Navigating collaborative and participatory research during and after the COVID-19 pandemic: Emerging possibilities from a network of PhD students

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Abstract

Collaborative and Participatory Research (CPR) presents different challenges for doctoral students, compared to other researchers. Even under 'normal' circumstances, engaging with CPR poses intricate practical and ethical challenges. For instance, understanding CPR or forming alliances to co-create knowledge can be particularly challenging. Moreover, the increasing popularity of CPR within universities is not always accompanied by sufficient training in these approaches for doctoral students. In this paper, we first present reflections on a participatory research project developed by one of the authors during the COVID-19 emergency. Specifically, we discuss the difficulties faced during their PhD fieldwork in Santiago, Chile, in 2020. One of the main obstacles was the need for a university network of peers to support and facilitate discussions regarding practical and ethical issues that emerged during the collaborative process. Secondly, we present our reflections on our shared experience of participating in and facilitating an interdisciplinary and inter-university reading group about CPR. This group was set up due to a need for more spaces to discuss CPR and an ongoing need for an in-person doctoral community in the hybrid post-lockdown world. We ask and reflect upon two questions: how can we negotiate the tensions involved in employing CPR during and after the COVID-19 emergency to produce an individual PhD thesis? How can an in-person community help us to navigate ethical and practical challenges? We suggest the significance of enabling community-driven, student-led spaces that foster interdisciplinary collaboration within universities. In particular, we advocate for dialogic spaces to discuss ethical issues and express shared vulnerabilities. We suggest that these spaces can help to nurture reflexive openness to new and unexpected possibilities in research. Such spaces are particularly important for tackling the complexities of CPR.

Keywords

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Collaborative and participatory research (CPR): What, for whom and why?

Engaging with Collaborative and Participatory Research (CPR) involves rethinking how, why and for whom we conduct research. Within a broad polysemic understanding of CPR, there exists a wide-ranging scope of possible approaches and models (Vaughn & Jacquez, 2020). Central to all of these approaches is, first and foremost, a focus on 'doing research *with* people and communities rather than doing research *to* or *for* people and communities' (Cohen et al., 2018, p. 56). Through this focus, CPR studies and projects challenge academic assumptions about what it means to involve participants and communities in research. Vaughn and Jacquez (2020) state, 'the foundational premise of participatory research is the value placed on genuine and meaningful participation' (p. 5). The agency of people taking part in research and reflexive approaches to understanding researcher positionality are foregrounded, marking a significant shift away from traditional Euro-Western studies *on* or *about* participants (Brown, 2022; Fine & Torre, 2021). Often inspired by the work of Freire (1970), specific approaches to participatory and collaborative research are also explicitly change-oriented, intending to be transformational or 'of use' –'public science for the public good' – (Fine & Torre, 2019, p. 435). Starting from an orientation of change with others is essential to this process (Reason & Bradbury, 2008). In view of this collaborative understanding of knowledge production, many scholars refer to their field of CPR as an 'epistemology', rather than a methodology (e.g. Fine & Torre, 2021, p. 10; Lac & Fine, 2018). Engaging with CPR, therefore, also entails a rethinking of what it might mean to design, participate in and collaborate on a research project.

CPR also holds implications for how research is conducted within and beyond higher education institutions. CPR calls into question academic *extractivist* epistemological perspectives and approaches, such as a focus on obtaining data rather than engaging with a more comprehensive understanding of community contexts (Guerrero et al., 2019). Such processes may overlook the cultural, social or ethical dimensions surrounding how, for whom and why knowledge is produced (Alcoff, 2022). The potential transgression of disciplinary, academic and institutional boundaries through CPR both coexists and sometimes sits at odds with the traditional boundaries within higher education institutions (Fine & Torre, 2021; Lac & Fine, 2018). For us, as educational researchers, CPR can involve re-imagining our field of research as academic, social and cultural action, intertwined with the practice of teaching (Rodríguez Jiménez, 2009).

Possibilities of adopting collaborative and participatory approaches raise significant questions for researchers, in terms of the design, epistemological, axiological or ethical positionality, impact and aims of their research. Yet, referring to Participatory Action Research (PAR) specifically, Fine and Torre (2021) also describe how PAR projects can in turn 'provoke an imagination for what else is possible' (p. 14). In this article we engage with the *possible* in several ways to imagine possibilities of conducting CPR as doctoral students (Glăveanu, 2023). Specifically, we explore how one of the authors, Gonzalo, re-imagined the possibilities of conducting CPR in the context of the COVID-19 emergency. His reflections bring to light the potential for adapting CPR in COVID-19 contexts. Yet, conversely, this section also hints at the value of university community spaces for supporting doctoral students engaging in CPR. In the final section, we draw upon our reflections on our experiences of co-facilitating a CPR reading group in 2023, to highlight how co-created peer-led spaces can help doctoral students to engage with the possibilities and challenges of CPR. In this paper, we pose and explore our reflections upon two questions:

> RQ1: How can we navigate the tensions involved in employing CPR, both during

and after the COVID-19 emergency, to produce an individual PhD thesis?

RQ2: How can in-person community help us to navigate possible ethical and practical challenges of CPR?

CPR for doctoral students: How?

Collaborative and Participatory Research offers potentially rich opportunities for doctoral students to co-produce change-oriented research. Many scholars point to how research partnerships and participatory frameworks can also enhance the 'quality' and 'impact' of the research, from an academic perspective (Brown, 2022; Vaughn & Jacquez, 2020, pp. 1–2). For instance, CPR potentially allows for a more comprehensive understanding of what happens in the school space, reflecting a broader range of voices, ideas and perspectives at the core of pedagogical praxis (Christianakis, 2010). Yet CPR also raises many practical and theoretical questions for potentially interested doctoral students. In this section, we draw upon relevant literature to explore four particular tensions and challenges for doctoral students engaging with CPR.

Grasping the practicalities

Doctoral students may have access to a wealth of literature on different approaches to CPR (e.g. Guerrero & Fernández-Ugalde, 2020; McArdle., 2020; Trickett & Espino, 2004). However, this literature does not necessarily foreground the practical steps involved in carrying out collaborative research at doctoral level (Vaughn & Jacquez, 2020). For doctoral students, practical questions are compounded by practical challenges they may generally face in carrying out doctoral field work. As Naveed et al. (2017) discuss:

> For most doctoral researchers, their PhD is their first time to carry out a relatively long-term research project individually. They are constantly challenged to establish academic status within a

few years, and a slight change in the fieldwork plan may cause a delay and disturbance in their career pursuit (p. 775).

These tensions can lead to particular challenges for doctoral students who may wish to engage with CPR; yet struggle to know *how* to design and conduct participatory and collaborative research and incorporate it into their field work. This is partly due to the 'profoundly human' nature of CPR, which can lead it to seem messier than more detached methodological approaches (Chevalier & Buckles, 2019, p. 14). Different stages of conducting CPR also bring with them their own unique challenges, such as how to develop initial research partnerships with key stakeholders, school communities or other organisations (Lapierre et al., 2018).

The suggestion that we need to learn *how* to conduct CPR implies that there may be a clear answer out there. Yet part of the reality of engaging with CPR involves recognising the plethora of possible approaches and the varying degrees of participation within them. Chevalier and Buckles (2019) describe PAR in itself as a 'big tent' – a 'mixed bag of ideas and practices' (p. 14). Navigating our way through the tent of CPR, and finding our place within it, can pose particular challenges for doctoral students. Some, such as Brown (2022), offer helpful guidance on where we might place ourselves within a tent of participatory research, through the image of the *spectrum*. Tools and toolkits such as these are very helpful, yet doctoral students may still struggle with questions of how to incorporate participatory approaches within their own PhD. CPR brings with it particular practical challenges, such as navigating access, differences and *boundary-crossing* with non-academic partners over extended periods of times (Penuel et al., 2015). Structural barriers within universities can also prevent CPR from flourishing, despite institutional support for participation or 'engagement' (Lac & Fine, 2018). Practical and theoretical questions may therefore arise such as: how conceivable is it to

carry out collaborative research for doctoral students who are also required to complete an individual PhD thesis in a conventional academic structure? How can we balance our own interest with the interests and motivations of our participants, and avoid academic extractivism? How can we develop and organise CPR projects within or for our doctoral field work? What is meant by collaboration in academia?

Even though 'universities have responded to the demand of promoting universities as authentic spaces for progressive knowledge transfer by organising new programmes or by changing the dynamics of collaborations between academic and non-academic partners' (Patricio & Santos, 2019), these advancements and collaborations may not yet be mirrored by formal training in collaborative research for doctoral students.

A question of ethics

CPR also raises a range of ethical questions that may be complex for doctoral students to navigate. On the one hand, CPR holds ethical promise. Through explicit commitment to the communities involved, it could be argued that CPR can offer a means of going beyond the typical ethical commitment to *do no harm* and towards what Manivannan (2022) describes as 'the need to do good in research' (p. 73). Yet, as scholars such as Banks et al. (2013) have explored in depth, CPR also raises complex ethical questions that require us to think beyond typical institutional ethical requirements (Aldridge, 2012; Bradbury-Jones et al., 2018; Groot et al., 2019; Hawkins, 2015; Thomas-Hughes, 2017; Vaughan, 2014; York et al., 2021). For instance, CPR requires us to think particularly carefully about anonymity, power dynamics, beneficence, boundary-setting, burdening participants, representation and research dissemination, amongst others (Banks et al., 2013; Cohen et al., 2018; Guerrero & Fernández-

Ugalde, 2020; Penuel et al., 2015). We are grateful for the works of these scholars, and do not intend here to offer our own in-depth analysis of the ethics of CPR. However, we do note here two examples of ethical issues that may have particular resonance for doctoral students engaging in CPR.

Firstly, CPR adds complexity to the notion of maintaining participant confidentiality and anonymity in ethics review processes, by inviting us to also consider how co-researchers may be credited (Cohen et al., 2018, p. 454; Fine & Torre, 2021). University ethics review processes prioritise participant anonymity and confidentiality. Therefore, possibilities for crediting co-researchers, while upholding confidentiality protocols, can seem limited or complex to navigate for doctoral students. Secondly, crediting co-researchers poses a particular challenge for the ethical integrity of doctoral students, as PhD theses are typically sole-authored. Therefore, doctoral students retain credit for producing knowledge, contributing to implicit epistemic extractivism in academia (Patricio & Santos, 2019). The receipt of a doctorate at the end of the process raises the question, ethically, what it means for co-researchers to *benefit* from the research. Therefore, the imbalance in personal benefit to the doctoral student poses a challenge to their integrity as a participatory or collaborative researcher. Navigating these challenges requires thoughtful approaches to acknowledging and transparently communicating researcher positionality (Brown, 2022, p. 208). Thirdly, CPR raises a significant ethical conundrum for doctoral students in terms of their planning and ethics-in-relation: what degree of participation, or collaboration, is ethically desirable? Brown (2022) guides us by suggesting that we should not, ethically, 'aim for fully egalitarian research, as we need to retain responsibility for researcher wellbeing' (p. 208). Chilisa (2012) also highlights the flaw in assuming that increasing participation alone will necessarily lead to positive outcomes for

communities. Anonymity, beneficence and degrees of participation are a selection of examples of complex ethical questions for doctoral students to navigate in CPR.

Identity as researchers

The ethical questions that CPR raises, such as around co-authorship and degrees of participation, encourage us to question what it means to produce knowledge and produce research (Guerrero & Fernández-Ugalde, 2020; Patricio & Santos, 2019). Doctoral students, like the two of us, may be drawn to CPR because they wish to value knowledge and experience beyond academic institutions, and believe in 'democratising knowledge' (Brown, 2022; Lac & Fine, 2018, p. 564). For us, our decision to engage with CPR links to our identities as school teachers and our desire to involve students, teachers and other member of the community in the research process as much as possible. Like other scholars, it is part of our axiological and epistemological positionality – our core belief in the value of knowing *with* (Haraway, 1988). Yet at times, for doctoral students, the need to obtain our own PhD, and be recognised as a researcher, may feel at odds with our desire to engage in collaborative research. More broadly CPR can feel at odds with the elitism and competitivity inherent in academia – a contradiction we note in the publishing of this article – (Chevalier & Buckles, 2019, p. 24).

Navigating these questions became even more challenging in the presence of a global pandemic that disrupted peer-to-peer dialogue and in-person collaboration. Accordingly, in the next section, we will utilise an illustration from one of our collaborative PhD projects to reflect upon the first question posed by this paper: how can we negotiate the tensions involved in employing CPR, both during and after the COVID-19 emergency, to produce an individual PhD thesis? Specifically, Gonzalo will present autoethnographic reflections on the challenges and possibilities faced as a PhD student living in England and Chile during the global COVID-19 pandemic while initiating a CPR project within a hybrid research modality.

Engaging with our experiences and identities through autoethnographic reflections

Autoethnography uses deep and careful self-reflection – typically referred to as 'reflexivity' – to name and interrogate the intersections between self and society, the particular and the general, the personal and the political (Poulos, 2021). This approach has the potential to create space for values and vulnerabilities to emerge, through a balance between intellectual and methodological rigor, emotions and creativity (Adams et al., 2015). Autoethnography recentres the researcher's experience as vital in and to the research process, and is grounded in active self-reflexivity, which 'refers to the careful consideration of the ways in which researchers' past experiences, points of view, and roles impact these same researchers' interactions with, and interpretations of, the research scene' (Tracy, 2012, p. 2). In this paper, autoethnographic approaches are helpful for Gonzalo to reflect back on the process of figuring out *what to do* and juggling concerns around rigor, emotions, creativity and social justice (Poulos, 2021).

Lac describes conjoining autoethnographic writing and CPR-researcher-reflexivity in her reflexive paper about conducting PAR: 'this means sometimes unmasking the hypocrisies of doing PAR within traditional institutions, and at other times, it means admitting our vulnerabilities as a teacher, scholar, and activist in doing this work' (Lac & Fine, 2018, p. 577). As pointed out by Tracy (2012), methods which consider self-reflection on researcher's identities, experiences and positionalities are vital for qualitative research in general. We echo Lac and Fine (2018) in finding that autoethnographic reflections lend themselves well to reflecting upon CPR, which demands a high level of researcher reflexivity (Freire, 1970). We draw upon autoethnographic approaches to

reflect upon emergent possibilities from Gonzalo's experience of adapting CPR in light of COVID-19 (first Reflections), and both authors' experiences of co-facilitating the CPR reading group (second Reflections).

Part 1: Adapting a doctoral CPR project during the global COVID-19 pandemic

Today, during the final year of my PhD, I feel fortunate to be able to co-write and reflect back with my friend and colleague, Julia, upon the journey, emotions, ethical challenges and vulnerabilities of conducting CPR for my doctoral field work. It is meaningful, because a PhD is often an isolated experience (Cantor, 2020). We have been fortunate to find each other and collaborate with other PhD students working on CPR before and after the global pandemic.

I commenced my doctoral studies in November 2019, just before the pandemic started. It was a challenging and emotional start, with the world facing dark times and many personal decisions to be made about pursuing a PhD in England. The impact of COVID-19 on vulnerable communities, mental health and disruptions in all aspects of life were difficult to manage, especially while living far away from home and envisioning an incipient idea of a CPR project. Some of the questions I asked myself were: *how can I approach people to collaborate on my CPR project when they are struggling daily with the impact of COVID-19? Should I adapt my research approach towards a more 'traditional' model? What will the benefits for participants in my research, then? How will I keep participants involved in the project when the future is uncertain? How will I find the motivation to carry out my doctoral research when people are dying day by day and struggling with other issues?* I feel grateful to have the constant support from my supervisors, but other than that, I needed help finding academic and emotional support from the university or a network of PhD colleagues doing CPR. I felt lonely, isolated and vulnerable confronting the next stages

of my research without a clear picture of what was coming.

Initially, I aimed to develop a project framed in CPR and within a socio-environmental conflict in Chile. The initial idea was to organise a field trip with secondary school students and in-service teachers and invite members of indigenous communities to collaborate in the project. The field trip was planned in a national park called 'La Campana' near the site of a thermoelectric plant named 'Los Rulos' in Valparaiso, Chile. The project was spearheaded by an Israeli company, IC Power and designed originally as a Combined Cycle (CC) facility. Projections indicated that the project would consume 310,000 L of water daily and emit 110 t of particulate matter annually (Fundación Terram, 2017). I really wanted to be involved in the CPR project and collaborate with communities being affected by the thermoelectric project. For instance, while three indigenous communities (Mapuches, Aymaras and Diaguitas) were directly affected by the conflict, their involvement was not officially recognised, so CPR felt even more relevant to me here, as these communities would have endured significant disruptions to their lives and culture, including housing, education and preserving natural areas with ancestral medicinal significance. However, between April and June, due to the mobility constraints imposed by the COVID-19 pandemic in Chile and the intricate challenges associated with conducting a collaborative project of this magnitude, it proved unfeasible to progress with this original plan, since I could not travel to start my fieldwork.

Throughout 2020, I worked on the literature review and other writing for my doctorate while intermittently adapting the ideas of my PhD project and living under the health restrictions of the UK, including 'on and off' lockdowns in Cambridge. Navigating all the modifications to the original plan was frustrating and challenging because even though I passed my upgrade to PhD Candidacy in August 2020, I could not

begin my fieldwork and I had to cancel the idea in 'La Campana'. Therefore, I had to adapt the original plan for my fieldwork and imagine new possibilities for the CPR project in pandemic times. Emotionally, this whole period was very demanding and unsettling, as I had no certainty about whether my fieldwork would be possible or not at all. Between April and August, flights to Chile were restricted or cancelled. The borders were closed for a period and the only options available were humanitarian or emergency flights. In my case, these did not apply.

I had to delay my plans until November 2020 when the situation improved with a decrease in the number of deaths and infections. Upon arriving in Chile on 10 November 2020, I underwent 14 days of self-isolation in Santiago. During that period, I reconsidered and envisioned new possibilities for my fieldwork, relying solely on the support of my supervisors, without a broader academic network at the university. This experience underscored for me the significance of the academic community in terms of training, dialogue and support, especially when initiating and reimagining a CPR project.

After a meeting held on 20 November 2020 with one of my supervisors, we made some decisions and re-envisioned my collaborative doctoral project. Given the context of the pandemic, the only viable option was to focus on a scenario in Santiago where the health and sanitary conditions were improving, and to consider only adult participants. Consequently, I opted to redirect the project's focus towards initial teacher education, considering both the global pandemic and the practicality of conducting CPR with a group of adults (pre-service teachers rather than high school students). The University's risk assessment committee approved these decisions. Thus, during this period of isolation, I initiated recruiting participants via email.

Finally, on 4 December 2020, I had the opportunity to visit the new scenario for my CPR project for the first time: The national park 'El Morado' (see Figure 1). The park is located in San José de Maipo, Santiago, Chile.

It is a glacial cirque in the El Volcán River basin, with El Morado's mountain reaching a height of 4,674 m, dominating the landscape in the Andes Mountains. El Morado is home to the San Francisco Glacier, as shown in Figure 2, next to Lagoon El Morado (see Figure 3). This Glacier, along with two more, provides 80% of the water supply in Santiago (Segovia, 2014).

The entire trekking trail to the Glacier was closed due to COVID-19 health restrictions in Chile. However, I had authorisation from the university and the park rangers to cover the first 6 km of the trail, reaching 1,250 m above sea level. With the new plans and possibilities, finally, I carried out some stages of my CPR project in the national park with new participants who agreed to collaborate on planning, reading, collecting data and organising a field-trip even in pandemic times. Our team included four pre-service teachers, two in-service teachers, two park rangers, two scientists and me.

This journey was full of uncertainties but also full of possibilities. It is relevant to mention that my fieldwork, spanning from 2020 to 2021, was finally conducted in a hybrid modality and was significantly impacted in its original plan and timetable by the COVID-19 pandemic. Practical challenges were navigated through flexibility and managing expectations, always in dialogue with all participants in the CPR project. Transparency and communication were important when adapting the original plan. Moreover, as new ethical challenges emerged in the COVID-19 context, we regularly double-checked the potential risks for all participants. For example, we assessed the necessity of face-to-face interactions. Prioritising well-being and safety was crucial, and it was essential to clearly communicate the overall purpose and goals of the research, while also monitoring the maintenance of care in interactions with participants. Consequently, certain initial stages, decision and plans (e.g. meetings, interviews and focus groups) were conducted remotely at the beginning of 2021. Fortunately, I was able to complete several CPR phases in this modality. I am

Figure 1. Entrance and welcome to 'El Morado'. El Morado is a glacial cirque and is part of the El Volcán River basin in the Quebrada Morales valley in the Andes Mountains, Chile.
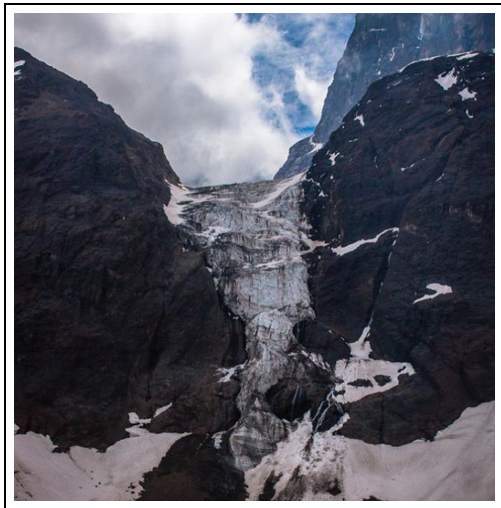*Source.* Gonzalo Guerrero.

Figure 2. San Francisco Glacier is a glacier in El Morado, a Natural Park located 100 km from Santiago, Chile.
Source. @_blacklight.

Figure 3. Lagoon El Morado at the end of the trekking trail.
Source. @_blacklight.

grateful for the opportunity and permission granted by the university, as I could not have envisioned conducting my fieldwork based on outdoor education and CPR solely through Zoom meetings. Some face-to-face stages of my

fieldwork finally took place in December 2020 and between June and September 2021. We discussed together how to balance the outcome of the thesis and the collective dissemination of our findings, as well as how knowledge production could be beneficial for all co-researchers. For instance, we developed pedagogical resources to contribute to different teaching practices in the context of environmental crises, and we also collaboratively thought about pedagogical resources to support the role of park rangers assisting school visits to the national park. Examples included enhancing the signage within the park, providing didactic materials and furnishing teachers with supplies for outdoor science lessons to support students' learning experiences in the park.

Part 2: Joint reflections on co-facilitating a CPR reading group after the COVID-19 emergency

In this section, we co-explore our experience of setting up and facilitating a CPR reading group in spring 2023. For this section, we draw upon collaborative autoethnographic approaches, reflecting together on the possibilities that emerged from this experience, and also draw upon informal feedback form responses from our reading group colleagues.

We co-founded the CPR reading group in January 2023. For Gonzalo, his experiences of isolation conducting CPR during the COVID-19 emergency led him to reflect on the importance of community support for CPR. He had a desire to recover lost time and lost opportunities for peer collaboration. Julia had just begun her PhD and was hoping to conduct CPR. She was keen to learn from the experiences of other doctoral students and to grapple with the complexities of CPR collaboratively. She was also particularly keen to discuss in a co-created student space the ethical and methodological questions raised by CPR, and uncertainties around the practicalities and possibilities of conducting CPR as a doctoral student. In this initial post-

COVID period, where hybrid models were retained in many cases, and in the context of the potential solitude of PhD life, we were both also particularly drawn to co-creating supportive in-person community spaces (Cantor, 2020).

As former school teachers, we enjoyed co-facilitating the reading group together, and bouncing ideas off each other. The reading group was interdisciplinary and inter-university, involving postgraduate students with varying degrees of experience of CPR. We met face-to-face fortnightly, with approximately 5 to 15 attendees at each session in the first term. The sessions involved small group discussions about texts, guided questions, collaborative mind-mapping, a film screening, toolkit analysis (facilitated by another colleague) – and cake! We initially considered emergent themes, interests and concerns from collective mind maps. We then co-selected issues to explore in more depth from the mind maps, and shared readings that may be of relevance to unpicking these topics. We began with the Lac and Fine (2018) text, which sparked collective reflection on the positionality of CPR researchers, the CPR researcher journey, and whether, or how, PAR can be a 'form of resistance' (p. 577). In the next session, we drew upon Brown (2022) to place our research on a *continuum* of participatory research, and reflect ethically, together, on whether research should be 'fully egalitarian' (p. 200). We then drew upon a chapter from Chilisa's (2012) book *Indigenous Research Methodologies* to ask and discuss questions such as: *does PAR really decolonise? Are we hijacking indigenous theory? Is our role to be 'transformative' as a PhD student?* We also invited an experienced colleague to a question-and-answer session about their participatory research (Aissatou et al., 2022).

We gave an informal feedback form to our reading group colleagues at the end of the first term, which was completed by nine colleagues. Interestingly, the majority of colleagues who completed this expressed that 'discussing practice and sharing experiences' was the most useful part of the reading group – more so than

discussing the readings. Some elements of the reading group that people particularly found useful were: (i) co-creating spaces for critical discussions of both CPR and our positionality as researchers; (ii) face-to-face and open dialogue; (iii) developing interdisciplinary perspectives on CPR, through the sharing of experience across disciplines; and, (iv) learning more about the research journeys of staff and students. They suggested that sharing more experiences of data collection, analysis and dissemination in CPR would be helpful for future groups. Colleagues also suggested in their feedback that the communal space was helpful for exploring different approaches to CPR and thinking through challenges. One colleague commented:

> I really enjoyed discussing the readings with colleagues, and learning from peers about how they are navigating the challenges and opportunities of doing participatory research. I found it interesting discussing the level to which doctoral research can be 'truly' participatory.

Another aspect that colleagues found particularly helpful was the interdisciplinary nature of the reading group. One colleague wrote:

> It was really special to find a space across disciplines working on a common methodology… where individuals were in their own stages of engaging with PAR… The reading group was a fun collaborative space that really enhanced the way I think about how to do research.

For Julia, the experience of participating in and co-facilitating the CPR reading group shaped her doctoral research design. Through discussions of the readings and sharing of experiences, she was able to understand more about the practicalities of CPR and conceive of a way to embed this in her doctoral research. For example, Brown's (2022) paper prompted a helpful discussion of when participation is more or less desirable, particularly in research with children, shaping Julia's understanding of the ethicality of possible modes of participation in her own research. She was really grateful for the opportunity to learn from colleagues and discuss ethical questions together, and particularly appreciated an open space in which to share her vulnerabilities around engaging with these approaches as a doctoral student. Julia was able to draw upon these discussions to create a detailed and thorough ethics application for CPR that was approved by the university. Moreover, the discussions also helped Julia to think through possible future challenges, such as around power relations in CPR. The caring relations that developed between Gonzalo, Julia and other reading group colleagues also created a supportive environment for Julia, in which questions could be co-navigated. In the summer term, the reading group evolved into a smaller peer support group, in which between three and five colleagues gave each other feedback on our research design, methods and research presentations. In response to the informal feedback form, which suggested an appreciation of spaces to discuss CPR practices and experiences, Julia subsequently set up a CPR Community of Practice for doctoral students. Drawing upon communities of practice in healthcare, the aim of this community space is to support doctoral students to collaboratively work through shared challenges (Health Innovation Network South London, 2023). Julia is grateful for the contributions of other colleagues to this space, supporting Julia to plan her CPR field work project, in combination with support from her supervisors.

Gonzalo finally found a community of PhD colleagues discussing and reflecting about similar issues. Even though Gonzalo only started to collaborate in the group in the final year of his PhD, the support from peers was highly valuable for reflecting on the final stages of the thesis writing process. Specifically, the reading group was helpful for moving beyond the feelings of loneliness and isolation that had emerged during COVID-19 times. The support of Julia, for instance, during the process of writing the thesis and this paper, led him to reflect upon the possibilities and relevance of caring relations in academia (Noddings, 2012).

Communing and conclusions

Reflecting upon our first question, which considers how we navigate the tensions involved in employing CPR, both during and after the COVID-19 emergency, to produce an individual PhD thesis, we can highlight that numerous factors are essential to assist PhD students in facing the challenges of embarking on a thesis of this nature. This applies to the context of a global pandemic but also to any unforeseen event.

First and foremost, constant reflection before and during the process about our identity and positionality is crucial (Holmes, 2020). Questions such as: *what as my role I as a university researcher in a CPR project? How can I balance my personal decisions as a PhD student with the co-creation process with participants? What will be the role of and benefits for participants?* can help us to reflect upon our positionality, and to question power dynamics and potential academic extractivism in the development of a PhD thesis. Additionally, such questions can also be helpful for researchers who are in the process of adapting, reviewing and redesigning their projects, as Gonzalo found when adopting a hybrid modality and finding an alternative plan for his fieldwork. Positionality and reflexivity, in this sense, are not static and can evolve during our research process (Holmes, 2020). Yet, it seems to be imperative to address the ethical challenges of CPR both from the beginning and throughout the process, reflecting upon and adapting our CPR projects if necessary (Banks et al., 2013).

Secondly, Gonzalo's reflections also indicate the potential for doctoral students to navigate the practicalities of CPR through hybrid approaches and methods, in the context of the COVID-19 emergency. This has also been written about by other researchers such as Khawaja (2022) and Stuart et al. (2021), who conducted Youth-led PAR projects online during the COVID-19 emergency, and Rivera et al. (2022) who discusses the promises and challenges of collaborating virtually during the pandemic. However, CPR that is fully developed in virtual spaces seems to be an understudied area and as Rivera et al. (2022), conclude: 'virtual connection is unlikely to fully replace or surpass the experience of in-person interactions and connection building' (p. 13).

Reflecting upon the potential value of in-person or hybrid spaces for collaborative research, in comparison to online, we draw upon Gonzalo's research, and our own embodied experiences as facilitators, to suggest that face-to-face interactions may help co-researchers to engage in more meaningful exchanges of ideas, perspectives and experiences, leading to deeper understanding and insights. For example, in-person collaboration can help to facilitate relationship-building and trust. Face-to-face meetings can also allow for non-verbal cues such as facial expressions, body language and tone of voice, enhancing communication and leading to a richer and more holistic understanding of the research project. Freire emphasised the importance of authentic human relationships based on mutual respect, trust, solidarity and love. By engaging directly in person, co-researchers can more easily acknowledge each other's presence, dignity and agency (Freire, 1970), demonstrating care, respect, knowledge, integrity and a willingness to cooperate (hooks, 2001). We have both found that engaging openly in in-person collaboration helps us to develop our capacity to respond to others and, in doing so, challenges us to step beyond the 'invisible line' and into dialogue with our co-researchers, or students (Scapp in hooks, 1994, p. 138). This humanising aspect of in-person collaborative research can contribute to a more respectful, inclusive and empowering research environment.

On the other hand, online meetings can also offer opportunities to save time and costs in collaborative projects. Face-to-face meetings often require significant time and resources. In contrast, online meetings can be beneficial for the coordination of meetings, and schedules. Logistics for face-to-face meetings can be challenging; therefore, virtual options are helpful to accommodate and facilitate participants who may face challenges attending face-to-face

meetings due to geographical constraints, additional access or mobility needs or other commitments. In-person meetings may alson be susceptible to distractions and interruptions, such as side conversations, unexpected interruptions or discomfort caused by factors like temperature or seating arrangements. For Gonzalo, however –and again from his previous experiences carrying out collaborative projects– virtual meetings in general can risk be less engaging than in-person meetings.

Gonzalo's reflections also indicate that challenges related to crafting an individual thesis can be addressed not only before initiating a CPR project, but also throughout the continuous process. Maintaining a consistent dialogue with supervisors is crucial, and it is equally important to ensure transparency and clarity with participants, anticipating and responding to potential ethical issues. Sharing our identities, reflexivity in the research process, vulnerabilities and personal or theoretical beliefs with co-researchers may help us to reimagine new possibilities of co-creating research together. It is also important to recognise and be mindful of our identities and challenge our biases at each phase of the research process (Kara, 2018, pp. 81–82). This awareness is crucial during the design, data collection, analysis and dissemination of findings (Basit, 2013). CPR is about reflecting, learning and creating, but also about reimagining possibilities with others (Guerrero et al., 2019).

Alongside demonstrating the potential for adapting CPR to hybrid contexts, Gonzalo's reflections also conversely suggest the potential significance of community spaces to support doctoral researchers engaging with CPR. In this final section, we engage with the field of *Possibilities Studies* to explore our second question about the possible ways in which community may help us to navigate the practical and ethical challenges of CPR. Post pandemic, we recognise the importance of seeking a broader community within the university, as a complement to our discussions with our supervisors.

This presents an opportunity to foster dialogue with fellow students grappling with similar queries, to reflect collaboratively and to help us to explore and set our own expectations for our CPR projects. Meaningful dialogue plays a crucial role in fostering a supportive academic environment.

We draw upon Sisson et al. (2022) to suggest the ways in which 'dynamic practices of communing' rather than fixed notions of *community*, can help us to grapple with shared challenges as researchers (p. 43). *Communing* involves an 'active unfolding process of doing' – a process of co-negotiation of our practice, role and identity as researchers (Sisson et al., 2022, p. 33). For both authors, the process of generative dialogue between each other, and others in the reading group, helped us to *reimagine* how we might conduct research as doctoral students (Sisson et al., 2022). Through the co-creation of dialogic, critical and hopeful spaces with colleagues and the expansion of our networks of care, both authors felt a growing capacity to engage creatively and *cross boundaries* within our research design and practice, whilst also simultaneously engaging with institutional requirements (Sisson et al., 2022, pp. 44, 45, Owis, 2022).

We feel, from our own experiences that co-created peer-led dialogic spaces of reflection in universities may help doctoral researchers to understand and embrace the practicalities of CPR (Wegerif, 2011). In the words of Beghetto, who writes about education systems in general, when engaging with both 'unknown' and 'known unknowns' through, amongst other processes, 'structured, productive discussions and sharing of failures' may build capacity to 'engage with uncertainty' (Beghetto, 2023). We suggest that the plethora of CPR approaches, the openness of CPR and the intensely human nature of this research renders a need for dialogic *engagement with uncertainty* even more important – as not all challenges can be anticipated. We both felt that the interdisciplinary, inter-university and mixed-year cohort of the

reading group helped to enrich discussions of shared practical challenges. Assigning space for peer dialogue may thus help doctoral students to engage with the *uncertainties* inherent in CPR, and productively 'leave room for the unexpected outcomes' of our research (Beghetto, 2023, p. 10). Drawing on Beghetto, we suggest that this form of engaged 'social reflection' may help to build capacity for embracing 'emergent possibilities' in our research (Beghetto, 2023, pp. 7, 11).

Reflecting on our open experiences, we also suggest that co-creating spaces in which doctoral researchers may feel comfortable sharing doubts and vulnerabilities may help doctoral students to feel supported in engaging reflexively with ethical challenges of their research, in combination with supervision, the institutional ethical approval process and university training (see also Ahn & Shegebayev, 2017). These spaces may be helpful for all doctoral students engaging with the 'messiness of doctoral fieldwork' (Naveed et al., 2017), yet particularly for doctoral students engaging with CPR, which involves a high degree of relational responsiveness. For both authors, dialogue between peers has supported and challenged our own individual reflections. We wonder, hopefully, if relational spaces of ethical reflection within the university may in turn build our capacity to engage with the *ethics of the possible* with our co-researchers, co-creating environments that nurture creative dialogue between one another, imaginative forward thinking and learning reflexively from unpredictable or difficult situations (Copeland, 2023).

Through this discussion, we invite reflection upon the possibility of student-led spaces for *communing* within universities to generate both support, reflection and new possibilities for transdisciplinary, collaborative and participatory research. We draw upon Wegerif (2011) to suggest that, with 'meaning emerging through interplay' in co-created dialogic spaces centred on 'openness and respect for difference', we may grow in identification with the 'radical openness' to new possibilities in how

we conduct research (pp. 185, 189). Joining together our *situated* experiences and understandings of CPR as doctoral students may also help us to foreground an 'ethic of collective engagement, dialogue and transformation' in education – or at least, to 'stay with the trouble' of collaborative, relational approaches to research, in light of broader ethical imperatives for collaboration (Haraway, 2016; Higham, 2021, p. 262). We suggest that in-person or hybrid student-led community spaces offer particularly significant opportunities for connecting and re-configuration: spaces of critical hopefulness from which new possibilities may emerge (Ahmed, 2010). These spaces may be particularly significant for doctoral students grappling with the complexities of CPR.

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