

**DRAFT**

**Research as Relationally Situated Activity: Ethical Implications**  
Journal of Feminist Family Therapy, 1994, 6 (3), 69-83.

Sheila McNamee<sup>1</sup>

**ABSTRACT**

This essay addresses the issue of research from a social constructionist perspective. Of central concern is how research helps to bring forth the kind of world that will entertain the multiple and often competing versions of reality that are generated in differing discursive communities. Traditional research is characterized by its standards of objectivity and its quest for the essential features of our investigational topics. A social constructionist researcher would see this view of research as only one among many possible stories to tell about the process of investigation. By centralizing language practices -- that is, situated action -- a social constructionist researcher can simultaneously entertain the possibility of competing and varying ethical standards and avoid the demise of rampant relativism.

---

<sup>1</sup>Ph.D., Chair and Professor of Communication, Department of Communication, University of New Hampshire, Durham, NH 03824.

We live in a post-modern world. We are constantly exposed and have access to multiple and often competing perspectives by simply switching on our television sets or glancing at the daily newspaper.

The rapid growth of information technology and the virtual collapse of the main political reform movements of the past century are part of a fashionable, studied incertitude as to the 'real' nature of things (Lyotard, 1984). People are losing faith in human science, progress, and personal meaning as 'Modern' touchstones of truth. (Parker, 1989, 74)

Our worlds are no longer isolated and insulated from threateningly different ways of being.

This immersion into other ways of knowing the world has called into question the ethics we use to guide our daily activities. For the clinician or researcher, the question of an ethical code has always been particularly significant. Competing theories and methods have been debated on ethical grounds. In this essay I will address the ethics of research within a post modern, social constructionist perspective (Gergen, 1985; Gergen, 1991), although it is worth noting that I do not view a focus on the research endeavor as differing substantially from a therapeutic interview (cf: McNamee, 1988; McNamee, 1992).

### Critique of the Traditional Research Context

Recent discussions in social theory (Sarbin, 1986) have proposed that theoretical descriptions of social activities are, themselves, simply part of broader, cultural narratives. This position gives us reason to pause and reconsider what we are doing when we grant a given perspective or theory the status of Truth. Why and how could one theoretical perspective be more true than another? How could we possibly mediate among competing perspectives? Who stands in a position to make such judgements? If each theory or perspective is, as Lyotard (1984) says, a "discourse of legitimation," whose discourse is being sanctioned by particular forms of practice (both in research and everyday activities)?

If we accept a traditional view of research, we assume it to be an objective endeavor whereby features of everyday life can be discovered and examined if the right theory and corresponding method are employed. However, such a position ignores the conversational (discursive) aspect of the research process. It might very well be the case that there are "objects" in the world to be studied. Yet even these physical objects can not be examined outside of language. The discursive forms used by scientists construct the knowledge and information we have about the world.

Illustrations of this surround us. How do we judge, for example, which of two competing diagnoses is accurate? The answer to this question depends upon the discursive communities within which we operate. For example, if my religious beliefs dictate a value in "spiritual healing" over medical intervention and I am rushed to the emergency room as the result of a car accident, I will probably listen more attentively to the advice of my spiritual healer than that of the medical professional because this is the compelling and persuasive argument to me. I will be more rhetorically sensitive to this form of talk.

A traditional view of the research process claims that one of the jobs social researchers have is the translation of people's understandings of everyday life into theoretically based descriptions and explanations. It is believed that such descriptions and explanations will chart the course for progressive change in our social worlds. Making progress in this respect requires formal, technical understandings of social problems, issues, and events. Once those understandings are in place, we then are armed with the tools necessary to control them. Simply put, formal understandings lead to the development of procedures for advancement.

## Research as Construction: A Discursive Ontology

What is interesting about the traditional view of research described above is that the "foundations" that emerge from careful and expert research are not, in fact, actual objects. Most of what researchers study is not located in some physical substance. After all, what is cognition? What is memory? What are emotions? Researchers, in an attempt to bring closure to the contingent nature of social "facts," spend a good deal of time "operationalizing" the "objects" of their study. Thus, emotions are objectified as electrical impulses running throughout the body and a variety of specified physiological symptoms. Intelligence is objectified as markings on a questionnaire.

To the extent that social researchers engage in this process of operationalization, they share with physical researchers a blindspot about how language constructs the research process as well as the research results. I would like to suggest that we generate research alternatives that place language at the center of the investigative process. While the physical world is "out there," language is our only recourse for coordinating our activities within this physical world. Regardless of what is "there," it is our way of talking about what is "there" that connects or disengages us from others. This way of understanding the research process suggests a reconceptualization of ethics. Our task is to elaborate the processes by which we construct particular views of the world -- and these processes are rooted in what we do together -- our situated, joint activities.

## Ethics as Emergent By-Products of Relationally Situated Activities

This emphasis on what we do together is the project of social constructionists (Berger and Luckmann, 1966; Shotter, 1993; Gergen, 1985, among others). Drawing on the later work of Wittgenstein (1953; 1965), Shotter (1993) describes how we actually construct social ontologies through our talk. The joint activities of participants in context create the realities within which we live. Shotter says,

The most obvious circumstance in which such joint action occurs, is in dialogue with others, when one must respond by formulating appropriate utterances in reply to their utterances . . . we as individuals do not quite know why it is that we act as we do: rather than speaking 'out of' an inner plan (or mental representation), we speak 'into' a context not of our own making, i.e., not under our own immediate control . . . Thus here, our interest is not in the structure of 'already spoken words' (in sentences, as in linguistics), but in 'words in their speaking' (in utterances). (1993, p. 3)

From this perspective we are left with conversation. We construct our knowledge about any topic in collaborative interchange with others.

If particular ways of talking construct our worlds, then the discursive forms that emerge and gain viability within particular communities construct the ethical standards by which we live. A "way of talking" can only be given space if others engage in and add to it. Thus, the relational aspect of meaning is featured.

Standard diagnosis in the field of mental health serves as a good example. To talk about depression requires that others accept the rhetorical force of the argument. Arguments are rooted in ways of talking. The meaning of depression and its significance within a given community will be dependent upon the ways in which people coordinate their actions in relation to that term and each other. For example, is depression good, bad, common, unusual? Participation in certain forms of talk will construct different meanings. Participation in a grieving ceremony such as a funeral might legitimate depression. Additionally, culturally privileged forms of talk

will make depression a viable description in one culture and politically dangerous in another. Kleinman (1988) points out that until recently the term "depression" was avoided in China and that "Mao Zedong said that such mental illnesses were not so much diseases as they were wrong political thinking" (p. 109). Thus, the ethics of research on depression will vary drastically from one culture to another.

It is most useful to understand ethical descriptions of "good," "bad," "common," or "unusual" as emergent by-products of joint actions that are always situated in discursive contexts. Thus, what we "know" is dependent upon our forms of relatedness.

This suggests that when we offer descriptions or explanations we are not only explicitly and implicitly circumscribing an ethic, we are privileging and reifying (literally, making real) certain language practices. If we adopt this view, then we can not avoid realizing that there are multiple forms of description (multiple language practices) that are rendered insignificant once one perspective is privileged. This realization alone provides the opportunity to consider options; to become curious about what other discursive forms might be relevant within other communities; to consider a multiplicity of ethical discourses. Consequently, we inadvertently entertain coordination across potentially disparate communities -- not for the purpose of delimiting a unified ethic but for purposes of expanding the voices and creating a relational context where differences can at the very least be examined.

Relational Rationality. The relational perspective raises a new set of issues concerning the research process and ethical issues. Since we construct our worlds in language, the discursive forms we use (i.e., that are relevant to us) are by-products of our conversations. And, because we all engage in differing forms of relatedness we valorize differing discursive forms. The research process can not escape these constraints. Consequently, we have differing rationalities that are completely coherent and ethical within their local communities and potentially discordant and perhaps deemed unethical beyond those boundaries.

The success or failure of any given rationality depends in large part upon the discursive community(ies) being addressed. Fisher (1984) talks about discursive forms as stories and tells us that a significant feature of compelling stories is that they provide a rationale for decision and action. Thus discursive forms constrain and determine behavior in a coherent (not causal) sense and they are constitutive of ethical standards.

Some stories are more compelling (and hence appear more ethical to those who are compelled) than others - but not because they are true. A compelling story, according to Fisher is one that meets the criteria of narrative probability and narrative fidelity. Narrative probability addresses the need for a story to be coherent. Narrative fidelity suggests that "good" stories ring true with the stories people know to be true in their lives. Fisher's criteria underscore the shifting perspectives from which judgements can be rendered.

This orientation confronts the traditional ideal of rationality by implicitly recognizing that stories are always told from a perspective. A story that is coherent for me or that rings true with my life may not do the same for you. This has bold implications for the research process and the issue of ethics because we at once realize that there are varying and competing perspectives and that any evaluation or judgement of a story is also a story and thus is similarly situated within a perspective. Consequently, the viability of research results and the ethics of any given research procedure can only be locally determined. And yet we must also remember that locally determined rationalities must also be coordinated with other locally determined rationalities. It is this constant process of discursive engagement that constructs our sense of ethics, truth, and knowledge.

Also worth noting is that the conventions for talking that are available to us shift through time and across context and culture. Illustrations of these cultural shifts can be dramatically witnessed by comparing recent and older versions of the main diagnostic manual used in the mental health profession -- DSM-III. Years ago homosexuality was included as a diagnosable pathology. Today it is no longer listed in the manual. As some diagnoses drop out of the list of available alternatives, others (such as post traumatic stress disorder and premenstrual syndrome) are added.

However, it is not the case that any story will do. First, as mentioned, there is the problem of traditions of interpretation and the varying commitments one has to a multiplicity of perspectives (traditions). Second, there is the inescapable dependence on others to supplement (Gergen, 1990) our actions and stories in such a way that they become sustainable and viable within a community and perhaps across communities.

The idea of supplementation foregrounds a relational sensibility. We can not construct meaning without others. The meanings we co-construct with others become powerful ways of talking that often emerge as truths. We act out of a sense of commitment to these truths/stories and thus our actions are simultaneously constrained and potentiated.

This view underscores the relational dependency of our decisions and judgements concerning evaluation, morality, and truth -- much of which we decide upon by using research as "evidence." This issue raises the question of the possibility of bias-free research. If all said is said from a perspective, then there can be no research free of ideology. The question is whose ideology will be represented in the research report. It is important to remember that from a discursive perspective, it is not only the research report that is significant but the process of research itself. Research is a conversational form. As such, it has the potential to intervene in the construction of the social world of its participants.

#### Research as Social Intervention

What does a relational sensibility mean in the research context? Typically researchers are seen as experts. They are well-versed in the subject of their investigation. However, if those who are the subjects of the investigation are, in fact, selected for a particular investigation, then they must also be "experts" on the topic. Granted, the expertise is of a different kind. Yet whose perspective should we privilege? Whose ideology will dominate? Is it not the case that researchers actually look to their "subjects" for "thick description" (Geertz, 1973) of their investigational topic? Both researcher and researched contribute to the realities that are constructed, and consequently intervene in each other's lives.

As a student and young scholar I used to spend an inordinate amount of time wondering why the research context was so much more "rigorous" than the therapeutic context. I would try to satisfy myself with the understanding that the therapeutic setting is designed to intervene in people's lives and the research context is designed to limit and control the amount of intervention that might take place as a result of the investigative process. Researchers, it is believed, are appointed as neutral observers who do not contaminate or interact with the subject of their studies. Therapists are designated as psychological advisors doing what they can to shift the direction of a person's life.

This distinction was never satisfying to me. I began to think that perhaps one of the reasons the interventive nature of the therapeutic process is commonly accepted while it is denied in research activities is due to the cultural legitimacy granted to the stories people bring to the therapeutic domain. This is what we expect to deal with in therapy. In research, however, investigators believe that they must transform people's stories into objective measures.

That we privilege perspectives appearing to be more scientific is based on our attempts to be objective about the phenomena we study - which, in itself, is based upon our cultural adherence to a modernist perspective, one that valorizes the discourse of science (Gergen, 1990). But we are examining the social world where ways of talking prevail.

The task of living in the social world then becomes the task of coordinating our behaviors with one another such that we can make decisions about how we should act, what we should believe, and so forth. But we make these decisions in cooperative interchange with others. We do not make these decisions because they are correct by some objective measure. Our decisions are coherent (i.e., "fit") with the way we talk about our worlds.

If we think about research as another story we tell with the cooperation of and in coordination with others then the relevant issue is how do we negotiate multiple perspectives? We have many perspectives to consider: those of the people we study, our colleagues, the broader communities in which we live, to name only a few. The questions a researcher asks are always situated within complex webs of understanding (which are by-products of complex webs of relatedness). Thus, we need to question the questions raised in the research process.

For example, at my own university the president requested that the director of the Women's Commission convene a group to discuss the "problem" of women and leadership on campus. The director selected a mixed group of university women representing all aspects of the campus. This included faculty women, professional and technical staff women, and operating staff women. Some represented the academic side of the university while others represented the administrative and general operations aspects of the institution. The group was told that their task was to make recommendations to the president indicating methods for enhancing leadership potentials for women on campus.

The group immediately began by questioning leadership, itself. What was it? Who was defining it? Were the notions connected to leadership the same for everyone (male and female) on campus? These were only a few of the central questions guiding the group's first few conversations.

From this emerged a discussion about the need to redefine the concept of leadership. The group began to talk of leadership as a process not a role. Specifically, leadership was revisioned as a process which invites others to participate. Thus, a "good" leader is one who attends to what is going on in the interactive moment such that others feel free to contribute and participate in the construction of their local worlds.

With this reconceptualized notion of leadership, the group began to discuss how they might invite the university community to share this perspective on leadership. The group was engaged, as they saw it, in changing the local discourse on leadership. Consequently, they were challenged to design a research project that would allow them to simultaneously gather information about leadership and create a context for discursive change.

The group eventually decided to generate several focus groups across campus composed of men and women from all aspects of the university. These focus groups would each discuss opportunities and impediments for advancement at the university. These discussion groups would provide the context within which conversation entertaining multiple perspectives and experiences could be shared and examined. This collaborative context would go far in beginning a campus-wide conversation about "leadership" as a process simply by providing the opportunity for various constructions to emerge. This approach differs from one designed to extract one, unified vision of leadership which would then serve as the basis upon which workshops, techniques, skills, and positions could be fashioned.

This is but one illustration of how research conducted from a discursive, social constructionist perspective might proceed.<sup>2</sup> It suggests that our notion of ethics - in research, clinical practice, and everyday life - is substantially different within a social constructionist perspective. We no longer have foundational truths which must be impressed upon others. We no longer have grand theories that "put it all in perspective." Theories are by-products of relational interchange, as are ethics. This does not mean that we are left with rampant relativism. Within any discursive community (local ontology) there are constraints to behavior. It is not the case that one is free to act however she wants. If we construct ourselves through talk, and talk takes place in relational contexts, then our ways of talking and acting will gain sustainability and viability only when others supplement our actions. This is also the case for talk across discursive communities.

The implication is that we can no longer stand in a position which allows us to impose our ethics (our way of talking) on another. Doing so fails to acknowledge that a significant change in one's behavior demands that the interactive moment provide the participants with the means by which alternative interactive resources may be called upon. Such circumstances do not always prevail.

As researchers and clinicians we can attempt to provide those opportunities by understanding research and clinical practice as discursive moments that are not isolated from the shifting yet "real" (as in locally real) meanings and actions that participants construct together. Thinking from a discursive perspective we might shift questions such as, "Why is X the case?" and "What causes X?" to "How does the researcher come to identify X as the topic of her investigation?" or "How does the researcher come to "know" that X is the case?" This is a relational, not an essentializing, question because the answer requires that the researcher tell how, in conversation with others, these "objects of study" were given meaning and life. Similarly, we might ask, "How is it that what people do together provides the opportunity for particular descriptions to emerge and remain viable?" This question creates a context where a multiplicity of voices can co-mingle. It places an emphasis on interactive forums. Other significant questions include: "Who is this research for?" "Who could it be for?" "How many different stories could be told?" "How might others frame the research questions?" "How might others design the research procedures?" and so forth.

Emphasizing discourse in the research context shifts our attention to the ways in which we intervene in people's lives and equally how those we study intervene in our lives. If meaning is dependent upon what others do in relation to our actions, then the results of research are not factual descriptions of "the way things are" but are only enabled by certain interactive processes. Viewing research in this way frees us from the inhibiting constraints of controlled contexts and the search for correct analyses. It positions us in such a way that we can begin to entertain alternative stories (or at least recognize their viability in different communities). This, to me, is an important way to negotiate across and between incommensurate perspectives. As such, it is a

---

<sup>2</sup> Another excellent illustration of a social constructionist research method can be seen in the Public Conversations Project of the Family Institute of Cambridge (Chasin, Chasin, Herzig, Roth, and Becker, 1991). They have designed a forum in which they bring together members of the community who have strong oppositional views on the issue of abortion. In their crafting of the conversational context, the researchers/discussion leaders provide opportunities for disparate discursive communities to discuss their views and generate curiosity and respect for each other.

step toward understanding what it means to live in relation with others.

When language is the starting point, there is nothing to discover or explain but rather different ways of talking in which to engage. Research is another form of talk. We co-construct realities with the people we study when we engage in research. Those realities are part of the web of relations in which both researcher and researched participate.

Foucault (1970) describes discourse as an event made real when expressed in some form such as writing or speaking. From these events, we construct possibilities and constraints. In other words, conventions for talking make some actions and interpretations sensible and others inappropriate, meaningless, or prohibited.

Research then must be viewed as a constructing process which implies that we construct and reconstruct the descriptions (stories) of social life as we actively engage in the research process, itself. Furthermore, the traditions of interpretation that we bring to the research context must be coordinated with those we are studying, with the intellectual community to which we speak, to our own families, friends, and so forth. All are presented in some way in our research endeavors. The questions we ask and the conclusions we draw are coordinated within this complex network of relations. From this process of coordination, constraining and potentiating descriptions will emerge. For example, to be described by a professional as "depressed" could be constraining (i.e., "Oh no. I'm depressed. Now what will I do? Will I ever get over this depression? Will I ever be cured?"). It could equally be potentiating (i.e., "Well, that makes sense. I'm depressed. No wonder things have been going as they have. Now that I know I'm depressed I know what I have to do to get beyond the depression.").

### Conclusion

We are surrounded by evaluative categories that mark the boundaries between acceptable and unacceptable behavior and interpretations (e.g., what it means to be a good student, a good scholar, a good citizen, mentally or physically healthy, etc.). In a postmodern world, however, we are presented with the contingent and shifting nature of such categories. We are confronted with the multiplicity of voices that join in the construction of our ways of being. What comes to be labeled as legitimate and socially viable is based on a communal construction achieved not from some presumed ontological status inherent in our forms of knowing and acting but rather through our interaction itself. It is clear that categories of behavior designated as aberrant, abnormal, or deviant are social constructions that can not be divorced from traditions of action and interpretation. And, once these traditions are placed in relation to other traditions of action and interpretation, the ideological nature of each can be acknowledged. It is almost inevitable then that as differing traditions converge, power relations are established. A physical ailment in one culture is a mental deficiency in another and both of these constructions carries with it an entire set of beliefs and actions.

The process of diagnosing (which we engage in as researchers as well as therapists) places us in a position of domination. Can we make room for other voices by asking what discursive form is being privileged in a given conversation? Generally, in the research context, the privileged, centralized discourse is a modernist discourse based on the scientific metaphor. An ideological commitment to science -- the narrative of progress -- omits other voices.

Social constructionist research selects a topic of study NOT as an object but as a problem in construction itself. That is, the relational aspect of what we study becomes central rather than any assumed "essential" aspects of our research topics. Rather than ask, "What are the characteristics of X?" (questions of essence) we might ask, "How is it that what people are doing together in this interaction provide the opportunity for certain interpretations, explanations,

descriptions and lines of action to emerge and gain viability and sustainability?" This question also implies constraints. Also of importance is, "How is it that the assumptions made and the questions asked provide the opportunity for particular conclusions to be drawn?"

There are no specific techniques or strategies in which researchers must engage. To set out methods, techniques or strategies would be to privilege one discursive form over others. Simultaneously, I do not want to say that there are no means by which we can evaluate, make choices, or declare one way of talking as better than another. These decisions can only be made relationally. Research, like all other forms of interaction, is situated practice. Its ethics, relevance, value, and appropriateness will be judged differently depending upon how one situates the research activity.

If we talk of research as a discursive process, we orient ourselves differently to this activity. We begin to examine ways of talking/acting and we become curious about how they have gained viability and how they have been sustained within particular communities -- how, in fact, they can be deemed ethical. Such an examination can provide the resources for bridging or negotiating different "ways of talking." Consequently, the interventive nature of research is highlighted rather than denied, as are the multiplicity of voices.

The researcher who accepts a discursive perspective will acknowledge or examine his or her ideological commitments and will question the ontological status of his or her research. Information emerging from the research process highlights the multiple relationships in which both researcher and researched are emersed. It also highlights the premises upon which conclusions are constructed as well as the coherence of the methodological choices a researcher negotiates within his or her intellectual community. Rather than examine human interaction with assumptions about what is normal or abnormal, ethical or unethical, good or bad, there of not there, our interest shifts to exploring how these ways of talking emerge in the social practices of interacting persons. Accepting this view of the research process is important in facilitating the negotiation of multiple perspectives and a beginning to the reconstruction of our sense of ethics.

## REFERENCES

- Berger, P. L. and Luckmann, T. (1966). The Social Construction of Reality. NY: Doubleday.
- Chasin, L., Chasin, R., Herzig, M., Roth, S., and Becker, C. (1991). The Citizen Clinician: The Family Therapist in the Public Forum, AFTA Newsletter, 46, 36-42.
- Foucault, M. (1970). L'Ordre du Discours. Paris: Gallimard.
- Fisher, W.R. (1984). Narration as a human communication paradigm: The case of public moral argument. Communication Monographs, 51, 1-22.
- Geertz, C. (1973). The Interpretation of Cultures. New York: Basic Books.
- Gergen, K. J. (1991). The Saturated Self. New York: Basic Books.
- Gergen, K. J. (1990). From heteroglossia to communication. Keynote Address, Temple University 11th Annual Conference on Discourse Analysis, Philadelphia, PA.
- Gergen, K. J. (1985). Social pragmatics and the origins of psychological discourse. In K. J. Gergen and K. E. Davis (Eds.). The social construction of the person, (pp. 111-128). New York: Springer-Verlag.
- Kleinman, A. (1988). The Illness Narratives. New York: Basic Books.
- Lyotard, J. (1984). The postmodern condition: A report on knowledge. Minneapolis: University of Minnesota Press.
- McNamee, S. (1988). Accepting Research as Social Intervention: Implications of a Systemic Epistemology. Communication Quarterly, 36 (1), 50-68.
- McNamee, S. (1992). Social Construction and the Process of Inquiry, American Family Therapy Newsletter, 47, 37-9.
- Parker, I. (1989). The crisis in modern social psychology - and how to end it. London: Routledge.
- Sarbin, T. R. (1986). The Narrative as a Root Metaphor for Psychology. In T. R. Sarbin (Ed.), Narrative Psychology, (pp. 3-21). New York: Praeger.
- Shotter, J. (1993). Cultural Politics of Everyday Life. Buckingham, UK: Open University Press.
- Wittgenstein, L. (1953). Philosophical Investigations. Oxford: Blackwell.
- Wittgenstein, L. (1965). The Blue and the Brown Books. NY: Harper and Row.