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Studying sensitive and contradictory family situations: Considerations from three family studies

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Abstract

The purpose of this article is to discuss questions about studying sensitive and contradictory family situations, particularly in the process of gathering qualitative data via interviews. In the article, the authors ask what types of considerations are possible when studying such issues. Three ongoing family studies conducted in the social sciences by the authors are used as the basis for discussing the sensitive and contradictory nature of such family issues. The authors' studies are about the foster children's family relations, the sons of problem-drinking fathers and the families participating in a preventive family support system. Family matters are often perceived as being something private that is not to be talked about or shared with outsiders, e.g. talking about negative feelings towards family members may be complicated.

The article considers what sensitive topics are in terms of research and the emotions of the researcher who is studying them. It also explores the possible therapeutic aspect of the interviews, in addition to the aspect of intervening. These issues arise from the three interview data sets, from the authors' personal research experiences and from previous research literature. Even though these are challenging issues to study within family research, it is important to give a voice to different contradictory family situations and relations.

Key words: family studies, interviews, sensitivity, contradictory family situations

Introduction

The purpose of this article is to discuss questions in relation to studying sensitive and contradictory family situations and relations (see Pösö, 2008), particularly with regard to the process of gathering qualitative data via interviews. In the article, the authors ask what types of considerations are possible when studying such issues. Interviewing can be both a sensitive and powerful method, and while studying sensitive topics these aspects of the method are emphasised even further (Kvale, 2006, 497).

In this article, three ongoing family studies conducted by the authors in the social sciences are used as the basis for discussing the sensitive and contradictory nature of such family issues. The three studies were all conducted in Finland, with the common thread being the fact that they contain sensitive issues and contradictory family situations and relations. Moreover, the considerations intertwined in the interview process are strikingly similar and concern issues that we want to explore more in-depth in this article, including: sensitivity, emotions, the therapeutic aspect of the interviews and the matter of intervening. These issues arise from the data of the three interviews, from the personal research experiences of all this article's authors and from previous research literature, and are illustrated by using extracts from the authors' data throughout the article. Some other considerations of qualitative research include issues relating to maintaining boundaries, developing rapport and friendship, reflexivity and leaving the fields which have been discussed in earlier studies. Many of these difficulties are often compounded when research topics are sensitive or difficult (Dickson-Swift et al., 2007, 328.)

Kati Hämäläinen's study is based on a qualitative interview study on foster children's family relations. In her study, she asks how children under foster care define their family and give meaning to their different family relations. She interviewed 20 foster children between the ages of 8 to 12. The main method used in this study was focus interviewing, though social network maps in which children are asked to place the most important social relations to them on a map were also used, as well as diaries. Foster care includes many sensitive aspects. Contradictory family relations are a very sensitive topic with foster children because these children have been taken away from their birth parents and put in a foster home, radically altered their family relations. Ethical issues are always important when interviewing children, but take on an even greater significance with foster children. A sensitive topic that presented yet another challenge to Hämäläinen's study was the unreachableness of the foster children's biological parents, thereby making it difficult to obtain consent from them. In the analysis of

the interview data, Hämäläinen used content analysis, in which the researcher searches for the meanings of the text from the data and the thematic analysis to find themes which are similar to each other.

Henna Pirskanen's study is based on a qualitative, biographical interview study on men's perceptions and experiences of their fathers' problem drinking. She was interested in their relationship with their fathers and in their perceptions of their fathers' fatherhood and masculinity, and interviewed 21 men between the ages of 21 to 42 on the topic. She used the lifeline method, in which the interviewee is asked to draw a line on a paper to describe his life course, to assist her interviewees in constructing their lives from childhood to the present day. Talking about these contradictory relations was sensitive or even painful for these sons, especially if their father's problem drinking had caused difficulties in their lives (Pirskanen, 2009). Like Hämäläinen, she faced challenges in finding interviewees, and used the snowball method, several newspaper advertisements and requests on e-mail lists and library notice boards to assemble the 21 interviewees. In part, this illustrates the sensitivity and difficulty for men in talking about this topic. In the analysis of the interview data, she utilised triangulation of the narrative analysis, which reveals various aspects of the father-son relationship; frame analysis, which brings out different frames from which the interviewees interpret their lives, and thematic analysis to find repeating themes in the data.

Susanna Rautio's qualitative study focuses on early supportive and preventive family services, in addition to views of the client families and family professionals, as she is interested in studying the client families' experiences with early support. In the supporting model studied, families with small children or those expecting their first child received support from the child health clinic, mostly in the form of home visits. Rautio's overall study consists of three different data sets, which includes interviews from eight family professionals and six client families and diary data from eight family professionals. In this article, the focus is on the interviews conducted with the client families, mothers and fathers, a total of nine family members in all. In Rautio's study, being a client of a family service and asking for and receiving support can be a very sensitive and contradictory situation for the families. She found it to be a challenge to get families to talk about private matters. The interview data were analysed by using a narrative approach, which concentrates on the narrative form of the experiences, and a discursive approach, which focuses on the ways of speaking within the data.

We begin with a general discussion of what sensitive research topics are, especially sensitive family issues, and continue with the researchers' emotions in studying them. Following this, we describe what sensitivity and contradictory family situations mean in the authors' studies. We then move on to consider the therapeutic aspect of the interviews when studying sensitive family issues, especially in contradictory family situations. In this article, the therapeutic aspect includes the therapeutic effects of talking about a sensitive issue. In addition to the therapeutic aspect, we consider the aspect of intervening that may arise, particularly when studying sensitive issues such as contradictory and problematic family situations. The article concludes with a discussion on the importance of giving a voice to family members in sensitive and contradictory family situations and relations and suggestions for future family research on such issues.

Studying sensitive family issues

Drawing on earlier definitions, one can say that if the research process incurs costs for either party, then it can justifiably be defined as being sensitive (Johnson and Clarke, 2003). In his classic text, Lee (1993, 4) defines sensitive research as "research which potentially poses a substantial threat to those who are or have been involved in it". Telling another person about the aspects of oneself that are in some way intimate or personally discrete can be difficult

(Lee, 1993, 97). In other words, research on sensitive topics can entail certain risks, such as breaking the confidentiality associated with sharing and revealing matters of a personal, intimate nature (Corbin and Morse, 2003). Researching people in the context of sensitive issues can incur emotional costs for the researchers, so they should reflect on this matter and be aware of their sense of self in the process of eliciting knowledge. Many researchers working with sensitive issues may not be well prepared to deal with the sensitive and delicate situations that may confront them (Granfelt, 2004; Liamputtong, 2007; see Chatzifotiou, 2000; Gill and McLean, 2002.)

Hydén (2008) points out that a sensitive event is something you experience and that a sensitive topic is something that appears in discussion and is discursively dealt with. It is in this sense that researchers often refer to topics that are difficult for the people who have experienced them, e.g. issues they are ashamed of or events that have left them vulnerable and contain a deeply personal experience such as trauma, death, illness, violence, sexual abuse, suicide and bereavement (see Campensino, 2007; Chatzifotiou, 2000; Hydén, 2008; Kavanaugh and Ayres, 1998; Laitinen, 2004; Laitinen and Uusitalo, 2007; Liamputtong, 2007).

In a way, sensitive areas of life are private spaces or “back regions”, as home and family matters often fall into this category (Liamputtong, 2007, 3). For family researchers, stepping across the closed and protected boundaries of the experiences of family members can be a challenging task (Liamputtong, 2007, 8; see Jordan, 2006). One reason for this is that family matters are often perceived as being something private and not to be talked about or shared with outsiders, and that family relations may be considered “sacred” by those being studied, who in turn do not want them to be profaned (Fontes, 2004, 142; Smart, 2006, 155). Only by building trust and a rapport is a researcher able to gain access to the private meanings of families and individuals (Liamputtong, 2007, 8; see Glesne, 1999). The reasons for families keeping secrets may include the need to maintain intimacy and group cohesion, thus preventing the family from falling apart and protecting family members from social disapproval (Vangelisti, 1994, 116-117; see Vangelisti et al., 1997). Hydén (2008, 130) argues that spaces such as the home play a profound role in shaping research on sensitive topics. Vetere and Gale (1987, 81) argue that the extreme personal importance of the home, its association with privacy and people’s personal rights set up a boundary between the home and the outside world. Family researchers must negotiate their presence in the home setting and their role must be simultaneously balanced between that of acceptable social science practice and comfortable interactive behaviour with family members (Jordan, 2006, 172).

Certain ethical questions have to be considered when studying sensitive family issues and contradictory family situations (see Pösö, 2008). In the three studies that comprise this article, the importance of the interviewee’s anonymity is emphasised due to the sensitive nature of the family issues and the private nature of the family topics. From the point of view of ethics, a respectful encounter (see Alasuutari, 2005, 18) with the participants is also seen as being of importance by the authors when they tell about difficult and personal matters in relation to contradictory family situations.

In the case of the foster children in Hämäläinen’s study, obtaining all the necessary consents is an ethical question since getting consent from their biological parents can be difficult because of their possible unavailability (see Gilbertson and Barber, 2002, 256; Bogolub and Thomas, 2005, 275; Campbell, 2008). In addition, the difficulties of finding interviewees in all our studies can also tell something about the sensitivity of the interview topic. If people define the topic as something that contains difficult or painful issues, they could be reluctant to participate. Furthermore, the researcher should be sensitive towards the interviewees’ emotions when conducting the interview and know when to stop asking questions (Peled and Leichtenritt, 2002). For example, discussing positive things, and not just difficult and

delicate topics, is a way to reduce the uncomfortableness of a situation that can occur if a topic is too sensitive (see Forsberg, 2002, 69).

Sensitivity, contradictions and emotions

In the studies within this article, contradictory and problematic family situations are focused upon, and we see that sensitivity and contradictory family situations are inseparably intertwined. In her contribution, Pösö (2008, 93, 95-96) uses the terms “controversial” and “contradictory family relations” to point out that it can be a challenge to “give voice” to contradictory family relations, and that studying these relations calls for ethical consideration. Family relations may suppress and neglect instead of support and care for family members. She says that when contradictory family relations are discussed we are usually referring to secrets, which is why we do not talk about them. She also notes that children in particular are said to keep secrets out of loyalty to their parents.

Some topics are also kept for reasons of cultural sensitivity, and therefore talking about them is rare. (Pösö, 2008, 102; see also Vangelisti, 1994). Loyalty problems among children have also been discussed elsewhere (for example Hurtig, 2006; Smart, 2007, 139). Smart (2007, 138) also argues that it can be difficult to get people to talk about their negative feelings toward their own family members, particularly in an ongoing situation. Hence, it is the researcher’s obligation to be sensitively present. Ethical understanding and skill are required to know how to react to tensions and problems on the research topic of contradictory family situations (Pösö, 2008, 98), and the use of both can be recognised in our studies.

Hämäläinen studied foster children’s contradictory family relations, and being taken into custody and placed into foster care are major life changes for a child. Talking about these altered family relations can be sensitive because these relationships may contain negative feelings toward the biological parents. In Pirskanen’s study on cases in which the son’s relationship with the problem-drinking father was contradictory or their life situation in general was difficult, talking about these matters in the interviews was not easy for them. Even if talking was difficult or painful, they had a need to talk, as is evident in all of the authors’ interviews. Rautio’s study elicited a conversation about ongoing contradictory family relations, as one of her interviews shows:

Interviewer: *Would you wish to have more support for your family from your friends or relatives, possibly?*

Mother: *Yes, I would like our grandparents to give us more time.*

Interviewer: *Is the reason that you don’t spend so much time with them because they live far away?*

Mother: *Well, there are more reasons for it.*

Father: *It affects...It’s just that we have throughout our own parenthood a certain critical attitude in relation to our own parent’s parenting methods...how they acted toward us caused a certain amount of controversy.*

In addition to difficulties in talking about contradictory family relations, sensitivity in a study can be shown through changing the subject. In Hämäläinen’s study, this occurred in a situation in which they were talking about the children’s birth parents. To some of the foster children, this topic was too delicate so changing the subject was their way of dealing with it.

Interviewer: *“How do you think your parents feel about you living here in this family?”*

Matilda: *“Probably they miss me...hey, you look exactly like that girl from that movie...”*

After this, Matilda started to talk about the movie. One possible explanation is that children change the subject when they feel uncomfortable in an interview. In contrast, talking about

very delicate and private issues during the interview, such as their birth parent's drinking or mental health problems was easier for some of the children. Here are a few extracts in which foster children talk about violence in the family.

Interviewer: *You moved a lot when you were living with your mother?*

Child: *Yes, we had to because my real father, then, he battered our mother.*

Interviewer: *When your mother died? (the child has just said that her mother is dead)*

Child: *After I was born, then a couple of days later or something she died because my father killed her.*

These extracts above show how studying contradictory family relations can bring up very sensitive issues. Hämäläinen recalls being a little shocked but also wanting to remain quite neutral, even though this was not easy, because the child was also calm and neutral in the situation.

Pirkanen also noticed that the interviewees' emotions that came up in the interviews, such as sorrow or anger, were signs of sensitivity. Going through painful memories and therefore being vulnerable in interviews may have triggered these emotions. A father's drinking and its consequences may have caused scars that have not quite healed yet. Life experiences such as a father's violence, alcoholism, death, insecurity, as well as a complicated relationship with the father, are sensitive issues to talk about with an unknown researcher. In the interviews conducted by Pirkanen, men talked about their painful childhood memories.

Interviewer: *How about your relationship with your father? Have there been changes over time, compared to how your relationship was when you were a child?*

Jukka: *Well, no changes there. I feel quite a lot of hatred. Afterwards, I've even wished [...] that he would die, so that I'd be rid of the burden. I have had all kinds of thoughts. For example, when my dad and I went fishing when I was younger, I should have drowned him. That way, many people's lives would have been so much easier. Although that's a harsh thought (laughs), if it was ever going to be done, it should have been then.*

I: *How about your relationship today? Are you in contact?*

In the extract above, the interviewee expresses his wish that his violent father was dead, and that he should have drowned him to ease the lives of the other family members. In response, Pirkanen continued by trying not to be horrified or evaluative, and by asking about the relationship between the father and son as it is today. The occurrence of these kinds of situations is entirely likely when researching sensitive family topics.

Sensitivity was also present in Rautio's study while interviewing family members about their private issues. Being a client in the family services, and asking for and receiving support from the family support system may not be easy for the parents, even though it can be helpful. In addition, parents' consideration of their own parenting abilities can be a sensitive topic. Furthermore, the researcher does not know the family history or the reasons why the families were supported beforehand. Families have to trust the researcher in order to feel free to unveil their personal matters, but the researcher also must accept the fact that families do not necessarily want to reveal too much.

We have briefly referred to some of the researcher's emotions above. To continue, conducting interviews on sensitive topics is often characterised for both the interviewer and interviewee as being stressful, threatening, problematic, emotionally demanding and draining. Accordingly, the response of researchers to this distress has been discussed in the literature (Enosh and Buchbinder, 2005; Goode, 2000; Honkatukia et al., 2003, 335; Lee, 1993; Oakley, 1981, 41). For example, some researchers may have feelings of anger, helplessness, anxiety,

ety, pain, being overwhelmed and depressed, and sometimes even crying during an interview (Chatzifotiou, 2000; Corbin and Morse, 2003, 343; Liamputtong, 2007, 84). The authors of this article identified with emotions such as sadness, stress and the experience of the interviews as demanding, as it was discussed by other researchers. Indeed, Hämäläinen, who is one of the co-authors of this article, sometimes expressed having feelings of guilt for having a good life in relation to her experiences of conducting interviews about sensitive topics with children in foster care (see Dickson-Swift, 2007; Laitinen, 2004).

This situation is not eased by the fact that only certain emotions are considered appropriate for a researcher to express in an interview setting, which do not include distress, anger or grief (Bourne, 1998, 92, 94). The researcher is committed to producing a scientifically analytical piece of research which is the prime directive; in other words, the research must be demonstrated to have been undertaken and produced with a visible neutrality and competence. Nevertheless, the emotional impact of the research on the researcher has been given little credit in the “scientific” world (Bourne, 1998, 98).

Researchers may therefore have a feeling of being passive or “numb” and not wanting to react during an interview. When working with emotionally difficult topics, researchers may be required to develop strategies for minimising the impact of the interviews or by blocking emotions (Liamputtong, 2007, 82, 85; Fraser, 2004, 188). At some point, all of the authors identified using this strategy during interview situations, as illustrated by the previously mentioned examples. On the other hand, Bourne (1998, 95) noted in her study that after conducting an interview emotion poured out of her and she then shed the tears that had been kept in check during the interview. In the context of our studies, this experience was also shared by Hämäläinen after her interviews with foster children.

We have highlighted some of the “negative” emotions associated with carrying out research on sensitive topics, but it is important not to forget the “positive” emotions entailed therein as well. Although all of the co-authors heard many different stories in our interviews – some of them sad or even rough – we felt somewhat privileged that we were able to conduct the interviews. Despite the sensitive nature of the topic, Hämäläinen felt privileged because she received the chance to interview foster children. Pirskanen recalls feeling humble and grateful because the interviewees trusted her enough to disclose personal and difficult memories for the purposes of her study. In her study with families, Rautio similarly experienced the interviews she conducted as rewarding and felt that she was welcomed into the privacy of the families’ homes as an interviewer. Additionally, each interview that contained effortless and smooth interview interaction, despite the difficult nature of the topics addressed, was positively experienced by us and seen as an “achievement”.

Therapeutic aspect in studying sensitive family issues

On the basis of all the authors’ interview data, the authors’ personal research experiences and previous research literature, we argue that what could be called the therapeutic aspect of the interviews arises when studying sensitive family issues and contradictory family situations. In our studies, the therapeutic aspect appeared in the way that the interviewees had a chance to talk about their sensitive family issues, perhaps even for the first time. The topics that they talked about may be so private and personal that they may have not been able to discuss them even within their family, thereby making the issue even more sensitive.

There has been some discussion in the literature about the boundaries between the role of the therapist and researcher (Cieurzo and Keitel, 1999; Hutchinson and Wilson, 1994; Seidman, 2006). Nousiainen (2004, 42) points out that even though “therapy” and “therapeutic” are familiar terms in psychology, they are also part of our everyday language. In fact, the language

and the etiquette of the therapeutic encounter may resemble those of the interview encounter (Heath et al., 2009, 48).

Of the three authors, Hämäläinen noticed in her study that the foster children appeared to be pleased when someone asked for their opinion and they received the chance to explain things from their point of view, which may be a rare occurrence for them. The therapeutic aspect is present when a child has an opportunity to share difficult experiences.

Interviewer: *Well, would you like to see him (the biological father)?*

Child: *I don't know, he drinks a lot of beer, I'm scared of such men...*

Interviewer: *Yes...*

C: *When I was little I was scared of all men.*

Interviewer: *Okay, do you remember about the time you lived together?*

C: *Well, he battered mum, I mean Tuula-mum and so on, that's why I was scared of all men.*

Interviewer: *Well, it can be like that. Did you have to move from there because of it?*

C: *Mmm...*

I: *Okay.*

C: *Then one time he came over for the night, we were living in Helsinki at the time, and me and my brother went outside and our mother told us that he tried to strangle her.*

In her study on sons of problem-drinking fathers, Pirskanen's interviewees even expressed gratitude about getting the chance to talk, thus referring to the therapeutic nature of the interviews.

Kai: *Yes, after I e-mailed you, I thought about this, that this is a great opportunity, that's what I thought about, because I have never talked about these things with Mum for example. And with Dad, practically never and very little. Especially now when this conversation is over and I saw what this is like, I'm really grateful that I had the chance to do this.*

Interviewer: *Oh, I am grateful that I got an interviewee.*

K: *Yeah, but this is for me because these things have mostly been unprocessed. Well with my wife we have talked about them a bit and she understands it well [...] so this is a good opportunity that I got the chance to just go through them here. These things are not so bad for me that I'd have trauma or anything, or that I'd want to process them, but that this was just a good experience, that I was able to talk about my experiences.*

I: *Yes, that is it, to hear people's experiences...*

K: *Yeah, that I'd just be able to talk them out. Yes, especially at the moment this feels like a really great experience.*

Pirskanen reflected on the fact that her interview questions, which concerned sons' childhood memories, emotions towards the father, possible violence and so on, already resembled questions that a therapist might ask from a patient. Consequently, the interviewees unwittingly experienced therapeutic effects merely by talking about sensitive issues. The benefits of participating in interviews may include the development of a sense of purpose, self-awareness and personal healing. Talking about the matter at hand may be a relief, as it is only usually talked about in bits and pieces (Kavanaugh and Ayres, 1998, 92-93).

Out of all the co-authors, Rautio felt that her interviews with parents within a framework of family support gave the parents a chance to take advantage of the chance to talk about and process their experiences and feelings, leading to the presence of a therapeutic aspect.

Interviewer: *What effect would you say that this family support work had on your opinion of your own parenthood?*

Father: *It improved my sense of appreciation.*

Mother: *Yes, pretty much that.*

F: *Faith in those kinds of things that are important.*

M: *And it also increased my trust in myself as a parent.*

F: *Trust in one another, that the child will be ok, and so forth.*

M: *I got the feeling that “Yes, I can do this”, and that I don’t need to be the best in everything I do. It’s enough that I do my best, that the child is doing fine and...*

Even if interviewees are willing to discuss private topics, they may have never expressed these topics out loud (Elam and Fenton, 2003, 16). On the other hand, Laitinen and Uusitalo (2007, 322) argue that participating in the study requires that participants have somehow handled the issue earlier. Interviews can provide a valuable outlet for the verbalisation of feelings and for reducing anxiety, hence leading the interviewees to reflect more on their experiences (Oakley, 1981, 50). According to Smart (2007, 138-139), participants may experience a “mental awakening” in the interview process, becoming aware of feelings, beliefs or values of which they were previously unaware. The research may leave the participants with richer self-insight and make a positive contribution to their well-being (Mertens and Ginsberg, 2008, 488). Indeed, interviewees may experience interviews as therapeutic even though they are not presented as such (Nousiainen, 2004, 42; Laitinen, 2004, 61).

Some participants may also have difficulties in drawing a distinction between research and therapy (Dickson-Swift et al., 2007, 336). For that reason, the researcher must realise that participants may hope for some therapeutic benefit from their participation in a study (Cieurzo and Keitel, 1999, 72-73; Corbin and Morse, 2002, 342; see Åstedt-Kurki and Hopia, 1996, 508). In the following extract from Pirskanen’s interview, the interviewee parallels therapy and participating in an interview.

Interviewee: *I was a bit amused, I thought, I have participated in this kind of thing before. And then when I phoned you (after seeing the advertisement for interviewees) I thought after that that I’m going to go to a therapy session.*

When does providing interviewees with the necessary emotional support cross the line from being a research interview to a therapeutic intervention (Cieurzo and Keitel, 1999, 72)? That is a question that all of the authors had to consider while conducting interviews. It can be difficult to draw any strong demarcation between therapeutic and research interviews, as both may lead to increased understanding and change; even so, they have a different respective emphasis – on personal change in therapeutic interviews and on an intellectual understanding in research interviews (Kvale, 1996; 26; Brinkmann and Kvale, 2005; 169; see Seidman, 2006, 107). However, researchers are not usually trained therapists and, without formal qualifications, acting as one and taking on a quasi-therapeutic interviewer role is questionable (Kvale, 2006, 482-483). Granfelt (2004, 147) argues that the focus of interview-based research should be on producing information about the phenomenon instead of on helping interviewees in their difficult life circumstances. Seidman (2006, 108) also argues that the researcher is there to learn, not to treat the participant as a patient.

Goode (2006) has noted in her study that she was aware of the differences between the role of the researcher and that of a “counsellor” and that she did her own “boundary work”, navigating the line between research interviewing and “therapy”. Unlike a counsellor, she was not going to be around to “pick up the pieces” after the disclosures and revelations made during the interviews, which may in fact have left the interviewees feeling vulnerable. Seidman (2006, 108) warns that researchers must assess how much responsibility they can effectively take on and be very cautious about approaching the aspects of their participants’ private lives for which they are ill-equipped to respond. Fontana and Frey (2000, 655-656) note that the researcher may even become a spokesperson for a group studied and forget his or her academic role.

Another issue that Kvale and Brinkmann (2009, 75) talk about is psychotherapeutic researchers who can go further than academic interviewers with regard to some of the potential consequences for the interviewees. For example, they can provoke anxiety, attempt to revive painful memories, put forth critical interpretations of what the patients say and help them to improve. Murray (2003, 233-235) defines providing information or education in areas in which participants lack knowledge as a further form of a therapeutic aspect. However, traditional methodology texts advise against offering assistance to the participants (Murray, 2003, 233- 235). In contrast, observing an acute need for help and then neglecting the said need hardly corresponds with the requirements of ethical research (Shaw, 2008, 406; see Liamputong, 2007). This can also be seen as a form of intervening in participants' lives, which we shall discuss next.

Aspect of intervening in studying sensitive family issues

In addition to the therapeutic aspect and based on interview data, the authors' personal research experiences and earlier research literature, the authors of this article recognised the aspect of intervening when studying sensitive family issues and contradictory and problematic family situations. This means that there might be a need to intervene during the interviews. Even though family is understood as a private sphere, it includes both the possibility of and need to make interventions (see Smart, 2006). Trespassing on this private sphere of the families by intervening may prove to be a challenging task because the participants may feel that a trust has been broken. Participants may have revealed family secrets to the researcher in the belief that they would remain with the researcher. Before conducting the interviews for the study of sensitive family issues, we found that one reflects on it and may find cause for concern about whether this possibility will be actualised. Being concerned about the interviewee's well-being is also an ethical question that needs to be taken into consideration.

Interviews are usually characterised not only by confidentiality and privacy, but also by sharing secrets such as the family secrets discussed earlier. Pösö (2008, 104-105) also argues that the researcher and participants share a secret that will strictly remain between them. When conducting research on contradictory family relations, researchers constantly balance between what should be kept a secret and what should be made public.

In a break with confidentiality, researchers may be legally required to report information to authorities pertaining to potentially dangerous situations that they may encounter such as child or elder abuse, drug trafficking or other crimes. Nevertheless, in cases in which the researcher is not legally obliged to report such matters, the researcher is confronted with ethical questions in regard to whether they should preserve the confidentiality of the interview or answer a moral imperative to help those in danger (Fontes, 2004, 155; Orb et al., 2001, 94; see Goode, 2000; Ryen, 2007). Glesne (1999, 118) writes about the role of the intervener as one that researchers may consciously decide to assume, and not just happen to step into by accident. As a result of conducting their research, researchers may attempt to right what they judge to be wrong and change what they condemn as unjust.

During the research process, researchers might acquire information that is potentially dangerous to some people. When others trust you, you invariably receive the privilege and burden of learning about things that can be problematic at best and dangerous at worst. This leads us to ask the questions of how "wrong" a situation must be before one should intervene on the basis of unexpectedly acquired knowledge, and to what extent one should continue to protect the confidentiality of the research participant. For example, if as a researcher one learns about illegal behaviour, should one inform the police about the matter (Glesne, 1999, 118-119)? Fine and Sandstrom (1988, 55) have also asked how a researcher should respond if children behave in a way that is morally wrong. In addition to reporting when it comes to the case of

children and adolescents, intervening can also mean a question of whether the researcher should cut in to stop certain types of behaviour. Still, children must be permitted to engage in certain actions and speak certain words, even if the adult researcher finds them to be distressing (Fine and Sandstrom, 1988, 55).

As a researcher, if one suspects that a child is being subjected to ongoing emotional abuse, how should one react? How does one decide where the lines are drawn between a felt moral obligation to intervene and an obligation to continue as the data-collecting researcher? No definitive answers to these questions exist, and judgments are made on the basis of a mix of contextual elements and personal choices (Glesne, 1999, 119-120; Pösö, 2008).

Hämäläinen noted in her research with foster children that the role of the researcher as intervener can potentially arise. Before starting her interview process with foster children, she considered the issue very seriously. The situation is complicated because one is in the role of researcher and has promised confidentiality to children. If the child were to reveal worrying details, the researcher would have to talk with the child and inform social services. Still, Hämäläinen did not feel that this was an unsolvable dilemma because the best interests of the child are always the most important thing. When interviewing children, there is a possibility that the researcher may have to report things to the child welfare services about the possible maltreatment of the child. With regard to foster children, the situation may be easier because they have already been placed in a foster family, but of course there is also a chance that maltreatment can occur in the foster family. Liamputtong (2007, 28) argues that researchers interviewing children are not only legally required to report specific matters, but are also morally obligated to help children who are at risk or in danger. This is the case even when it overrides the confidentiality and anonymity that they have agreed upon with the children. Goode (2000) recalls being told by her gatekeeper agency that she had a duty to report any cases of child abuse while interviewing drug-using mothers. Thus, it would appear that at the same time as we are learning about young children, we must also guide and protect them (Fine and Sandstrom, 1988, 48).

For her part, Rautio experienced the possibility for a need to intervene when she interviewed families about their experiences in the preventive family support system. She was confused about certain information that she encountered in one of her interviews and was worried about one parent's well-being, so she decided to talk to the project manager of the family support system about the issue. The benefit of this intervention made by the researcher is that it makes it possible for the family to obtain more help from the family support system if needed. Ethically and professionally carried out research prevents harm and risks on the part of the subjects. Research should be beneficial in terms of actively promoting and doing good (Peled and Leichtenritt, 2002). By contrast, in Pirskanen's study the author was not faced with situations that necessitated intervention, but nevertheless recognised the fact that such occasions could have manifested themselves when dealing with issues related to alcohol abuse and violence within the family.

Naturally, the researcher is not to intentionally observe the family or their home, but instead is there to conduct the interview. However, Hämäläinen and Rautio realised that using the homes of the families as the settings for the interviews could possibly provide clues to something being wrong and an awareness of the existence for a need to intervene. Hämäläinen conducted interviews in foster children's foster homes, which made it possible to see the children's home environment. Rautio also conducted interviews at the homes of the client families, and similarly to Hämäläinen, it was possible to make observations of the situation in their homes. In line with Goode's (2006) view, we acknowledge that we carry the responsibility for what we hear, sharing "secrets" as well as having legal implications, and we call for more than an "uncontaminated" research response.

Discussion

in light of three different qualitative family studies on contradictory family situations in this article, the authors have asked what kinds of considerations are possible when studying sensitive family issues. The authors' interview data, personal research experiences and previous research literature are the basis for these considerations.

We have discussed the concept of sensitivity in research and used examples from our research data on how sensitivity can manifest itself in studies of contradictory family situations. As sensitivity and emotions are often intertwined, we have also discussed emotions, both negative and positive, that may be part of the study. For example, it has been noticed that showing or blocking emotions may be a researcher's strategy for dealing with the sensitive nature of a study. Furthermore, therapeutic aspects of the interview for participants in the form of being allowed to talk about a sensitive topic were considered. In this context, we also asked where the lines extend for the researcher, and noted the researcher's obligation not to "play" at being a therapist when carrying out an interview on sensitive and contradictory family situations. Nonetheless, the participant may experience the interview as therapeutic merely by talking about a sensitive topic that has been kept a secret. Lastly, we brought up the matter of intervening, namely the researcher's obligation to intervene and report to the authorities in cases in which a child's safety may be in danger. These types of case may arise when studying contradictory family situations.

Even though these are challenging issues within family research, it is important to give voice to different contradictory family situations and relations. It has been argued that research should give voice to people whose experiences, interests and abuse would otherwise remain silent. It is the researcher's right and obligation to listen to the experiences of these contradictory family relations, even though there are sometimes ethical considerations involved (Pösö, 2008, 95, 105).

All three of the authors' studies in this article show that it is essential to bring out the voices of various family members. Hämäläinen's study on foster children's family relations gives a voice to these children and demonstrates that foster children are able to speak openly about sensitive subjects that can yield important and valuable information about their family relations. Only foster children themselves can describe their personal experiences of the contradictory relationships within their family. Questions of achieving the child's perspective and ethical issues are important questions to discuss in research that focuses on children, especially foster children. Their opinions are meaningful and make research on foster care richer and more diverse.

As in Hämäläinen's study, Pirskanen's research topic of sons' relationship with their problem-drinking fathers may be problematic and contain contradictions. However, boys' and men's experiences of these issues, in particular, have often been unheard (Velleman and Orford, 1990, 299). In both Hämäläinen's and Pirskanen's studies, it is important to hear childhood experiences of these children despite their sensitive nature.

Rautio's study about families and their experiences on early support gives a voice to client families, and is therefore important to study. By talking to an unknown researcher, it is possible for family members to analyse and structure their thoughts and experiences about personal matters such as partner relationships, daily family life and parenting.

In conclusion, the authors of this article would like to present some suggestions for researcher training which are applicable to research on sensitive and contradictory family issues. It is beneficial for researchers to be trained in dealing with issues such as managing distress or emotions, or in ending difficult interactions with participants (Bourne, 1998, 90; Dickson

-Swift et al., 2008, 133-136). We support the idea of specific research training for researchers investigating sensitive topics and contradictory family issues. For example, Dickson-Swift et al. (2008, 139-141) suggest that it is important that clear guidelines on how to end research relationships, how to handle issues of self-disclosure and how to be proactive about self-care strategies for processing difficult information and emotions are made available for researchers working in this field. A support group for researchers engaged in sensitive research may be another worthwhile consideration (Bourne, 1998, 100; Glesne, 1999, 120).

It must be stated that there are other important and equally relevant questions related to sensitive and contradictory family issues to study in the future. For example, ethical questions when studying family issues could be put under further scrutiny. In addition to objective ethical norms, there is a possibility for situational and negotiable ethical thinking. In researching contradictory and sensitive family issues, ethical practice can be situational and case-specific, as family relations are personal and unique (Pösö, 2008, 96-97). There can also be a discussion on how the researcher who studies sensitive and contradictory family issues reports the results of their study. Laitinen (2004, 88) notes that the possible extremes are “over-understanding”, as well as a negative stigmatisation of the participants. Granfelt (2004, 152, see also Alasuutari, 2005) also argues that it is the researcher’s moral obligation to write in a sensitive manner that pays attention to how the participants are portrayed in the text. In the future, the perspectives of different family members that the authors of this article did not study could also be recognised and compared to each other. After all, one mission of social research is to give voice to individuals and groups whose experiences are otherwise left untold. Family relations are experienced differently by individual members, so hearing the voices of these family members separately - whether mothers, fathers, sons and daughters - is of great significance. Family relations also are continuously changing, meaning that the family members’ voices can appear differently at different times. Problems may fade so completely that they are left out of the memories talked about, lest they put a strain on one’s life for a long time (Pösö, 2008, 95). In addition, when studying sensitive and contradictory family issues, the impact of the place of the interview, such as the family home, could be studied further.

In studying such issues, sensitivity and ethical questions can be a challenge, although studying them allows for the expression of contradictory family relations that increases our understanding. As the authors of this article, we believe that it is important to address these sensitive and contradictory family issues with courage. Avoiding difficult or sensitive issues can lead to accounts of family life which do not represent the full diversity of relationships, contradictions and emotions. The result of this avoidance could therefore result in one-dimensional and “cuddly” versions of family relations (Smart, 2007, 139). We have recalled feeling privileged as researchers when given the possibility to glimpse into the sensitive and contradictory situations and relations of foster children, sons of problem-drinking fathers and families within early support. As we have mentioned, family matters are often perceived as being something private, though studying them from various perspectives makes the “private” family and its individual family members’ experiences more visible and understandable.

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