1. Date Transcribed: 03/06/2021
2. Interviewer(s): Cathy Gibbons

Respondent(s): Danni

**INT: So, Danni thank you for agreeing to take part in this piece of work, this research, and I wonder could you tell me a little bit about your career?**

[0:00:19.8]

RES: Yes, sure. So, I did a PhD in Social and Political Theory and I did that at *X* University and it was a book based PhD as in I was doing an analysis of somebody's thought, so somebody who's a prolific writer and I was doing an analysis of his thinking and so it was a very particular and you know I did that in the at X but in the school of politics and government or something I think it was and yes, I mean part of my reason for doing a PhD was because I absolutely loved my undergraduate and my master’s degree and I didn't want to leave it really, I had spent six years after leaving sixth-form college working in industry and loathing it and not really understanding why I was doing it or, and I couldn’t get excited about anything that I was doing, it all seemed to me very, well this is a rude word for it, but I found it all very trivial. And so -

[0:01:59.7]

**INT: What stuff were you doing Danni?**

[0:02:01.1]

RES: I was a secretary, I was a secretary in American Express, credit card company and I was doing that in Thatcher's Britain and I was surrounded by people who had opinions and views that I felt uncomfortable with but I didn't have a language to challenge them. So that's why I decided to go and do a degree at aged 25 and I chose sociology because I went to the library and read this massive book which was all the degrees in the whole country that you could possibly do and the one that interested me most was sociology and of course it makes sense retrospectively, I was in a society that I couldn't really relate to. Anyway, so I did a degree, absolutely loved it, I was like I couldn't believe my luck to be doing what I was doing and I just thought it was the best thing since sliced bread and so when I finished my first degree I thought oh, I really want to go on and do a masters so I went and did a masters and then I wanted to do a PhD.

[0:03:19.6]

**INT: Is that what happened?**

[0:03:21.5]

RES: Yes, and it's what happened and when I did my PhD I contacted an academic whose work I liked and you know, it was wonderful, it was in the days when he accepted me with a very flimsy idea of what I wanted to do and he even found a bursary for me so I didn't have to pay any fees, I just had to pay my living expenses and because I was a trained secretary I could easily earn money and I did it part time and so that was great. And actually, I ended up with a teaching job within my first semester, I'd met people who, Des, my supervisor ran seminars in his house in the evening and I met people at these seminars and somebody said oh I've got too much teaching would you like some, and so then I got a teaching job and I just never looked back really. So, I ended up within the first year of my PhD getting a job at University College because I down in Hampshire and again, I just loved it you know, I'd done my degrees and I was learning, you know I was writing my PhD and then I was doing a job that allowed me to kind of learn while I was working you know, I was learning what I was teaching, one step ahead of the students and so, yes it was fantastic. But so, then I ended up at Midlands because I had, I met Mark my husband and he was based at Midlands and so for a while we had a long distance relationship but then I had a baby and initially I didn't have a job, so I was on maternity leave from my job at University College and I didn't have a job to go to in the midlands. And so initially I returned to my job at University College but it was so hard having a baby in Hampshire and a partner in the midlands and between us we were shuttling between two places.

[0:05:39.6]

**INT: Who supported you, kind of what was your support network when you were down in Hampshire with your baby?**

[0:05:47.0]

RES: Well I ended up, it was a bit, oh gosh it was all sort of made up and initially my mum offered to help but then she lasted about a week and decided she couldn't manage it. So that was a bit of a shock because I hadn't got a nursery place but I did have a nursery place and I needed more nursery then so I used a nursery while I was at work, but of course the work is fairly flexible at the time you know, so as long as I was therefore teaching I was able to kind of box and cox and I actually had a dear colleague who offered to pick Lisa up sometimes from nursery for me you know if I was busy. So, I had you know bits and bobs of help but it wasn't a tenable long term solution really so I did eventually leave the job. Oh yes, because that was the other thing, I mean I didn't have a very good experience because when I first started with them - this is University College - I was their blue-eyed girl and when I became pregnant my position in the eyes of the people with power and so on it changed and they started to make my life difficult. Things like the wanted me to do evening teaching and things like that out in a bloody wood somewhere, I honestly you couldn’t make it up. So, I was you know and I think my head of department had decided that I was going to leave because my husband was up in Midlands and he had, he had a chair and so there was an assumption that I would follow him and so my head of department sort of speeded that up by making my life difficult really, it wasn't good. I did actually complain retrospectively and I had a very you know, kind of well actually what happened, the union man wrote to me because I got in touch with the union, and he said to me, and I can still remember the words of his email, he said ‘whatever you may eventually hear, the shit has hit the fan’ because I complained about my treatment. Anyway, so I left, came to Midlands, got fairly depressed, I got some sort of, I got some hourly paid work in the department of politics and also the department of sociology so I had bits of work coming in, then I had another baby. While I was pregnant with my second baby this job that I've currently got was advertised, my husband spotted it he said “Why don't you apply for this?” it looked counterintuitive because it was in a school of health sciences but what they wanted was a sociologist and I had that background. So, I applied and yes I haven't looked back really, it ended up being you know in many ways the sort of ideal place for me to come and it was very interesting for me to go from being highly theoretical, which is what my PhD was about, and most of my interest in sociology at undergraduate and masters level had been theory rather than empirical work, empirical studies and I pitched myself straight into an empirical context. And that has been hard work because I have basically taught myself how to do empirical research, I don't have training in it. However, within a year or two of starting at Midlands I took on the role of being director of the MA and research methods, so I was effectively teaching people what I didn't have myself which is the training to do an empirical study. So, again I learnt on the job and I was also supervising with PhD students with other colleagues who were empirical researchers so I was learning from that experience too and yes, so I've honed my skills as a qualitative researcher.

[0:10:33.9]

**INT: Through -**

[0:10:35.5]

RES: Through the job.

[0:10:36.5]

**INT: Yes, through the job, on the job training.**

[0:10:39.9]

RES: On the job, yes, yes, yes.

[0:10:42.3]

**INT: So, how did you do that, what approach did you take to doing that? I don't want to kind of second guess how you did that.**

[0:10:49.4]

RES: Yes, no, no well so early on I was supervising with a woman called Claire O’Connell, who was in the, she ended up as a professor in the school of sociology and she subsequently left, but I supervised two PhD students with her and I just remember her saying to me, you know because my propensity would be to think oh, you know,’ I need to go and learn how to do this, formally, I need to formally go and learn how to do this’ and she said ‘no, just do it, just do it, design a study and execute it’. And so, I did that, I did that and I think because I, I mean I think I found it very hard because I think I made all sorts of decisions that were at the time ill-informed. I also worked with colleagues, other colleagues who were empirical researchers and so you know I wasn't designing a study on my own, I was doing it in collaboration with colleagues and again, so learning on the job. But you know I very quickly started teaching on the philosophy course in the research methods training programme because of course you know, philosophy and political theory and social theory are things that I gravitate towards so I became a teacher on that. And then, you know so and I could really see how depending on your epistemological position that then plays out in terms of the decisions that you then take about how to design a study and how to frame a question and exactly what is the natures of the data that you're collecting and so on. So, I had you know I was in a brilliant position in lots of ways to learn actually quite rigorously and practically how to do research and of course, you know I mean any decision about how you do your research is not straight forward and there's a zillion debates and arguments about what it could or should look like and I positioned myself on the more sociological end of qualitative research. So, I'm not interested in a descriptive deployment of the data, you know I wanted to look at it as a where I could bring my sociological theory and literature that is theoretically informed to the data. But what's interesting for me about that is that I work in a context where that is not typical.

[0:14:22.2]

**INT: Is that in your, tell me more about that context then.**

[0:14:26.4]

RES: So, I mean in the school of health sciences. So, I work, the school of health sciences is a school that is made up of people who come from either the academics or the students are nurses, midwives, physiotherapists and or other allied health professionals, so anybody who's not a medic who works in healthcare of some sort and you know what I can see, I mean alongside what I've already told you I was also employed as a sociologist to teach nurses, undergraduate nurses, sociological aspects of health and illness. And that was new to me you know, I hadn't done any of that in my sociology degree so again I was learning on the job and I was learning about sociology of medicine and sociology of health and illness and so on as I was teaching it and I was working with students. And I was very lucky because I was only teaching on what was then called the undergraduate master’s degree and that attracted bright students you know who had A levels and wanted to become nurses and they were going to leave with, it was a four year degree and they were going to leave with a masters, a masters of nursing science so they were bright young things and I didn't just teach them in their first and second year but I also supervised their dissertations and their dissertations could be empirical. So, again I had an opportunity to work with people who are you know who typically will ask empirical questions about how something works or how people understand something and so again I was learning on that job. So, literally every aspect of my paid working job was contributing to me learning this thing I now refer to as doing empirical qualitative research. But in that process of course I was deciding what type of qualitative researcher I wanted to be and what I could see in nursing in particular and I understand nursing better than any of the other allied health professionals because I spent more time in that division. But nurses live in the shadow of medicine and they I mean, I'm being rude here but they live in a bit in awe of it and they seek to emulate it. So, even though the activity that nurses do is qualitatively different to what a medic will do, they seek to try and frame what they do in terms a medic will understand, so they err towards quite a positivist understanding of knowledge and quite a positive understanding of how to do qualitative research.

[0:18:04.8]

**INT: It sounds as though well I suppose I'm checking my assumption here, it sounds as though you think they’re wrong in doing that or that's problematic.**

[0:18:19.1]

RES: Yes, no that's a good, that's a harsh framing of it and you're right I guess. Yes, I mean I suppose yes, I do think their wrong because -

[0:18:36.3]

**INT: But that's the reality that they live with.**

[0:18:40.7]

RES: Well, yes however if I want to know whether I should take a drug or not then absolutely I want a randomised controlled trial and I want to know cause and effect that if I take that drug that it will affect that ailment that I have you know. In other words, you know medicine is primarily concerned with body, the body and dis-ease in the body whereas what nurses do is they care for the body and the body isn't just a physical body, it is a social body and so the sorts of questions that a nurse wants to understand the answer to are social questions, not medical questions or questions necessarily. I mean some nurses do go down the medical model and they are more medically orientated nurses and there's a place for that but the majority of nurses are not doing that sort of work and the sorts of questions they want to ask are social questions, how to care or how to organise services that better supports the experience of the patient. And they're concerned with patient experience, they're not just concerned with has that patient got better, they're also concerned with has the patient had a good experience and again, that is a social question. So, the reason to go back to your initial question to me about you know which pulled me up slightly because I felt uncomfortable with the question but you're right, but at the end of the day it depends on the question that you're asking and what I don't think is correct in the context that I work in my school is that undergraduate nurses get taught that there's a thing called the hierarchy of knowledge and that there's a gold standard of research and the gold standard is RCT's and systematic reviews. And they are, they have their place but it depends on the question. So, for me it's inappropriate to say there’s a hierarchy because the hierarchy is dysfunctional if you deploy the hierarchy for a question that doesn't suit the hierarchy.

[0:21:24.0]

**INT: Thank you Danni, I do apologise it was one of those, I found myself agreeing with you and I thought hang on a minute I really do need to -**

[0:21:33.1]

RES: No, no, no I'm not, I don't mind at all that you asked that question, it was quite interesting for me to notice my own reaction to it.

[0:21:44.5]

**INT: Which was -**

[0:21:48.1]

RES: But, and I suppose yes what I'm telling you is that I have worked in this school for 19 years and it has been quite uphill to defend an alternative way of understanding knowledge and knowledge acquisition and the value of qualitative research, because the problem with the hierarchy of knowledge is that it devalues qualitative research. It says that is a lower standard of knowledge and that -

[0:22:30.0]

**INT: Different.**

[0:22:30.8]

RES: Well, it's nonsense because if you want to know the answer to an experiential question then you don't send out, you don't put people into an experiment in a laboratory, you ask them about their experience.

[0:22:53.6]

**INT: The, trying to go back to some of the more, back to your experience of becoming a qualitative researcher, because I know you owned that label and even during this interview, has that changed how you would have defined yourself? You know you say ‘I'm a qualitative researcher’, when you, at what point do you think were you able to own that label and how strongly do you own it?**

[0:23:30.4]

RES: Yes, it's a good question. I mean I do remember a point in my career and this would probably be seven or eight years into the job when I realised that I, and I didn't really tell many people this because it would have been, well there's a long standing debate in nursing in particular but I think probably in other allied but particularly in nursing about the whether it's appropriate to have other disciplines in nursing and there’s quite a strong body of thinking within nursing, in academic school of nursing that says unless you've been a nurse you shouldn't be here. So, you know me being part of nurse education is not a straightforward question and I was appointed at a time when the professor and the head of school thought that sociology was foundational to nursing and since she's left people like me have slowly left and I'm more and more on my own. There are less and less people that look like me, there are more and you know and when they reappoint people they appoint people with nursing accreditation and or yes other allied health professionals. So, but there was a point in my career I don't know six or seven years in, when I realised that I wasn't really interested in training young people to become nurses. You know I was surrounded by people who were absolutely passionate about creating the next generation of nurses and of course they had lots of concerns that I didn't share, like what professional practice should look like, what evidence based practice should look like, whereas I was there in order to help people to think and think critically, that's how I saw my role you know. And there was a long time when I used to think to myself why on earth am I teaching nurses sociology, you know why would a nurse need to know sociology and the only explanation that I could come up with is so that when they feel bad about something that happens in practice where they risk feeling culpable they recognise that they're working within a bigger system, a bigger structure, a political economy of healthcare, an organisation that is you know, that organises care and delivery of patient needs in a particular way that may not always serve the best interest of the patient and might get in the way of the practitioner doing what they feel is right or best. And so I thought, you know I came to the conclusion that teaching, that my purpose in teaching sociology was to support students to see that, to see that there’s a bigger picture, that it's not all about being a professional and that if you learn how to be a professional you'll go out there and you'll have a seamless career. I kind of had the view that wouldn't be the case and I had students that confirmed my hunch you know, coming to me in tears you know through their studies about things they'd seen and done in practice that they never thought they would and you know mainly because they were short staffed or services were being organised in particular ways that made their life difficult. So, I came to that point where I thought I'm not interested in teaching young people to become nurses, what I am interested in is teaching nurses to become researchers and that's when I started to shift my focus away from undergraduate teaching. I was already running the MA in research methods but more and more of my energy and my profile was going into that and that suited me better, and it was a place where I could be more of myself and more teaching things that I thought mattered because they were about questions to do with you know, what counts as knowledge, how do you know it counts as knowledge, you know what's data and how should you approach data and who are you the researcher in all this, you know all of those sorts of questions. And you know, and they're more theoretical, conceptual, philosophical questions and I you know, I've always had that interest and of course that comes from my prior training, you know my prior educational experience and I found a way of bringing that to my day job and so yes, so somewhere in that, you know that recognition about you know what am I doing here in this school and why do I care or what do I care about, that's when I thought and I'm a qualitative researcher.

[0:29:17.8]

**INT: Well, this question in my head kind of relates to everything that you've just said, I think you've answered the question but then another question arose for me, so what I've got is why you think research is important and or is it that thinking is important?**

[0:29:43.0]

RES: Really good question. Yes, I mean sometimes I think research doesn't matter you know, sometimes I think, sometimes I feel the weight of futility, yes and that's something to do with the way the academy has changed and the way the REF has shaped things so that you know we all have to be publishing endlessly and you know the more papers you've got the better it looks on your C.V. and the more likely you are to be promoted and so, you know I don't know somewhere along the line I've seen a statistic about the number of journals that are now in existence and you know the massive jump that they took you know when the REF started to be a thing that everybody had to pay attention to. So, yes I do sometimes feel like that, but because I work with health professionals who, you know I have immense respect for what they're doing, you know gosh what a difficult job delivering healthcare is you know, and there's so much that, and I also feel strongly you know it's a gendered profession, it's women going into this terrain, it's undervalued, it's under resourced, I mean the whole terrain is undervalued but nursing is undervalued compared to medicine. And you know I work with these good people who want to make a difference and so I care that they have good skills and part of the you know, because I think that, because I see the extent to which nursing is a gendered profession I know that the more knowledge and the more competently that they feel they can speak about their knowledge and their lens and their perspective and the things that matter to them, the more likely they are to be able to wrest some power and possibly resources from the dominant voice in healthcare which is medicine you know. And again, I'm sufficiently eclectic that I'm not anti-medicine or anti even measuring things and you know as I said RCT's and so on, I think all of those things have their place but they're too, their power is over emphasised and the significance of what nurses, midwives and so on do is under powered and I see knowledge acquisition as being a route to challenging that power that medicine holds. And you know, I'm really, here I am however many years later I am still running the MA in research methods because it's probably the only thing in my school that I care a lot about and I think it's a quality training and learning pedagogical experience and I literally witness these amazing women on the whole, men too but mainly women come in full of energy and passion and, but they have a zillion questions about why things aren't working the way they could or should be and they have very little power to change it and I watch them transform before my eyes in one year because it's a one year programme although increasingly funders are only now funding part-time study and that is diluting the experience from what I can see. But they came in for one year and this was, our programme was NIHR funded, so we got 10 to 15 funded places a year and it was down to us to allocate the funding to people competitively and they were these people came into do the MA in research methods and they were backfilled, so their positions in work were held for them and work were given another head and NIHR paid for them to have a replacement nurse or whatever it was. And then so these people could come in and they could spend a year at Midlands with me and other colleagues obviously really learning about what they wanted, what they were concerned with, you know the issues they were concerned with in their practice and they would go out full of confidence and I can guarantee a better understanding of knowledge and how to defend knowledge and particularly how to defend qualitative knowledge than a lot of the medics that they would be up against you know when they went back to work. And they do tend, and you know their projects even though they are taught statistics, statistical analysis as well as qualitative methods, the majority of them end up, they come in thinking they want to measure things and they leave having done a qualitative study.

[0:36:09.1]

**INT: The, I want to talk more about the students and their experience but just got a couple of questions, no I'll save those they might kind of get answered along the way, pretty much all my questions are being answered along the way Danni so,**

[0:36:28.1]

RES: Yes of course, yes.

[0:36:29.6]

**INT: that's good. Yes, let's focus on the students and what they find challenging and what they most seem to enjoy and then that kind of more personal side of stories that you like to tell them or share with them or do you not use stories, what's your approach to helping them to learn qualitative research?**

[0:36:54.1]

RES: Well, I teach the foundations in qualitative research module, I co-convene it with a colleague in sociology and I also run seminars where health science students who attend that module will attend my seminar, so I both teach that module to doctoral training centre students who could be from politics or international relations or law or wherever, but when it comes to the seminar I'm running the seminar with health sciences students. And then I also teach PhD students, sorry I supervise PhD students who are doing qualitative research, you know they come to me as a qualitative researcher and very often I'm the second supervisor because they come to a colleague in my school or sometimes a colleague in the school of sociology or even business school and the other supervisor is the topic expert and I come in as you know, with the qualitative methodological philosophical you know side of things. I, yes I think it's very hard to teach qualitative research because partly because it's like every academic terrain there is, it's full of controversy and debate and you know academics don't agree with one another on what to do and how to do it. I think some of the texts that are written in order to support students are you know, make it you know kind of well, fall into some of the sort of traps of ‘this is how you should do it’.

[0:39:07.1]

**INT: Like a single right way to do it?**

[0:39:10.7]

RES: Well, no I mean I think obviously most texts would say you know there are various approaches that you could take, you know narratives or phenomenologically or grounded theoretical or whatever but because it's a textbook it still sort of tries to step you through it and I think what I recognise is that the types of questions that a student desires to frame are so varied and multifaceted, mainly because they're interested in human experience which in and of itself is you know, a phenomenally complex thing that it's very hard to make it relatable to a student’s specific needs. And I think as a result sometimes students choose a method where it's made to look, where what you're meant to do is stepped out so simply so you know sort of grounded theory is a typical one where there's a sort of framework of how to follow it and whilst that I guess is a good thing for a novice researcher, can be a good thing, I think it also is you know, is equally problematic. So yes, so that's one of the reasons why I think it's difficult because sometimes I can see potential in what the students, either in the student or in what the student's trying to ask where that kind of approach would actually not be the best for them, you know it wouldn't support them the best. And you know, and I think also Cathy the other problem in my school is that I don't think that students in nursing, you know they've got a degree but they haven't been fully supported to think critically, so very often in the degree the critical thinking is a concern with how is this study designed and can we critique that study design you know. And actually that, what they're not asking is should that question even be asked, you know a much broader, wider question than what is being, and you know what is, sort of accepting the terms of debate as they stand in practice as though that's self-evident and you know there's no, we can't question that. So, which is why I feel passionate about philosophy because that is a module that makes them think about what they think is out there and what they think should count as knowledge and so when students want to do PhD's, I mean in our school we used to say if you were doing a PhD you had to do the philosophy of social science before you could you know, go on in your PhD, you had to pass that module in the first year of your PhD and unfortunately they've dropped that now and I think that's a retrograde step because the module runs, as far as I know it's not costing our school anything to send students on that module and it improves their work and their thinking. And you know for lots of students it utterly overwhelms them for a while as well and they have a nervous breakdown and a meltdown for a while because everything they thought they knew and understood gets thrown up but when they recalibrate they recalibrate in a stronger position, yes. So, I think it's very hard, I don't think it's you know -

[0:43:36.8]

**INT: Is that what students find most difficult, that the fact that everything they thought they knew or had been told is now called into question? Is that what they find difficult or is there a different concept**

[0:43:50.1]

RES: I think initially yes, I mean I see that most heavily in the MA in research methods which is the one of the one plus three you know, it's the pre-PhD training. I think if students haven't done that training then they're more likely to approach qualitative work as a descriptive process, so you ask people questions, they answer those questions and then you sort of collate what you think the majority of people are saying and maybe a few outlying positions but your analysis is a redescribing of what they've focused on you know, and typically research you know, if the researcher has framed the questions and you know these are the questions I want to have answered and then they organise their data and their analysis and their findings according to the interview script that they've formulated then it's a very surface understanding of the data and how to analyse the data. And you know and again, I think you know yes there's a place for that, I'm not you know I'm not suggesting that's always a bad thing to do it's just I think there's a deeper meaning, you know a deeper learning that can go on and obviously you know the best students absolutely go with that, see that see that opportunity and absolutely run with it. And actually, I have to say Cathy, last week I examined a PhD in health sciences, I was the internal examiner and it was the best example of a PhD that was qualitative and inductive that I had ever seen and I've supervised oh gosh, you know 23 PhD students and I've examined, I don't know how many I've examined but you know quite a lot and I've never seen such a stunning piece of work as this student did you know. And she used grounded theory but she was just really creative with it and I think that's the thing with qualitative research, there's an opportunity to be creative and imaginative and I think that's difficult to teach how to do that and probably the best way to learn is to read other people's work you know, other people's qualitative work.

[0:46:52.1]

**INT: The, I suppose that takes me back to what you were saying about Claire and the ‘just do it’.**

[0:47:02.0]

RES: Yes, yes.

[0:47:06.4]

**INT: And the, yes the sense of how, what one learns from doing that and yes that approach, yes.**

[0:47:18.2]

RES: And I'm having a really interesting supervisory experience at the moment because I'm supervising a PhD student and she chose me, she came to me and so she was being supervised by somebody else and then she said I can't work with this person anymore and the person I want is you, she chose me and she's doing, it's a very and I mean, I'm hesitant about how much to say because I don't want it to be identifiable but she's, her other supervisor is very senior, very you know. She's a star as in you know gets shed loads of money, is building an empire in the arena that she's working in and she's her other supervisor but she has a very, very mechanical way of doing qualitative research and it's very successful because it gets, because she translates the qualitative findings into bite-size things for practitioners and guidance and you know, so she does all that sort of impact stuff and she has an international reputation so she doesn't just shape phenomenon here in a local context, she's you know making a difference over there, over there, over there. And she's been working with her and I came in you know after the first year and she knows that there's another way of doing this but she's worked with her for sufficient length of time that she's got her voice in her head and she keeps coming to me and saying this doesn’t feel right, I don’t want to do it like this, I'm being told I need to do it like this and I'm saying, and it's taken me a long time to understand what's happening, you know why. Because she's extremely bright this woman, she's really bright and she's very, yes she's going to do a stunning PhD. But she's really struggling with, and it is a positivist voice about qualitative research and she knows she doesn't want to do it like that and she's been feeling there's been something wrong with it, that it's not working for her and how she wants to do what she wants, she's got a vision in her head of what she wants to do and she's political, she's an activist you know, this isn't just you know an academic exercise for her. And so, she's trying to come towards more a sociological understanding of her data and she's finding it very hard and I found it very hard supervising with her but in order for me to really understand what's happening, what's pulling her in the opposite direction to the direction she wants to go and why am I telling you all that -

[0:50:46.8]

**INT: Yes, what is it that you think is pulling her there and is that about challenge for the student, is that about what students struggle with, is it about what you as a supervisor -**

[0:51:01.8]

RES: Yes, I mean I think her PhD will be interesting because she's had this struggle and I've encouraged her to write about it, you know the reflexive element of her qualitative work will be her journey with her question and her topic and you know and how she's moved, yes. And I suppose actually what it comes down to and I've actually named it with her recently, I've realised what it is that's happening, is that her other supervisor thinks that, doesn't recognise that the different epistemological positions you take that they're incommensurable, that if you do one thing like that you can't also be doing this. So, on the one hand she appears to be encouraging her to go with what she's feeling and seeing and thinks matters, so she agrees with her when she says you know ‘this is the direction I want to go in’ but then when she guides her she pulls her back in the other direction and she's not, and I've realised because we then you know what we did, we did a supervision together and I realised that was what was happening, she sees them, she's a pragmatist she thinks it's just you know’ you do this and oh yes you can do that’ and so on but actually the language you use and the approach you take has consequences.

[0:52:53.0]

**INT: Is this something along the lines of confusing or not drawing distinctions between methods and methodology?**

[0:53:02.1]

RES: I think it's more about not recognising that different epistemological positions are incommensurable. It's deeper than just method and methodology because she's doing narrative, he's like all over narrative but he's treating narrative in a particular way that she's uncomfortable with and that's an epistemological question.

[0:53:43.2]

**INT: I'm aware of time, personally I'd love to pursue that more and I think there potentially is value for student learning in that and whilst that is part of this project it's not the only part of this project. But a couple of questions that I think people will be interested in and you know they're fairly quick, well potentially. Do you have a particular favourite methodological approach for you personally?**

[0:54:20.4]

RES: No, I don't I think, I mean again it depends on the question and also I mean so a piece of work that I've recently published which actually I'm slightly embarrassed to say has been a study I've been doing for quite a few years and has taken me a long time to get to publication and that's of course because I've been taken off in all sorts of other directions and it's had to go on the back burner and had to go on the back burner and had to go on, you know and it wasn't a funded study, it was just a study I wanted to undertake for myself. But I started with a question which was ‘how do you do this thing, how do you do this’? And I could have you know, in my findings I could have done a finding section that explored the various strategies people used you know and that would have been but I realised that what was interesting in all their stories about how they do it, is that they were talking about, they were talking about certain meanings they held about what they were doing. So, I didn't start off with a sort of phenomenological framing of ‘this is about meaning making’ but having asked the how question what was most interesting to me was the meaning they made of what they were doing. So, I ended up I mean it was a thematic analysis but you know what were the themes, and you know there were hundreds of themes I could have gone with but the themes I was most interested with was the meaning making and I mean actually and I've had another really interesting experience with another study that I've also just had published and what it was, was it was part of a project, so somebody else I was working with was funded to do a certain thing and part of what she said she would do was do an analysis of texts written by men for men about how to be with women during pregnancy and birth. So, this was her project and she was you know, kind of going around in circles or not feeling much energy for doing it and asked me if I would work on it with her. So, we selected five books that are written, and they're the Amazon in the top whatever of books that men would buy or women would buy for men and these texts are written by men for men about this experience. And so, she and I read these five books and both of us felt uncomfortable and irritated with how they were written. And we both read them as feminists and you know, they contained and these books were advice, they were advice books designed to give men advice about how to do this thing, you know because there's an expectation now that men should be involved in pregnancy and birth but there's very little understanding about how they should be involved and what their role is and you know, how they and so it was felt that texts about pregnancy and birth for women didn't address this element which is the male experience. Anyway, so we did this thematic analysis of these texts and we were pulling things out like the way they spoke about a woman's body and the way they spoke about who's role it was to do the domestic work so you know there was things like you know, ‘you need to help her now you know clean the house’ and ‘you might want to take on the cooking’ and obviously within that is an assumption that it's really her role but while she's in this difficult phase of life you need to help her sort of thing. So, anyway we did this analysis and you know wrote up quite a nice little paper about it and sent it off to the journal and I can always remember the journal reviewer, one of the reviewers and the review was about a line and a half of writing and it said, I mean it said something like you know, ‘not that interesting why don't you look at it through embodiment?’ and you know when I got that feedback from the journal I was like you know not happy because of course we've spent months kind of writing this paper and this journal reviewer. Anyway, I was like oh god okay, I mean my colleague would have submitted it to a different journal, I thought ‘no, okay let's look at this concept of embodiment’ so I read all around embodiment and then I looked back at the data and I saw completely different things in the data and I defined a completely different analytical process and you know established entirely different findings and that was really interesting to me. And of course, embodiment is a theoretical idea that you know we, feelings are embodied, they're in the body but that feelings matter and they tell us something about people’s experiences and I realised that these texts were saturated with feeling and you know, so but it didn't occur to me to look, obviously I didn't even really I mean I had come across the concept of embodiment but I'd never studied it and thought ‘what can this offer?’. And that's why analysis is difficult to teach because you know in both instances with that paper first we looked at it from a feminist lens where we're looking at how are they writing about their role and women's roles and isn't it gendered what they're doing, and then we looked at it entirely differently through the lens of embodiment and saw completely different things in the data. And yes, as a supervisor I'm not about telling people how they should do it, I mean I think basic thematic analysis is a really good starting point but even what thematic analysis is you know, what themes of the many themes you could choose, what themes are the themes that you're going to pick out and that's in the end ultimately it comes down to, it's a reflexive decision where your actually, what interests you and then the question is why does that interest you, what is it about your background as the researcher that means you're seeing this in the data?

[1:02:33.7]

**INT: And does that belong for you for you know a doctoral student, you know I have my own position on this but I was wondering yours, does that belong in a doctoral thesis for you the examiner?**

[1:02:47.5]

RES: Definitely, definitely, yes definitely. Yes, I mean if you look now and this is why qualitative research has come such a long way in the last 15 years, if you look at the CASP tools which are about how do you evaluate qualitative research you know there's a tool for doing that, is the researcher reflexive about the decision they've taken, the analytical decisions along the whole journey in terms of who to collect data from, what question to frame, how they've recruited participants and then the analytical process it's all because it's co-constructed it's, you know the researchers position within that process is must be visible.

[1:03:40.5]

**INT: And how do you advise students to make that visible, what form does that visibility usually take for your students?**

[1:03:52.3]

RES: Well, I mean again when I've examined PhD's, qualitative PhD's when they write the methodology and method section ahead of collecting the data they all know, because if you read any text it will say ‘and reflexivity is really important’, so the trot it out and they say duh, duh, duh and then I read the whole thesis and I think ‘where is the reflexivity?’ It's not in there. So, they say it's important but then they don't follow through and they don't show how it's important and so I say to students that it doesn't matter the form of the reflexivity, where you put it so it could be you know about the analytical process ahead of presenting the findings, it could be there or it could be after the findings section or it could be threaded through. And I also say to my students because you know, my students are health professionals and they all know about reflective practice and I say to them reflection is not the same as reflexivity, you know and it's really important that you think about the impact you and who you are is having on the study.

[1:05:19.0]

**INT: There's so much more that I want to hear and again challenge largely because I'm agreeing with you and I want to challenge it so that I don't just go oh yes, yes, yes, yes that's right isn't it, yes but I'm finding myself you know wanting you to go into more detail so I don't just kind of sit there reproducing what I think.**

[1:05:46.8]

RES: Yes.

[1:05:48.3]

**INT: So, forgive me for some of the more nit-picky questions or what’s looked more positivistic descriptive questions, it's to avoid me just reproducing what I agree with you, because that's me in the research process.**

[1:06:12.3]

RES: Yes of course, yes.

[1:06:14.7]

**INT: So, again like I say I've got loads more where we have gone over time and so I am just going to pick one more question and it's, if you were to give your younger self a piece of advice what would that be?**

[1:06:33.4]

RES: I think probably my advice to my younger self would be apply for money to do qualitative research. I didn't do that. I kind of I found it difficult to, I found it difficult to you know, in the same that I've said my journey with the papers that I've written recently I didn't know what I was looking for and of course with a funder you have to say where the gap is, you know why you're going to fill the gap, why it's going to fill the gap, you know all of that and it's almost like you need to know what you're going to find before you've found it, and I was inherently uncomfortable with that. So, yes and I you know the piece of work I was describing earlier, not the one about men but the one about women, I started with a question that I didn't end up answering you know I answered a different question to the question I posed. The question I posed was how do you do it, I didn't answer that question because there was something more interesting in the data. So, yes so but you know career wise I've suffered from not having money because as we were saying earlier you know what the university values and promotion-wise is money and you know if you haven't got money you risk looking like you're not doing it seriously so I'd give that to myself. I mean the other thing that, so different funders are more or less sympathetic to qualitative research-ism, NIHR which is a big funding body in health you know has typically been sort of RCT's, systematic reviews, you know kind of very positivist agendas and it is now, I mean there is now and you may know this but in health science there is now a fashion for mixed methods, like there's a dawning that answering things using forms of measurement is not always going to give people the best knowledge for changing things in practice and supporting practice to be different and so on and so forth. And so, there's now a fashion for mixed methods and it's you know again I found myself struggling because students then want to do incredibly complicated study designs because they're mixed methods and it becomes too big or not really a PhD, it's a lifetime work and all of that and all of that and all of that, but of course you know what they hear is that mixed methods is the thing to do. And so, NIHR now is increasingly recognising that you know qualitative research can do something different and offers another way of understanding problems and so on. But you know, again in the same way I was saying about the students, they still err towards the old way, you know the old kind of form of doing things. And so, recently I was in conversation with some friends actually in other universities I'm part of a women's learning set with academics and so on from different universities and I learnt that the NIHR has now got what they're calling a methodology, there's a methodology sort of unit and it's a bit like the ESRC, they're recognising that you need to teach people methodology in order for them to be able to conduct research, that you can't just go and do it. And within this methodology unit they've got what they call hubs and there was a debate as to whether they should have a qualitative hub and I was like, I could not believe that it was even a question you know.

[1:11:17.0]

**INT: With the assumption being that they should?**

[1:11:21.0]

RES: Well, they're funding mixed methods studies, so they're funding studies that will have a qualitative arm and unless you think it's an add-on and very sort of superficial and can easily be done and any numpty can do it why do we need a hub you know, so I was sort of you know again gob smacked that the idea that you know, it's just that relentless message that qualitative research is somehow less than and doesn't need the attention or the resources that other methods would require. Anyway, I decided to join this hub for qualitative research and it's explicitly about how do we support qualitative researchers to have careers in qualitative research and because there's a recognition that they struggle.

[1:12:22.4]

**INT: And so, the advice to your younger self around mixed methods.**

[1:12:33.6]

RES: Well, I'm of the view that yes mixed methods is good, I'm not anti-mixed methods but even if mixed methods is good it doesn’t mean that one person needs to do it all and therefore you need teams, so therefore you need people with expertise in qualitative research to team up with people who have expertise in quantitative research or other methods and methodologies.

[1:13:06.4]

**INT: And that they can be that person?**

[1:13:09.1]

RES: They can be, yes they can be either, I mean you know I do have a student on the MA in research methods at the moment who comes from mental health with has a history of being quite qualitatively orientated in nursing, not in medicine obviously, not in psychiatry. So, and narratives is really big in mental health and she's wanting to do something positivist and quantitative because she wants to arm herself with hard evidence about the topic she's interested in, in order to you know, battle on the same field as the psychiatrists and the medics and I really admire her for that and I'm championing her and supporting her in the background with that. So, yes so my younger self I would say, well you know I started as a sociologist, you know sociologists have a propensity to be lone scholars you know historically, that's not a model that is terribly functional these days, work in teams you know and go for money.

[1:14:37.1]

**INT: Cool.**

[1:14:36.9]

RES: So, for me yes that's a sort of but that's a sort of survival technique, I mean if I didn't have to do that a survival technique I'd just say carry on as you are. And the final thing I'd say about qualitative research is, and I like to say this to my students, is you know some people say that a qualitative method and methodology isn't as valuable because you can’t predict from it. So, whereas you know going back to my original example about do I take this medicine for my ailment, you know obviously prediction really matters, does this tablet take my temperature down, yes, no, how many times, what's the percentage, yes absolutely we need percentages and prediction. But when we're in the terrain of qualitative research you know obviously we don't have, prediction is not what we're about and people say well the absence of prediction is the problem and I always want to say no, it's not the absence of prediction that's the problem, it's the fact that you're dealing with human beings who are unpredictable and therefore you need methods and methodologies that are sensitive to that unpredictability. Because even though people are unpredictable, they still have patterned ways of thinking and behaving and so we can still see patterns but we ought to be interested in the outliers, the people who sit outside the pattern as much as we are with people who sit inside the pattern.

[1:16:36.0]

**INT: I'm going to say I'm nodding my head and agreeing, this is quite painful in a way because I'm agreeing with you all the time and it would be so much more interesting if I could just kind of go oh, and what about this and you know what about that or maybe it wouldn't, maybe it wouldn't. I'm going to stop the recording there Danni.**

[1:16:57.0]

RES: Yes, that's fine, that's fine.

**Audio ends: [1:16:58.9]**