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Power Relations in Qualitative Research

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This article focuses on the tensions between the commitment to power redistribution of the qualitative paradigm and the ethical and methodological complexity inherent in clinical research. Qualitative inquiry, in general, though there are significant variations between its different paradigms and traditions, proposes to reduce power differences and encourages disclosure and authenticity between researchers and participants. It clearly departs from the traditional conception of quantitative research, whereby the researcher is the ultimate source of authority and promotes the participants' equal participation in the research process. But it is precisely this admirable desire to democratize the research process, and the tendency to question traditional role boundaries, that raises multiple ethical dilemmas and serious methodological challenges. In this article, we offer a conceptual frame for addressing questions of power distribution in qualitative research through a developmental analysis of power relations across the different stages of the research process. We discuss ethical and methodological issues.

Keywords: *ethics; power; qualitative methods, general relationships, researcher-participant*

Qualitative research that includes several paradigms and traditions, with variations between them (Mantzoukas, 2004), presupposes a redistribution of power (Ebbs, 1996). In nonpositivist paradigms (e.g., postpositivism, constructivism, critical theory, and post-modern paradigms), research is often seen as a researcher-participant coproduction of knowledge in which "the division between researcher and subject is blurred, and control over representation is increasingly shared" (Gergen & Gergen, 2000, p. 1035). Various traditions of qualitative inquiry (e.g., biography, phenomenology, ethnography, and case study) respond to this call (Creswell, 1998). They all pose a common epistemological ground: the researcher determination to minimize the distance and separateness of researcher-participant relationships. Some traditions, such as the feminist tradition, specifically take it on themselves to bring an end to the oppression of specific populations (Maguire, 1987), to actively remove the power imbalance between the researcher and the participant (Brayton, 1997), and to remove the notion of ownership of the research from the researcher to redistribute (or replace) ownership with the participants (Wolf, 1996). Others, such as the constructionist tradition, emphasize the coconstruction of knowledge between the researcher and participants, also

placing emphasis on the researchers' role and their responsibility to construct the knowledge. They question the needed balance between developing friendship with participants and maintaining the distance that will allow professional judgment (Lincoln & Guba, 1985; Torres & Baxter Magolda, 2002). In this article, we address these issues in depth, using specific examples from the different traditions but acknowledging that a thorough discussion of the distinguishing differences of each tradition is beyond the scope of this article.

The unique contribution of researchers and participants to a project makes them both inseparable parts of the final creation. Both partners might feel significant levels of involvement:¹ Participants feel involved because of the examination of their personal experiences. Researchers are involved because of their in-depth study of the others' experiences and the aspiration to understand them. This relationship is even more complex owing to the researchers' and participants' significant and sometimes conflicting roles; participants, sometimes as clients or patients, are the main providers

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of data, the storytellers; the researcher is the philosopher of the study, the data collector, analyzer of the participants' stories, writer, and publisher. The researcher typically personally collects most of the data through interviews or participant observations.

During the personal collection of data, the interviewer/observer aims at creating a welcoming, nonthreatening environment in which the interviewees are willing to share personal experiences and beliefs (i.e., their stories). Scholars refer to this nonthreatening environment as creating "a feeling of empathy for informants" that enables "people [to] open up about their feelings" (Taylor & Bogdan, 1998, p. 48). The feeling of intimacy is fueled by the unstructured, informal, anti-authoritative, and nonhierarchical atmosphere in which the qualitative researcher and participants establish their relations in an atmosphere of power equality.

This premise, to democratize the power relations, the promise of control sharing, and the discrepancy between the informal, private (intimate) talk of the early stages of the research and the later, more formal, structured, public use of these data, raises many ethical and methodological dilemmas related to research control, power issues, and knowledge ownership, including the following:

- Incongruity between the micro-ethics of equality in the research relationship and the macrosetting of dominance and authority. This is especially true in specific research and practice macrosettings, such as the one in the health care system, where the distribution of power is unequal and hierarchical.
- Decisions about whether to allow interviewees to read the data analysis, perhaps further complicating the situation if it interferes with the delicate provider–patient therapeutic relationship.
- Editing parts of the analysis, so that it would not be necessary to present them to the participants, not to upset them and compromise the partnership.

In the article, we focus first and foremost on ethical and methodological dilemmas, trying to understand their effect on the participant, the researcher, and the research process and their impact on clinical-practice communities. Second, we show the developmental nature of the power relations through different stages of the study and highlight various ethical dilemmas through examples. Finally, ethical and methodological recommendations are presented.

Power Relations in Qualitative Research

Qualitative inquiry draws on a critical view of hierarchical relations of power between researchers and

participants: "In traditional research, the roles of researcher and subject are mutually exclusive: the researcher alone contributes the thinking that goes into the project, and the subjects contribute the action or contents to be studied" (Reason, 1994, p. 42). In this type of quantitative research, the division of roles between researcher and participant is dichotomous, unequivocal, constant, uniform, and predetermined. This division follows from the positivistic world view that sees the researcher as a neutral observer who objectively examines various human phenomena (Reason, 1994). In the health care context, this division of roles is more closely related to the concept of physician-centered care in which the physician is the focus of attention and sole decision maker. Different qualitative paradigms, departing from this conception of power relations in positivist research, offer new possibilities of fulfilling the commitment to the redistribution of power between researchers and participants (Strier, 2007), with specific, and at times significant, differences between these paradigms. Drawing predominantly on constructivist and critical paradigms of understanding, qualitative research fosters a rebalancing of power in the researcher–participant relationship and encourages a focus on marginalized understandings and experiences (O'Connor & O'Neill, 2004). This approach is related to themes of patient-centered or relationship-centered care in which both physician and patient make significant contributions, have rights and obligations, and the relationship between them matters as much as the final decision made (Epstein et al., 2005; Suchman, 2006).

In practice, concepts and relationships in qualitative research are not fully defined, and there is no correct or optimal relationship. The relationship changes according to the researcher's personality, world view, ethnic and social background, perceptions derived from the researchers' professional discipline, the qualitative paradigm, the theoretical base of the research, the type of the research and its goals, the research methodology, and the researcher's own perception of the place and the role of the subject/participant/collaborator/coresearcher in the research process (Berg & Smith, 1985; Clifford & Marcus, 1986; Ely, Anzul, Friedman, Garner, & Steinmetz, 1991; Woods, 1986).

This variation in the relationship between researcher and participant is also seen in the many definitions and titles assigned in scholarly literature to the different roles in research. The choice of names and words is significant and contains various clues to the perceived power relation between the researcher and participants. The language used to label the research roles varies according to the discipline and type of research, and ranges

Table 1
Participants' Roles in Different Types of Research

Role	Power Relations	Type of Study	Information & Data Collector	Reference
Participant Respondent	Highly hierarchical	Quantitative research Qualitative research:	Researcher	Whyte & Whyte (1984) Mason (1996)
Informer Informant	Hierarchical	Anthropology Ethnography	Field worker	Whyte & Whyte (1984)
Interviewee Participant	Hierarchical	Sociology Psychology	Interviewer	Berg & Smith (1985) Whitmore (1994)
Participant	Low-hierarchical	Feminist Constructionist	Researcher	Brayton (1997) Torres & Baxter Magolda (2002)
Coresearcher Coparticipant	Equal partnership	Cooperative research Research partnership	Coresearcher Coparticipant	Reason (1994) Archer & Whitaker (1994)
Collaborator	High-egalitarian	Collaborative	Facilitator Initiator	Treleaven (1994)

from expressing equal partnership to symbolizing an expert–subject relationship, as demonstrated in Table 1.

These terms range from highly hierarchical power relationships (e.g., researcher and participant) to more egalitarian relationships (e.g., coresearcher). However, there are also some significant differences between the ways different paradigms and traditions use power relation terminology within the field of qualitative research (e.g., informant vs. collaborator). These differences highlight the variation in the many levels of the power distribution within the qualitative field, suggesting that even in some qualitative research paradigms, participants are not always considered to be the “real experts.” In practice, the role of the researcher is often portrayed as a detective whose aim is to discover that which others (including the participants) have not seen or understood until now: “Discovery consists of seeing what everybody has seen and thinking what nobody has thought” (Szent-Gyorgyi, 1962).

Relationships are affected by the content of the inquiry, and equally by the institutional context in which the study is carried out and by researcher and participants' personal motivations. These motivations can be complementary or contradictory, overt or covert. Oftentimes, researchers' motivations to initiate research projects include fulfilling their professional interests, such as publishing, earning an academic degree, or receiving funding (Berg & Smith, 1985; Woods, 1986). Many factors affect the participants' cooperation, including the nature of their interest in the research

topic, the degree of their need to express themselves and be heard on the subject of the research, their willingness to help the researcher, their interest in earning money or receiving gifts, and in the case of action research, their interest in the research outcomes and their implementation (Reason, 1994; Rubin & Rubin, 2005; Traylen, 1994; Treleaven, 1994; Whitmore, 1994). Other reasons mentioned for participants' involvement are altruism, the belief that there is nothing to lose, and the perceived benefits of the therapeutic aspects of qualitative research. Additional influencing factors might include the manner and context in which participants were recruited (whether they were recruited by a person with authority who has control or power over them, such as their physician or a university professor; Peel, Parry, Douglas, & Lawton, 2006). From the onset of the research endeavor, not all participants might be aware of these underlying motivations—a fact that might interfere with the relationship between them and the development of the research.

During its various stages (recruitment, data collection, analysis, validation check, and publishing), qualitative research generates conflicting ethical and methodological dilemmas related to informed consent, confidentiality, privacy, social justice, and practitioner research, as well as questions about power, reciprocity, and contextual relevance (Shaw, 2003). In this article, we argue that the study of power relations between researchers and participants, as any analysis of power, should go beyond the normative and rhetoric level and be grounded on the

real practices of qualitative research (Flyvbjerg, 2001). In other words, if qualitative research endeavors to create a truly egalitarian framework for researchers and participants, power relations must be confronted with "real" research practices. We are reacting to the call to "put the moral issues on the table" (Wolcott, 1995, p. 123) and to reunite written accounts with the actual experience of research (Peberdy, 1993). The article offers an alternative conceptual framework for addressing questions of power distribution in qualitative research and points out the developmental nature of power relations in the course of the different stages of the research process.

Power Relations During Different Stages of the Research

A research project follows a developmental trajectory, though this is by no means a linear trajectory, as some stages are done parallel to others and some occur in the course of the development of research. Each stage has a different purpose that, to a certain degree, shapes the respective roles of the participants and the researcher. The developmental nature of the research process leads to changes in power relations, which pose specific ethical issues to the researcher. We have identified five stages:

1. Initial stage of subject/participant recruitment
2. Data collection
3. Data analysis and production of the report
4. Validation
5. Additional publications from the same source material

1. Initial stage of subject/participant recruitment. During this stage, control over the research process lies in the hands of the researcher, who decides how to introduce the research to potential participants, how to describe the research goals, and how to disclose institutional affiliations to enlist maximum cooperation. The amount and quality of the information offered regarding the research are entirely at the researcher's discretion (Bravo-Moreno, 2003; Whitmore, 1994). The goal of this stage is to persuade potential participants to participate in the research and share their personal experience and knowledge. The dependence of the researcher on the participants' consent might enable participants to obtain more information about the research and the researcher. The researcher, who is in possession of the information about the study, and the participants, who own the knowledge and experience needed to perform the study, can use their respective powers to negotiate the level of information provided about the study. This negotiation

has the potential to change the power relations between the two, giving participants greater power and more information. This negotiation is better controlled these days than it was in the past, and some participant rights are more explicitly established as a result of requests by institutional review boards (IRBs) for a clear description of the study and its objectives. However, the nature of exploration in qualitative studies is even unclear to the researcher in the beginning stages of the study, and therefore might not be able to be fully explained to the participants in these forms.

At this stage, ethical dilemmas involve questions about strategically obscuring some of the research goals to persuade the participants to take part in the study. Some scholars raise questions about the participants' real autonomy to voluntarily give informed consent in clinical settings in which researchers are commonly identified with clinical service providers: when they are in a hospital setting and wear white coats, are referred to by their titles of "doctor" and "professor," and are introduced to participants by their physician. This raises concerns about the patients feeling an obligation to participate. This is also the case when researchers tend to reduce the ethical principle of informed consent to a formal regulatory requirement by IRBs or other overseeing bodies (Dawson & Kass, 2005).

2. Data collection. During this stage, the researcher seems to be entirely dependent on the participants' willingness to take part in the research and to share their knowledge of the research subject with the researcher. At this stage, control and ownership of the data seem to be in the hands of the participants. The quantity and quality of the data shared with the researcher depend in part on the relationship that develops between the researcher and various participants. The researcher must try to elicit the participants' stories as much as possible, their experiences, and their wealth of knowledge of the research topic. One measure of the interviewer's success is the ability to retrieve and receive the participant's story and permission to use it in the research and related publications (Ely et al., 1991; Reason, 1994; Woods, 1986). This is accomplished by a rapport-building process (Ceglowski, 2000; Goodwin, Pope, Mort, & Smith, 2003; Minichiello, Aroni, Timewell, & Alexander, 1995; Taylor & Bogdan, 1998).

There are various rapport-building tactics that can be interpreted as a mask for some type of manipulation or exploitation carried out to obtain the data needed for the study. These tactics include self-disclosure, running errands, sharing a meal (see Dickson-Swift, James, Kippen, & Liamputtong, 2006), or "faking friendship"

(Duncombe & Jessop, 2002, p. 107). Achieving heightened empathy or informed consent using these methods is considered a process that is likely to increase participation and the richness of the research data, but can also accentuate the participants' vulnerability or distress, particularly among vulnerable constituencies (Krayner, 2003). This raises ethical problems if the researcher collects data that the participants did not want to share with the public or did not plan on sharing. In this sense, the idea that the researcher lacks power in the interview might be misleading. Kvale (1996) argued that the warm, caring, and empowering character of qualitative interviews might conceal huge power differences, and the dialogue that takes place in the interviewing process might be a cover for the exercise of power. From his perspective, most of the power lies in the hands of the interviewer, who poses the research project, sets the agenda, and rules the conversation. The interviewer initiates the interview, determines the topics to be discussed, controls the interview guide, and decides when to terminate the conversation (Brinkmann & Kvale, 2005). Some of the control described here can be reduced when there are coresearchers or a research team that can help reflect these controlling behaviors. However, the idea of the researchers' exclusive power is only partially true, because the interviewees themselves can also determine the level of cooperation in the discussion. For example, they can use various problematic interviewee behaviors (e.g., flattery, flirtation, and social desirability; Collins, Shattel, & Thomas, 2005), they can shift the focus of the conversation (Hutchinson & Wilson, 1992), and they can ultimately decide to terminate the interview.

In biographical research, for example, the participant holds maximum power and control of the story during the data collection stage. To gain access to the participant's private and intimate experiences—in other words, to get the story—the researcher must court the participant, enhance the sense of rapport between them, and build a considerate and sympathetic relationship and a sense of mutual trust.

3. Data analysis and production of the report. With termination of the data collection stage (or specifically the one-on-one interview), formal control and power over the data returns to the researcher. From now on, the story shared with the interviewer is “separated” from the participant, and the researcher becomes the “storyteller” who recasts the story into a “new” historical, political, and cultural context.

During this stage, the researcher's control over the data seems to be absolute (i.e., “the interviewers monopoly of

the interpretation”; Brinkmann & Kvale, 2005; Marcus & Fischer, 1986), and ethical considerations are of utmost importance. The researcher has total responsibility toward the participants, the research project, and the institution. The willingness to share the data analysis process with participants or letting them join in the final stages of writing is in the researcher's hands. The decision to share varies according to the researcher's world view, qualitative research paradigm, and the nature of the research content. Moreover, the researcher must ask what additional knowledge will be gained from involving the participants in the analysis.

Additional questions that require answers are as follows: What parts of the data analysis can be reported to the participants without reservations? What parts raise qualms and uncertainty? Whose interest is served by exposing the data analysis to the participants, and who might be harmed by the disclosure? For example, in qualitative studies focused on the doctor–patient relationship, exposure of the analysis of triangulated data between patient and physician interviews can harm the delicate relationship developing between them. Patients and physicians have shared their stories and experiences with the researcher with a promise of privacy, but triangulation and combined analysis reveal other dimensions and expose the other's story and perceptions (Karnieli-Miller, 2006).

4. Validation. The possibility and risk inherent in involving the participants is present also during the validation stage. After data collection and analysis are completed, some researchers choose to reengage participants, with the objective of strengthening the trustworthiness, accuracy, and validity of the findings, and to empower the interviewees. The reengagement is implemented through follow-up interviews meant to check the authenticity of emerging insights identified by researchers and verification of participants' intended meanings (Cutcliffe, 2000) or member checking, carried out individually or in a group, in which participants have the opportunity to discuss the findings and conclusions of the study. This process is meant to decrease the risk of misinterpretation of the participants' stories by providing inaccurate generalizations (Hewitt, 2007; Richards & Schwartz, 2002).

There are also different levels of involvement: Some researchers allow participants to transcribe the interviews (Grundy, McGinn, & Pollon, 2005; Grundy, Pollon, & McGinn, 2003); others let them edit the transcripts (Vernon, 1997). Some prefer to present participants with the emerging themes; others prefer presenting the final draft of the research. Some, for various reasons, prefer

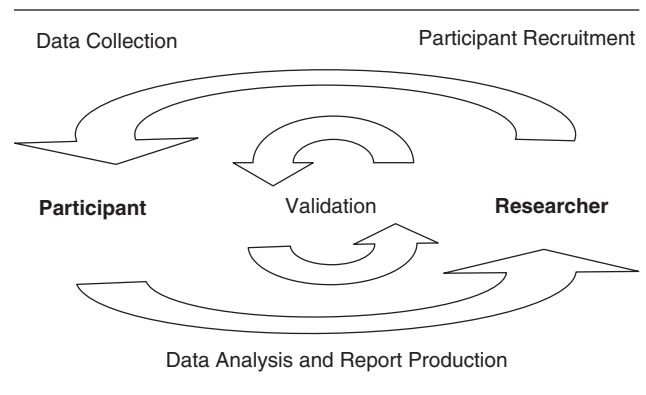
not to get back to them at all. Every choice the researcher makes (to share or not to share, when to share, and what to share) has inherent ethical difficulties.

Forbat and Henderson (2005) questioned the issue of allowing participants to comment on their transcripts from the participants' point of view. They suggested that "although sharing transcripts might be driven by a desire to empower participants in the process, it can be experienced as threatening: underlining speakers' ungrammatical style and prompting worry over how they are represented" (p. 1124). Another problem that participants might experience is the difficulty of confronting the researchers' analysis. Exposing the analysis to participants who lack adequate clinical skills to deal with their reactions to the findings, especially regarding sensitive issues, can potentially cause harm. Implications and consequences for the research might include a commitment to omit/revise the research findings because of participant reservations or because of the researcher's fear of negative participant reactions. From practical and ethical points of view, member checking, especially in a group format, can create difficulties in preserving anonymity. This is particularly true because qualitative research is frequently local and draws on a limited number of informants. Participants might be easily recognized through the personal vignettes included in the research report or through the member-checking process. Identification of participants by reading and processing of the research article can have contradictory results; it might strengthen personal growth or produce negative consequences (Saukko, 2000).

However, the option of not sharing the analysis with participants is not problem-free either. Refusing to share the analysis process can result in a lower level of trustworthiness of the findings, lower levels of contribution to the study, lack of commitment to implement recommendations, or a breakdown in trust between researcher and interviewee for not keeping the original promise of sharing.

5. Additional publications. The use of research data for additional research purposes seems to be the researcher's prerogative. This use can be made years after the data were collected, at a time when participants are cut off from the research process. This stage raises several questions from an ethical point of view, such as "To whom do the data belong?—to the participants, the researchers, or the research community?" Even if the consent form signed by participants at the beginning of the process grants some approval to disseminate data, it is possible that participants were not completely aware of the fact that their authorization amounts to a complete

Figure 1
The Flow of Power Relations in Qualitative Research



renunciation of knowledge ownership to others. In qualitative studies, this is especially true when unexpected data emerge from the study that were not included in the original goals of the study and were not specified in the consent form. Questions of data ownership and the ownership of knowledge are examples of ethical dilemmas present at this stage of research in general, and particularly in qualitative research, where the "subject" is no longer anonymous but an active "participant" to whom the researcher is ethically responsible. Figure 1 summarizes shifts in power relation during different stages of research. As mentioned, and partially expressed by the circular design of the figure, these stages of qualitative research are nonlinear and can reoccur several times. For example, it is a well-established method to do the analysis during the collection of data, which leads to changes in the interview guide and future collection of data.

Levels of Partnership/Knowledge Ownership

Current approaches frame the relationship between researcher and participants according to the level of partnership attributed to it. From a developmental perspective, we argue that power relations in qualitative research should be seen as a continuum. On one side of the continuum, the relationship is characterized by a high level of partnership in which research findings denote strong loyalty and commitment to participants and to their story. On the other side, the relationship is characterized as highly differentiated and asymmetric. This approach claims that after the data are transferred to the researcher, they undergo a process of shared elaboration whereby they might and should be processed and interpreted by the researcher without significant active participant input.

According to this position, the researcher and informants' roles are clearly delineated, and any attempts to engage participants in areas of the researchers' expertise would blur these boundaries. The researcher's task is to collect the informants' stories and use skills, experience, and ethical commitment in a way that best serves the research goals. There is no need, therefore, to expose informants to data to increase the credibility of the research. It is the researchers' critical adherence to methodological thoroughness and transparency that endows the research process with credibility. Partnership with the informants cannot replace scientific rigor. After the data are transferred into the realm of research, they become research property, to be used under conditions that commit the researcher to certain ethical guidelines. These conditions are as follows:

1. Participants must fully understand (at the level known to the researcher at that point) the meaning of the study and truly volunteer to participate in it.
2. Researchers must not distort the meaning of the participants' voices.
3. Researchers must protect the anonymity of the participants (Seldman, 1991).
4. Researchers have an obligation to participants' beneficence—an obligation to provide benefits for the participant and to balance such benefits against risks (Beauchamp & Childress, 2001).
5. Researchers have an obligation to nonmaleficence that requires doing no harm.

At the other end of the continuum is the "full partnership" approach, which advocates a high level of participation by informants long after the data collection stage. According to this approach, it is the researcher's ethical responsibility to find ways to involve participants in data analysis and to develop creative methods that enable them to participate not only in data collection but also in the creation and verification of the final product. Moreover, participants are encouraged to express their views about the truthfulness of the conclusions and the relevance of research recommendations. The "full partnership" approach is underpinned by the belief that qualitative researchers should be proactive in turning the latent knowledge of the participants into a self-evident presence (Shkedi, 2003).

One of the common problems of the full partnership approach is that in the final phases of the project, the partnership between researcher and participants might be affected by the participants' negative feelings, which in turn might negatively affect the research conclusions (Hoskins & Stoltz, 2005). This

is the case when the researcher, attempting to keep the promise to share the study report with the participants, fears that the study results might hurt the participants' feelings or insult them, so that sharing the findings might contradict one of the basic premises of social research: not to harm the participants' well-being. At the same time, not sharing the results or omitting parts of it to protect oneself or the participants' feelings might interfere with the opportunity to contribute essential data to the research and to the clinical communities, what Brinkmann and Kvale (2005) refer to as the macro-ethics level, of how the knowledge produced will circulate in the wider culture and affect humans and society.

The main objective of many research projects is to improve clinical practice. This objective can be attained through a deep understanding of the participants' personal and collective experience. In qualitative inquiry, participants might disclose delicate, intimate, private information, sometimes never disclosed before. The researcher's concerned, careful, and compassionate attitude sends a message of acceptance and accessibility, but does it also represent a commitment to the participant, to the research process, or to the case under investigation in general? Given that the researcher is committed to all three, the focus should be on finding a way to balance the different commitments during all stages of the research process, from the specification of the research goals to the final presentation of the findings.

Discussion and Summary

The desire to make participants full partners in the various stages of the study sometimes seems to contradict the methodological and ethical promises of qualitative research. The right of participants to play a significant role can lead to the denial of the researcher's right to intellectual and academic freedom and to an oversimplification of the theoretical construct that can potentially emerge from the research. In light of these constraints, qualitative research oscillates between the desire to offer a less hierarchical and more reciprocal, transparent framework and the need to respect the theoretical foundations, methodological discipline, and ethical boundaries of qualitative scholarship. The fluctuation between an authentic aspiration to democratize the research process and to change the power relations between researcher and participants seems to partially contradict the primary commitment of qualitative research to make a contribution to the research and clinical-practice

communities. Sharing might have unintentional consequences for the participants or come at the expense of achieving a significant construction of meaning, with future negative implications for the clinical community.

These ethical and methodological dilemmas lead to a continuing struggle to find a way to create power relations that balance the building of a respectful relationship between researcher and participants, based on mutual trust, and the use of theoretical and clinical knowledge that has been gained in professional training. This balance is affected by, among others, the stages of the research process.

The feeling of true participation is based on a message of dignity and acknowledgment of one's equal right to contribute knowledge and an experience that matches the message. This message need not imply a simplistic view of symmetric partnership but a genuine respect for individual perceptions and experiences.

From the beginning of the research process, researchers must be honest with themselves and with participants about the nature of the partnership at each step. The researcher must clarify and explain to participants that the analysis of the data relies on several dimensions and aspects: what has been said, how it was said, and when. It is important to emphasize the contribution of each partner. Interviewees contribute their stories, experiences, and the way in which they choose to present these; researchers contribute their theoretical and professional experience and the intention to understand the stories presented by the participants. The representation of the data includes both the participants' experience and the researcher's understanding and interpretation of it. To some level, the researcher becomes an inseparable part of the research (Mantzoukas, 2004; Marcus & Fischer, 1986). Actually, in some paradigms, such as constructionism, the researchers will acknowledge their significant role in constructing the knowledge acquired in the study. However, the researchers' important role in the analysis of data and their skills do not grant them supremacy in any way, or the right to perform a judgmental analysis. The primary moral research obligation is to the participants and their welfare, which can be achieved only through nonjudgmental analysis and writing.

Ethical and Methodological Recommendations

Researchers have recourse to several methods before ("think a bit first"; Punch, 1994, p. 95), during,

and after the study (reflection) to protect their own professional ethics and at the same time demonstrate their respect for the participants.

- **Before the Research**
 - Thoroughly examine the goals and reasons underlying the study.
 - Examine the researcher's personal commitment to the studied population and ensure that it includes an obligation to do no harm (beneficence and nonmaleficence). Increase the familiarity with the study population by learning their culture and history (Few, Stephens, & Rouse-Arnett, 2003).
 - Commit to present the study and its aims in a clear and open way (Bravo-Moreno, 2003)—including clarifying the roles, responsibilities, and rights of both the participant and the researcher in the different stages of the research.
 - Provide information about the expected distribution of the knowledge developed in the study (expected audiences).
 - Protect privacy and anonymity (Bravo-Moreno, 2003).
- **During the Research**
 - Make meticulous use of language tailored to the interviewees' capabilities and life experience (Few et al., 2003).
 - Show awareness of the developing power relation during the interview, and provide open communication that allows criticism of the research and of the method, even in the course of the interview (Bravo-Moreno, 2003). Make sure the participant has the right and the opportunity to object (Brinkmann & Kvale, 2005).
 - Give reminders, especially during intimate portions of the interview, about the nature of the study and its publication.
 - Commit to the principle of justice by continuously making sure that there is a fair distribution between the benefits experienced by the participants and the burden they experience (Kahn, Mastroianni, & Sugarman, 1998).
 - Conduct verification interviews at various stages of the study to confirm the researcher's understanding of the information collected and the right to use it (Enosh & Buchbinder, 2005; Lincoln & Guba, 1985).
- **After the Study**
 - Check and recheck the researcher's obligation to the study population, which includes sincere concern not to hurt the participants and not to expose their "dirty laundry" in public.
 - Do not distort the meaning of the participants' voices. Avoid representing only the

researcher's voice (Marcus & Fischer, 1986), and be clear about which voice is represented. Protect the anonymity of the participants (Seldman, 1991). Acknowledge the strength of the group (e.g., the coping strategies of victims of domestic violence, and not only the social structure that led to a life with violence; Few & Bell-Scott, 2002). Use the participants' own language in writing, to best reflect what they wanted to say. As one of Hendersen's participants wrote to her after reading her manuscript, "Your methodology of quoting at length from the statements and perceptions of individuals is very successful at bringing out the revolutionary underlying principle of respecting them and taking them seriously" (Forbat & Henderson, 2005, p. 1125). Provide "thick description" of the context, the process, and your own values and experiences that played a role in the interpretation and presentation of data (Brinkmann & Kvale, 2005). Use reflexivity to be transparent and accountable for the methodologies and their limitations. Represent the influencing factors, such as the researchers' values, norms, and institutional pressures, that play a role in interpreting and writing the findings (Malacrida, 2007).

The idea of going through an ongoing reflective process (see James & Platzner, 1999) and of examining and reexamining the different reasons for conducting the research and the various influences it might have on others (the participants and the community) might decrease the risks for all involved and increase the benefits from the study conducted. This process is part of a more broad reflective process of researchers addressing and writing about ethical issues and dilemmas (e.g., Goodwin et al., 2003; Mason, 2004), emphasizing the need to discuss issues of voice, textual representation, reflexivity, positionality, control, and power relations (Hertz, 1997; Lincoln & Guba, 2000). By discussing these issues publicly, expanding the understanding of them, and promoting self-examination in the various stages of research, we can potentially decrease the violation of participants' rights and increase our accountability and true obligation to them, to self, and to the professional community.

Note

1. The level of involvement can be placed on a scale, the range of which is determined by the degree of engagement and sensitivity to the research topic.

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