney, K. Y. (1990). Family homelessness: A systemic problem. *Journal of Social Issues*, *46*, 191–205.

McIntosh, P. (1988). White privilege and male privilege: A personal account of coming to see correspondences through work in Women's Studies. Paper #189. Retrieved on April 29, 2004 at http://www.clas.ufl.edu/users/leslieh/syg2000/whiteprivilege.html

Reid, P. (1993). Poor women in psychological research: Shut up and shut out. *Psychology of Women Quarterly*, *17*(2), 133–150.

Stanford Center for the Study of Families, Children, and Youth (1991). *The Stanford studies of homeless families, children, and youth*. Stanford, CA: Stanford University.

Shinn, M. & Weitzman, B. C. (1994). You can't eliminate homelessness without housing. *American Behavioral Scientist*, *37*(3), 435–442.

Shpungin, E. (2003). When the shoe fits: Human dignity denial and recognition in a shelter for homeless families. *Dissertation*

Abstracts International: Section B: The Sciences and Engineering, 63(12-B), pp. 6108.

Sixsmith, J., Boneham, M., & Goldring, J. E. (2003). Accessing the Community: Gaining Insider Perspectives From the Outside. *Qualitative Health Research*, *13*(4), 578–589.

Skeggs, B. (2004). *Class, self, culture*. New York: Routledge.

Taijfel, H. & Turner, J.C. (1986). *The social identity theory of intergroup behavior*. In S. Worchel & W.G. Austin (Eds.), *Psychology of intergroup relations* (2nd ed., pp. 7–24). Pacific Grove, CA: Brooks/Cole.

Wink, J. (1997). *Critical pedagogy: notes from the real world*. New York: Longman.