Table 1. Long	lict of	characteristics	and ideas	ahout	nationt	angagamant
raule 1. Long	nst or	characteristics	and ideas	about	panent	cingagement

Able to think beyond their own personal situation. They may have diabetes, but can they think about healthcare beyond their own disease and its treatment? Can they think beyond the exam room?

No single agenda. Are they driven by one issue, one condition, one disease? Are they a single disease advocate?

Basic healthcare knowledge

Experience in the community

Have the time to participate

Able to travel to meetings and maybe to conferences

Willing to take a few risks

Sense of humor

Sense of curiosity and genuine interest. Do they accept the general current care and are comfortable with it, or are they curious if things could be better?

Sense of purpose to the research work

Listens. Balances listening and input

Experience as a patient

Have a sense of purpose to the advisory work

Able to think outside themselves, put themselves in others' shoes.

Can speak humbly about their own experience/expertise.

Listens

Views health as more than absence of disease

Larger context aware

Intuitively uses Appreciative Inquiry in exploring unknowns—"what's working?"

Passionately curious, curiosity

Can commit to most activities (has time)

Can work well in a group (can balance contributing with listening; self-monitoring)

Does not have "my way or the highway" mentality

Thoughtful (not the same as talkative)

Open minded, not confined by a personal agenda

Willingness, to find time and put effort forth into doing the work

Ability to contribute responses, opinions, ideas

Optimistic

Proactive about their own health

Diversity: age, profession, gender, health needs, race/ethnicity, communication style, access to health care, language