CRITICAL QUALITATIVE HEALTH RESEARCH

Exploring Philosophies, Politics and Practices

Edited by Kay Aranda

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Critical Qualitative Health Research seeks to deepen understandings of the philosophies, politics and practices shaping contemporary qualitative health-related research. This accessible, lively, controversial introduction draws on current empirical examples and critical discussion to show how qualitative research undertaken in neoliberal healthcare contexts emerges and the range of complex issues qualitative researchers confront.

This book provides readers with an interrogative discussion of the histories and the legacies of qualitative research as well as the more recent calls for renewed criticality and demands for activism in research to respond to global health concerns. Contributions further showcase a range of contemporary work engaging with these issues and the encounters with philosophies, politics and practices this involves; from seeking explicit engagements with more recent posthuman ideas, as well as detailed and revised explorations of deeply engaged humanist approaches, to further critical discussions of the politics and practices of novel, digital and creative methods.

This book offers postgraduate researchers, health researchers and students opportunities to engage with the emergent and messy terrain of qualitative health-related research.

Kay Aranda is a Reader in the School of Health Sciences at the University of Brighton. Having worked in primary care, public health and community health nursing, her research interests include theory-informed qualitative and feminist research and inequalities related to gender, age and sexuality.

The introduction to this text promises a different perspective on qualitative research in healthcare, and its readers will not be disappointed. It takes a critical stance, and a discussion of the philosophical and political dimensions illuminates the complexities of this type of inquiry which is sometimes forgotten in other texts. The authors are known scholars and researchers in the field of health and social sciences research with a wide range of publications between them.

Immy Holloway, Professor Emeritus, Faculty of Health and Social Sciences, Bournemouth University, UK

This edited volume maps contrasting routes to doing empirical qualitative research in health and social care contexts. It critically examines how knowledge is always contested, partial, perspectival and imbued with power relations. Kay Aranda, and her impressive gathering of diverse researcher-practitioners, do a fine job in responding to the call for researchers to be more explicitly reflexive about their choices. Authors explain their preferred methodological and epistemological paths and argue their vision of a society that prioritises anti-oppressive civic values over divisive positivist and market-led ideology. This is a timely contribution, reminding us all to care, question our philosophical assumptions, and engage in critical political debate. This philosophically-informed volume will be an invaluable resource for any doctoral student seeking direction through the bewildering terrain of contemporary qualitative methodologies.

Dr Linda Finlay, PhD, BA(Hons)Psych, MBPsS,DipIntPsych, DipPCSup, Integrative Psychotherapist and Academic Consultant

This is a very interesting and impressive book focusing on critical qualitative research in healthcare, acknowledging the problematic of power and inequalities in how qualitative research has been and is designed from the perspective of the researcher as well as the research participants and the topics and issues researched. There is a great deal in this book for those engaged in qualitative research. The book supports new and novel approaches to qualitative research and this is a refreshing aspect for those looking for new ways to undertake qualitative research. In particular, I liked the consistent theme of co- producing research including the engagement and involvement of lay people and services users at all stages of the research. This is an important book for those who are using or plan to use qualitative research methodologies and it provides many examples of how to carry out credible and rigorous qualitative research.

Dr Anne Arber, Senior Lecturer, School of Health Sciences, University of Surrey, Guildford, UK

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Routledge
Taylor & Francis Group
LONDON AND NEW YORK

First published 2020
by Routledge
2 Park Square, Milton Park, Abingdon, Oxon OX14 4RN

and by Routledge
52 Vanderbilt Avenue, New York, NY 10017

Routledge is an imprint of the Taylor & Francis Group, an informa business

British Library Cataloguing in Publication Data
A catalogue record for this book is available from the British Library

Library of Congress Cataloging-in-Publication Data
A catalog record has been requested for this book

ISBN: 978-1-138-36122-5 (hbk)
ISBN: 978-1-138-36126-3 (pbk)
ISBN: 978-0-429-43277-4 (ebk)

Typeset in Bembo
by Taylor & Francis Books

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CONTRIBUTORS

Dr Kay Aranda is a Reader in the School of Health Sciences. Having studied social sciences, she then worked in community health nursing, health promotion and public health and in primary care and the voluntary sector in women's health. She has been an academic researcher for nearly 20 years, supporting postgraduate students in studying qualitative research, community health nursing and health inequalities, especially related to intersectional differences (e.g. gender, age, sexuality). She has more recently been involved in exploring feminist new materialisms, sociomaterial practice theories together with civil society community organisations. She has published widely on community nursing, resilience in relation to health inequalities and community health, as well as in relation to gender and sexuality and the use of feminist theories and concepts in healthcare for qualitative researchers.

Dr Heather Baid is a senior lecturer in critical care in the School of Health Sciences, University of Brighton. Currently, she leads the Intensive Care Pathway and BSc (Hons) Acute Clinical Practice degree for post-registration health care professionals. Her teaching regularly draws from qualitative research, and she also supports dissertation students to learn about qualitative methodology and methods. Heather has experience conducting qualitative research from her successfully completed PhD research project which was a constructivist grounded theory study about sustainability in critical care practice. She co-leads a specialist interest group on grounded theory in the School which provides a programme of seminars, support and expertise to early career and postgraduate researchers.

Dr Chris Cocking's research background is in the field of Social Psychology and involves the study of collectives and groups, falling into two main areas: crowd behaviour and collective resilience. His main body of interest is explaining how

people behave in crowds and is part of a group of Social Psychologists who seem to spend a lot of their time overcoming the classic myths associated with collectives, as crowds often behave much better than they are usually given credit for. His own specific area of interest is mass emergency behaviour and how this influences disaster planning and response guidelines. What is increasingly emerging is that communities affected by emergencies are often much more resilient to adversity than was previously expected, and this has profound implications for emergency policy and planning. More recently, Chris has been looking at how people can come together if they have a shared experience of adversity, and how this collective resilience might also help mitigate the effects of exposure to stress. He has explored the emergence of collective resilience in a variety of diverse groups, such as nurses, paramedics, and young people at school dealing with the everyday stresses of growing up.

Kay de Vries is Professor of Older People's Health at De Montfort University, UK. She has a background in nursing and her early clinical practice was primarily in the community and hospice. Kay is predominantly a qualitative researcher and has expertise in all qualitative research methodologies and is also experienced in using mixed methods approaches. She has used Case Study methodology for many years and supervised several PhD students using this methodology. Kay has developed and led a number of postgraduate research programmes and supervised a large number of MSc and PhD research students to completion. Her research has predominantly focused on people with dementia and their family members; in acute, community and care home environments, and at end of life.

Oliver Thurlow and **Rebecca Player** are both postgraduate researchers undertaking doctoral funded fellowships in the School of Health Sciences at the University of Brighton, exploring health and well-being through lifeworld perspectives and descriptive phenomenology.

Professor Kathleen Galvin has been undertaking qualitative research for over 20 years and has been developing phenomenological oriented theoretical work in addition to empirical studies using phenomenology in a range of health and social care issues. This includes contributions to new perspectives of well-being, its absence and human dignity. She has been supervising candidates undertaking research degrees since 1997 and is still learning about the developing edge of phenomenological research and its potential.

Alec Grant, PhD is now an independent scholar, having retired from his position as Reader in Narrative Mental Health in the School of Health Sciences at the University of Brighton in May 2017. He is widely published in the fields of ethnography, autoethnography, and narrative inquiry. He was for some years the leader of the University of Brighton's postgraduate module, NAM13 *Qualitative Research,* and has taught autoethnography on that module for many years.

Dr Debbie Hatfield is a nurse and qualified teacher and has worked in healthcare education for over 25 years. She was a senior lecturer at the School of Health Sciences, University of Brighton for 20 years teaching on undergraduate and postgraduate pre- and post-registration courses. Initially working in critical and acute care, her interests later shifted to public health, service user involvement and community engagement. She has published and presented on clinical skills assessment, humanising healthcare and volunteering as part of the social engagement agenda within universities. In January 2014, Debbie secured a PhD studentship at Brighton and Sussex Medical School sponsored by the Higher Education Academy. Her research explored partnership working between service users and clinicians to commission and lead health and care services. Particularly the features of effective models of service user–clinician engagement and how this can impact the design of health care curricula. She has since successfully completed her PhD which was supervised by Professor Gordon Ferns, Dr Kay Aranda and Breda Flaherty.

Dr Julie Scholes (Consultant and Independent Researcher). Julie has been practising research, in particular grounded theory, since 1987 and teaching research methodology, philosophy and method since 1993. She has extensive experience of undertaking commissioned health care research in a variety of settings ranging from the critical care environment to mental health and community locations as well as educational settings. She has been supervising research degree students since 1995 and is constantly learning from her students how to address the challenges inherent in fieldwork, analysis and writing. Her research interests include how practitioners acquire expertise, aspire to caring excellence, and learn the art of nursing working with the participants of the research. She has a particular interest in involving patients and the public in research that is authentic and realistic and recently has been working with colleagues in the field of regenerative medicine. Now she is working at the Royal Hospital for Neurodisability working with colleagues to undertake research that focuses on the experience of patients and their families who experience complex and enduring long-term neurological disabilities.

Dr Graham Stew has worked in Higher Education for the last 30 years, and has a background in mental health and general nursing. Recently retired from his principal lecturer post in the School of Health Sciences at the University of Brighton, he is now an Associate Lecturer for the Open University. His research interests include inter-professional education, change management, reflective practice and mindfulness teaching. He currently supervises doctoral students and teaches research methodologies to postgraduate Open University students. Graham has a personal interest in non-dual teachings and has published four books on the subject. His main research expertise lies in the field of phenomenology, hermeneutics, interpretative phenomenological analysis and the philosophy of qualitative research.

PREFACE

The aim of this book is to explore the many ways in which philosophies, politics and practices enter into and shape the endeavour of qualitative research conducted in health-related settings. This edited collection is distinctive in aiming to engage with these facets of qualitative research at a time when questions over the value of qualitative research are evident, but yet when so many pressing global healthcare concerns over undignified or damaging care, growing inequalities and suffering, mental health issues, and increasing exclusions and marginalisation of minority communities and vulnerable of peoples, requires detailed, rich and in-depth accounts as well as challenging and troubling approaches. This book is further unique in offering contributions from a range of qualitative researchers confronting these issues, from early career to established experienced researchers and authors. The book aims to offer a critical counterpoint to current times. It provides an accessible, lively and controversial introduction to the diverse philosophies, politics and practices informing qualitative health-related research, aiming to open up these concerns for scrutiny/interrogation and to stimulate further inquiry and debate.

INTRODUCTION

Kay Aranda

The current contexts in which health, care and illness are researched have never been more troubling. A decade of global austerity measures, further intensified by neoliberal imperatives in healthcare, has led to an unprecedented rise in inequality, precarity and suffering (Dorling, 2015; Piketty, 2014). These contexts and concerns are well known to those working and researching in healthcare in the global north. This manifests in healthcare for example, as lives lost to poverty, disadvantage, exclusion, marginalisation, or is evident in daily experiences of suffering or harm from undignified, disrespectful and damaging treatment or care. Moreover, efforts to stay well or healthy or enhance mental and physical wellbeing are increasingly difficult to achieve in contexts and environments that are non-conducive and damaging people's health. With the rise of populist politics challenging democratic values of inclusion, equality and community solidarity, fears over widening social divisions and growing intolerance increase, issues which have in turn led to serious questions over the direction, purpose and value of public research (Buroway, 2015; Lather & St Pierre, 2013). One outcome has been to demand qualitative researchers take up more explicitly political positions, both in order to give attention to diverse experiences of vulnerability, precarity and disadvantage or health and wellbeing, but also to develop and defend a particular future vision of society that values and prioritises civic society over market or state (Buroway, 2015). This call demands increased activism that makes a tangible difference in people's lives, addressing suffering and social injustices in more relevant, detailed and convincing ways (Denzin, 2017; Flick, 2017; Lather, 2016). These contexts and uncertain times also mean that what is considered to be true or trustworthy, or what counts as credible knowledge, used to justify action or demands for change, remains deeply contested. Therefore, to seek to argue for deepening and developing our understandings of qualitative research in such contexts is both timely and political.