

## **School of Healthcare Research Ethics Committee (SHREC)**

### **Criteria for judging ethical quality of research of the individual: (e.g. autoethnographic research and/or clinical narrative)**

#### **Scope of the topic**

This paper refers to research that is either:

1. Autoethnographic or heuristic, in which the researcher makes use exclusively of his or her own experience in order to elucidate a phenomenon, often within cultural frameworks. Examples from within this School are Meekums (2008) and (before she joined this School) Muncey (2005).
2. Practitioner research that makes use of one's own clinical or educational case notes in order to elucidate these phenomena. Examples from within this School include Meekums (2005) and Hunter & Lees (2008).

#### **Purpose of this paper**

It is imperative that *all* research within the School is captured through SHREC, and that SHREC practices are seen to be appropriate for all sound methodological choices. This paper offers guidance to the committee and is an attempt to reassure all concerned that research of the individual is being subjected to appropriate criteria for evaluation within SHREC.

#### **The problem**

This kind of research is seldom conceived of at the time of data collection. Clinical notes are not written usually with research or publication in mind, and although many practitioner-researchers do ask their clients at some stage whether they would mind being written about, some do not.

The use of conflated and fictionalised case examples is one common way that writers get round this, while others will write up the case study after gaining informed, written consent. Such writing often has a narrative quality to it, rather than a reductionist treatment of data; it may also make use of artistic methods of knowing / data generation and data presentation, including photographs, poems and the like.

When the subject is oneself, things can be even more problematic. An example might be that the researcher builds a montage of personal (i.e. the researcher's) e-mails and journal entries to examine the role of computer mediated conversations in maintaining attachment relationships over geographical distance. This problem of how one addresses the fact that life is not lived in isolation has been previously explored (Meekums 2008). Hunter & Lees (2008) overcome this problem through collaborative writing about their own educational relationship. Other researchers have used 'process consent', offering more than one draft to participants for feedback and consent or modification. Nevertheless, the particularities of this kind of research present ethics committees with a different set of issues from more traditional research designs.

#### **Some questions to consider when reading a proposal for research of the individual**

1. Does the researcher declare his or her motivation for the study? [this is important because, if not, there may be a few blind spots that could impede efforts to address power dynamics]
2. Who benefits, and how?
3. Is the writing likely to make reference to others?

## SHREC guidance research of the individual

4. If the answer to question 3 is yes, is this issue addressed in the proposal? If it is:
  - a) What procedures are in place to consult the person(s) or representative(s)? [NB the usual information sheets and consent forms may not be the best way to do this – for example, e-mail contact or other forms of consent may be more appropriate to the relationship if informal means of communication are more usual and such formal procedures may in fact put a strain on the relationship. In such instances a simple assurance that this has been conducted (with some detail concerning the procedure for this) should suffice].
  - b) How is the issue of power within the relationship considered and addressed?
  - c) Bearing in mind the power dynamics involved, to what degree is 'informed consent' likely, given the procedures identified? For example, is this issue discussed with all persons to which the research is likely to refer (who may not be 'participants' in the sense of supplying data directly)? Is consent seen as a process rather than a one-off event? Are they reminded of their right to withdraw at any time? Given the opportunity to comment on and influence drafts?
  - d) Are the implications of all this for the relationship considered? How will sensitive information be handled? [possibilities include: fictionalised accounts; careful checking with the other person; representation of multiple voices and multiple truths]
5. Whilst acknowledging that this sort of research is never positivist and has an organic nature (making firm predictions about the method difficult), has the researcher considered options for how data will be collected, stored and worked with, and any implications of each stage for ethical review?
6. Has the researcher considered what will *not* be revealed, and why?
7. What, if any, are the *positive ethics* of this story / these stories being told? [Examples might include the telling of stories by marginalised individuals, or the telling of stories seldom heard due to societal focus on a different kind of story] How are individual voices and truths (including the researcher's) treated / respected?

This guidance has been drawn up by Bonnie Meekums, on behalf of SHREC and is endorsed by SHREC (23.2.10)

## References

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- MEEKUMS, B. 2005. Creative writing as a tool for assessment: implications for embodied working. *The Arts in Psychotherapy*, **32**, pp. 95-105.
- MEEKUMS, B. 2008. Embodied narratives in becoming a counselling trainer: an autoethnographic study. *British Journal of Guidance and Counselling*, **36 (3)**, pp. 287-301.
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