



Ethnomethodology: Time for a revisit? A discussion paper

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Abstract

The aim of this paper is to provide a comprehensive overview of ethnomethodology and explore its usefulness as a methodology for nursing. Ethnomethodology was conceived through the writings of Harold Garfinkel, an American Sociologist in 1967. The influence of phenomenology, sociology and writings of the linguistic philosopher Wittgenstein is evident in this methodology. In the 1970s, it was both heralded by some as a threat to sociology and by others as a welcome development borne out of the dissatisfaction with positivist paradigm research. It is a methodology that has been utilised not only by sociologists but also by many healthcare disciplines. However, its utilisation by nurse researchers has not been widespread.

Key words: ethnomethodology, Conversation Analysis, indexicality, reflexivity

What is already known about this topic:

- Most of the literature on ethnomethodology was published in sociology journals in the 1970s
- Conversation analysis developed from insights proposed in ethnomethodology
- Over a decade ago, it was believed ethnomethodology offered great potential for nursing research.

What this paper adds:

- Explores the key concepts of indexicality and reflexivity as applies to ethnomethodology
- Adds clarification to the difference between conversational analysis and ethnomethodology
- Examines the potential of ethnomethodology and conversation analysis for knowledge development in nursing.

1. Introduction

Ethnomethodology is often viewed as a type of sociological analysis, and was publicly recognised as an approach when Harold Garfinkel published his book titled *Studies in Ethnomethodology* in 1967 (Cuff et al, 1984). Ethnomethodology literally means the study (ology) of people's (ethno) methods of knowing about and creating social order (method) (Porter, 1998). Ethnomethodology fits into the philosophical background of constructivism. Constructivism seeks to undertake research in natural settings, and is considered one of three epistemological stances for qualitative inquiry (the other two being interpretivism and hermeneutics) (Schwandt, 2000).

Ethnomethodology is basically a way of studying how people in everyday settings reason and formulate their actions. This methodology considers that in trying to understand their situations actually produces the situation that people are in (Bailyn, 2002). The ethnomethodologist analyzes the minute details of settings, actions, and conversations as they unfold naturally in an effort to tell a story about the practical organization of everyday activities (Pierson, 1999). Its focus is on the mundane activities that people engage in during their daily lives (Porter, 1998), and aims to gain an understanding of "taken-for-granted" rules which shape our everyday lives (Heritage, 1984).

Two distinct trends in ethnomethodological writings are evident. Both trends in ethnomethodology appeared in the early 1970s with the emergence of the study of behaviour within organisational settings (especially those dealing with people) and the second one being a new kind of sociolinguistics with the analysis of tape recorded

conversations (Mennell, 1975). The first period of Garfinkel's work is marked by the publication in 1967 of several of his papers in *Studies in Ethnomethodology*. The second period, represented in the work of two of Garfinkel's colleagues, namely Harvey Sacks and Emanuel Schegloff, came to be known as Conversation Analysis (CA), and is argued to be the most practical and workable form of ethnomethodological research (Maynard and Clayman, 1991).

2. Origins of ethnomethodology

Phenomenology

Ethnomethodology has its roots in phenomenology and this influence of phenomenological thought on Garfinkel is clearly evident in his writings. His work is considered a combination of "verstehen" (understanding) sociology and phenomenology (Gidlow, 1972), and is one of the four "phenomenological sociologies" (Heap & Roth, 1973); the other three being from the work of Schutz (1967), Cicourel (1968) and Nathanson (1962, 1970). It is not surprising therefore that many authors equate ethnomethodology with phenomenology (e.g. Rogers, 1983), and describe it as a fusion of phenomenological and sociological (Heap & Roth, 1973). Nevertheless, it is considered unsuitable to describe ethnomethodology as a type of phenomenology (Psathas, 1977).

Garfinkel's work (completed in 1958) was written under the intellectual influence of Alfred Schutz (1888-1959) (a student of Husserl) on whom he acknowledged a great intellectual debt (Psathas, 1977). Schutz attempted to incorporate the phenomenological viewpoints of Husserl with sociological ones including Weber's 'verstehen', and Mead's symbolic interactionism (a focus on the meaning of events to

people and the symbols they use to convey that meaning) in an attempt to fuse sociology and phenomenology.

The view of ethnomethodology as a method to uncover the 'taken-for-granted' rules of everyday order parallels the work of Schutz who wrote about tacitly held knowledge that individuals use in negotiating their lives and dealing with practical situations. Schutz also appears to adopt the notion of bracketing the natural attitude promoted by Husserl, as he considered it important that the social scientist act as strangers to the society they are familiar with and take nothing for granted. However, unlike Husserl who considered the natural attitude of the 'lived world' a barrier to true understanding, Schutz considered it a fascination and the prime purpose of the social scientist (Porter, 1998). In addition, bracketing is termed "ethnomethodological indifference" by Garfinkel and Sacks (1970). With ethnomethodological indifference, the researcher suspends all commitments to an *a priori* account of social structure, focusing instead on how members achieve, manage and reproduce a sense of social structure (Holstein & Gubrium, 1998). The adoption of ethnomethodological indifference and its positivist leanings is no surprise as Garfinkel and his close colleagues went through a period of studying achievements of the great scientific discoveries of mathematics and science (Maynard and Clayman, 1991). However, such aspects of empiricist tenets are criticised by Alvesson and Skoldberg (2000).

Sociology

The sociological influences on Garfinkel's work are many. Garfinkel was a student of Talcot Parsons and he attempted a deep re-analysis of Parsons' theory of action (Lynch and Sharrock, 2003). Garfinkel considered that ordinary members of society

had a major role to play in the production of social order as opposed to Parsons who argued that social order is created through socially integrated systems of norms where norm compliance is motivated by the person's fear of social rejection (by others) or identity loss (by him/herself), (thus leaving little scope for everyday production of social order) (Gubrium and Holstein, 2000). Garfinkel referred to social actors being portrayed as "judgemental dopes" by Parsons, instead viewing persons as possessing practical linguistic and interactional competencies through which the observable, orderly features of everyday reality are created (Holstein and Gubrium, 1998).

Another sociological influence on ethnomethodology is that of the writings of symbolic interactionism. This influence is most evident in what is termed the "pre-ethnomethodological" era, where the work of Erving Goffman resulted in a paradigm shift towards interactionism, which subsequently laid the seeds of early ethnomethodological thought (Attewell, 1974). Both ethnomethodology and symbolic interactionism are principally concerned with studying interpersonal social interaction and regard social interaction as consisting of meaningful communicative activity between individuals. However, Cuff et al (1984) reminds us that ethnomethodologists are directed by a different philosophy than symbolic interactionists. Ethnomethodologists pay attention to the very routinised, deep structure of interactionism, unlike symbolic interactionism (Kushner and Morrow, 2003). Nevertheless, like symbolic interactionists (especially those from a non-positivist stance), context is important also to ethnomethodologists.

The birth of ethnomethodology heralded a paradigm shift and also much debate on its role within sociology. Coser in 1975 (the then president of the American Sociological

Association), regarded ethnomethodology as a danger to American sociology (Coulon, 1995). It was also argued that both ethnomethodology and traditional sociology threatened the intellectual integrity of the other (Goldthorpe, 1973). Smith (1991) maintained that ethnomethodology was a methodology not needed as it generated controversy and limited research alternatives. Meanwhile, ethnomethodologists argued that they had created a revolution in sociology, but Sharrock (1989) cautioned that ethnomethodology did not live up the image created for it. This is certainly true with regard to its role in nursing research, to be addressed later.

3. Two key concepts of ethnomethodology

Indexicality

Indexicality is a term borrowed from linguistics and means that words are reliant for their meaning on the context in which they are used. For ethnomethodologists, meanings are essentially *indexical*, meaning that they depend on their context (Holstein & Gubrium, 1998). Ethnomethodologists argue that meaning is entirely dependent on unique situational contexts where the meanings are interpretations formulated by the participants and are subject to reformulation on subsequent occasions (Wilson, 1971). A conversation does not just describe an interaction, but it represents, or indexes (hence the term “indexical”) some meaningful feature of that particular situation (Attewell, 1974). Nevertheless, it is argued that this does not mean that ethnomethodological investigations are unable to produce data which transcends the particular situations and occasions studied (Psathas, 1977).

Views of indexicality are influenced by the writings of the philosophers Wittgenstein, Pierce and Bertrand Russell (Peyrot, 1982). However, according to Wilson (1971), the term “indexicality” is taken from the work of the logician Bar-Hillel (1954) who defines an indexical expression “as one that depends on its meaning on the context in which it is produced” (p. 68). Attewell (1974) appears to adopt this view of indexicality also, as he describes it a property of language and refers to the fact that a word may have a meaning which is appropriate for all situations in which the work is used (e.g. its dictionary meaning), or it may also have meaning relating to the particular situation in which it is being used. Peyrot (1982) however, takes exception with this and warns that Bar-Hillel’s version of the term bears little similarity to the ethnomethodological version of the concept, and ethnomethodology’s concern with indexicality is not limited to language, but also to all types of organised activity (Peyrot, 1982).

Reflexivity

Another central concept of ethnomethodology is *reflexivity*, which argues that individuals bring who they are to each new situation. All accounts are considered essentially reflexive in ethnomethodology (Psathas, 1977). The concept of reflexivity when discussed in relation to ethnomethodology is curious, as it explicitly applies to the ‘actors’ themselves. This is not surprising as Letherby (2002) argues that respondents as well as researchers are reflexive individuals and that some participants experience increased reflexivity through being in a study. The use of the term reflexivity in relation to the researcher is not evident in early writings on ethnomethodology, perhaps because researchers’ reflexivity has only become recognised as important (particularly for issues of validity) in more recent times.

Reflexivity however, also applies to the researcher engaged in ethnomethodological research. The researcher (following the influence of Husserl) must adopt ethnomethodological indifference and vigorously resist any personal judgements of the correctness of the members' activities. To achieve this indifference the researcher could record personal beliefs and biases, as in phenomenological research (van Manen 1984).

4. Differentiating Conversation Analysis from ethnomethodology

Ethnomethodology and Conversation Analysis (CA) are discussed simultaneously by some researchers (e.g. Paoletti, 2002). It is argued that the association of CA with ethnomethodology over many years has rendered efforts to distinguish their thought complicated (Psathas, 1977). This is not surprising as ethnomethodology is interested in what people are doing with their talk and CA attempts to understand the taken for granted work of ordinary speech (Traynor, 2004). Therefore it is not immediately evident what the difference between the two is. There is however, a distinct difference between them, with CA having its emphasis on "talk-in-action" (rather than talk and interaction) (Holstein and Gubrium, 1998). Moreover, the processes involved in CA appear more transparent than ethnomethodology. CA offers a rigorous method of data collection and analysis that is "uniquely suited to addressing the problems and exploiting the opportunities posed by human interaction..." (Clayman & Gill, 2004 p. 590).

The role of indexicality also plays a part in differentiating between CA and ethnomethodology. The work of Harvey Sacks in CA is argued to pay minimal regard to the issues associated with indexicality. Peyrot (1982) posits that although Sacks

does not make explicit reference to the concept of indexicality, he does infer to it. Sacks is also accused of limiting his analysis to transcripts of language and abandoning the aspects which constitute the context in which indexical language is produced, and by which it is understood (Attewell, 1974). Nevertheless, Potter (1996) clarifies that indexicality in CA relates to attention to how utterances relate to the conversational sequences to which they belong. Perhaps the relationship between CA and ethnomethodology is best understood if CA is thought as a development of ethnomethodology which followed from the insights regarding the indexical and reflexive nature of action and were subsequently applied to conversational interaction (Potter, 1996).

5. Issues with ethnomethodological research

Ethnomethodology, in common with other constructivist approaches, has often been criticised for overemphasising “subjective” matter. In keeping with the constructivist paradigm, the researcher adopting ethnomethodology needs to gain access to the study settings and achieve a purposive sample (Appleton and King, 2002). Ethnomethodologists approach social reality as ethnologists as in the real world an objective observer distorts reality and therefore hinders knowing it (Smith, 1991).

When conducting field research ethnomethodologists are compelled to borrow methods from ethnography (Coulon, 1995). Garfinkel rejected Husserl’s philosophical and introspective method of analysis and replaced it with a commitment to naturalistic observation grounded in a great familiarity with and, ideally, a bona fide competent in the discipline under enquiry (Maynard and Clayman, 1991).

Garfinkel refers to what he terms “unique adequacy”, where the ethnomethodologist learns to be a competent practitioner of whatever social phenomena they are studying (Rawls, 1999). This point has particular relevance to a nurse researcher who would have already achieved unique adequacy by nature of being a nurse.

The aim of ethnomethodologists is to “...shake up the taken-for-grantedness of the lifeworld...and in this way to spotlight the background expectations, the implicit rules” (Alvesson & Skoldberg, 2002, p. 41). There is no mandatory set of data collection methods to achieve this aim, so long as it is adequate to the particular phenomena being studied (Lynch, 1996). However, interviewing plays a central role in data collection in ethnomethodological research.

Ethnomethodologists consider the interview to be a social encounter in which knowledge is constructed. This view suggests that the interview is not considered as a “...pipeline for transmitting knowledge”, but a site of, and occasion for, producing reportable knowledge itself (Holstein & Gubrium, 2003, p.68). This view is taken even further in CA which offers some interesting insights on interviewing for nurse researchers. In keeping with a post-modern view of interviewing, CA argues not to take the “how” of interviewing for granted, and has its goal as showing how interview responses are produced in the interaction between interviewer and interviewee, without reflecting how meaning is produced or the conditions that shape the meaning-making process (Holstein & Gubrium, 2003) Ethnomethodologists consider therefore that the process of “meaning production” in interviewing to be as important as the meaning that is produced (Holstein & Gubrium, 2003, p. 69).

6. Ethnomethodology and nursing research

Porter (1997) argues that ethnomethodology is an approach that is both practically useful for nurses and also philosophically compatible in its assertion of the importance of the subjective experience. It is also argued that the strength of ethnomethodology lies in its capacity to uncover the interpersonal actions and reactions in which individuals continually engage in but because they are everyday are rarely reflected on (Porter, 1998). The view of Kozart (2002) on psychotherapy and ethnomethodology is also of relevance to nursing. He asserts that ethnomethodology reminds us that typical social interaction is an achievement, and he argues that the therapeutic alliance constitutes a specific example of a much more universal social phenomenon that is vital to the maintenance of everyday social order (Kozart, 2002).

Ethnomethodology can provide useful insights on nursing. Bowers (1992a) demonstrated the limitations on power and control exerted by community psychiatric nurses on visits to patients' homes (as opposed to patients visiting the clinic). Wakefield (1998) also illustrates the strength of ethnomethodological insights in uncovering taken-for-granted aspects of ward life; for instance, by highlighting that the screening of beds by the employment of curtains serves as a signal to alert patients and inform them that a private, intimate or unpleasant procedure was about to occur. However, it could be argued that such a finding is hardly new or novel. Such a viewpoint is also raised by Alvesson and Skoldberg (2000) who argue that that our actions are managed to a large degree by conventions that are established in the first place "...to smooth the path of social intercourse" (p.41), and: "To study these things

in descriptive terms, as ethnomethodologists do, appears strangely pointless” (Alvesson & Skoldberg, 2000, p. 41). However, Wakefield (2001) argues that when patients and staff attempt to appraise the clinical domain, they attempt to make visible “unseen” (e.g. what’s going on behind the curtains) aspects of nursing, to empower themselves to make sense of their world in the ward. Therefore, nurses should reflect on their routine taken-for-granted practice in an attempt to recognise their impact on both patients and fellow practitioners (Wakefield, 2001).

May et al (2001) conducted a study of institutional interaction guided by an ethnomethodological framework and combined conversation analysis. The principle argument of this study was that the relationship between informal carers and health care workers in hospital wards is formed and renewed within their everyday, orderly, language-based interaction. This study reveals that the accomplishment of gate keeping is largely a collaborative undertaking by both health care workers and informal carers. For instance, informal carers treated “gatekeeper” as a legitimate identity of health care workers. This was achieved by cautiously soliciting the help of health care workers to access other health care workers and thus avoiding undermining health care workers gate keeping behaviours (May et al, 2001). Moreover, the subtleties of exchanges and power in nurses’ interactions with health care consumers can also be revealed by the use of CA. For instance, Baggens (2001) showed that conversations between child health centre nurses and parents were strikingly dominated by the nurse.

The relevance therefore of CA to nursing practice is evident. This relevance also applies to the process of doing research as highlighted by Mischler (1986), who

drawing on CA insights views the interview as a discourse between speakers, and highlights how the interviewer and respondent mutually monitor each other's conversational exchanges. For instance, he notes that the interviewer's reply of a simple response like "Hm, hm" can relay to the interviewee that they are giving the appropriate response for the interview purpose. This interplay of interviewer and interviewee is displayed by Jarrett and Payne (1995). They examine studies on nurses' communication with patients and highlight the attention paid to the nurses' contribution to the conversation without equal attention being paid to the patients'. Such a view also highlights the need to pay due attention to reflexivity in any study employing interviewing.

However, viewing how meaning is produced in interviews to be as important as the meaning produced, is problematic. Holstein and Gubrium (2003) warn that such an approach to interviewing tends to sacrifice the *whats* of lived experience and "...displaces the significant *whats* – the meanings- that serve as the relevant grounds for asking and answering questions" (p.69). This has implications for nurse researchers who are more concerned with the lived experience than the *how* of interview social processes. Nevertheless, assessment in nursing practice is dominated by ongoing conversational interviewing with patients, therefore insights of the *how of* communication has much relevance. For instance, a study examining nurse-patient interactions in cancer where the interviews were transcribed employing what the authors describe as "modified conventions of conversation analysis" (Jarrett & Payne, 2000, p.82), reveals very insightful details of nurse-patient communication. The study revealed that patients, relatives and nurses often engaged in conversations that were hopeful and optimistic in nature, and displayed how patients and relatives played

active roles in creating the cheerful and positive ward atmosphere. Similarly, Hunt (1981), utilising CA found that the opening conversations between symptom control nurses, terminally ill patients and their relatives in the home were dominated by general social chatting before the “nursing talk” began. Such findings are very useful for nurses as they illustrate how meaning created is a shared project to meet the needs of those interacting.

The findings of Adams (2001) are also of interest to this discussion. Adams, in a study of the conversational and discursive processes that occur between community psychiatric nurses (CPNs) and relatives of chronically confused people found that CPNs used conversational devices to elicit further information about the chronically confused person and their informal carer and subsequently achieved their professional aim. CA utilised in this study revealed how the conversational structure of the CPNs interviewing technique facilitated access to the “private and hidden features of family life that are usually inaccessible to outsiders” (Adams, 2001, p. 102).

The conversational interview is advocated as more client-focused and less interpersonally controlling than the traditional provider question-client answer format, and has the potential to produce an accurate shared understanding of the client’s health status (Brown, 1995). Similarly, in a CA study of health visitor/client interactions with the use of structured needs assessment tools, Cowley et al (2004) report that the assessment process was structured so that the health visitor controlled the interactions with resulting limited opportunity for the client to participate in identifying or determining their needs. This finding supports the view that the conversational

interview produces an accurate shared understanding of the client's health needs (Brown, 1995).

Other nurse researchers have also utilised ethnomethodological insights in their work. Mason (1997) examined the use of seclusion in psychiatric nursing practice utilising what he described as "an ethnomethodological approach". This adoption of an ethnomethodological approach is curious. This could be because of the emergence of several newly developing variations of the approach, and also approaches turning to classic sociological themes, for instance the work of Max Weber and Durkheim (Holstein and Gubrium, 1998). Moreover, Shelton (2004) studied the experiences of detained young offenders needing mental health care utilising an ethnographic approach and ethnomethodological analysis. This "method slurring" is evidence of the hybrid nature of ethnomethodology. Ethnomethodology crosses over into other similar methodologies so utilising 'pure' ethnomethodological research is difficult. This "crossing over" is also evident in the work of Edwards and Tichen (2003) who utilise the phenomenological sociology of Schutz to illuminate the patient's process of evaluation. Similar to the ethnomethodological indifference of ethnomethodology, they focus on the utilisation of bracketing or epoche, as it applies in phenomenology.

8. Conclusion

Bowers (1992b) proposed that ethnomethodology presented great potential for nursing research. This prediction however, has not been realised. It could be argued that because much of the knowledge utilised in nursing is personal and aesthetic (Carper, 1978), and 'everyday' nursing practice is complex and often taken-for-granted (McLeod, 1993), ethnomethodology is suitable as a methodology to uncover

the everyday, taken-for-granted aspects of nursing. However, this usefulness of ethnomethodology to knowledge development in nursing is not readily evident.

It is probably fair to conclude that CA in particular, holds promise for knowledge development in nursing, as it offers a window to view the shared creation of meaning in nurse-patient interactions. This is clearly illustrated in the study by Cowley et al (2004) discussed earlier, where their CA methodology exposed that structured assessment tools impeded the relationship-building process between the health visitor and client. Such findings offer a useful insight to the nurse-patient relationship, which is viewed by many as central to nursing.

The insights of Jarrett and Payne (1995) is also of relevance. They highlight that some nursing research which has focused only the nurse's role in communication does not provide insight into the role of patients in the communication exchange; insight that CA can illuminate.

However, despite the strengths of CA as a methodology useful for knowledge development in nursing, it is not commonly adopted. A possible reason for the reluctance of qualitative nurse researchers to embrace it could be the perception of difficulty of transcription notation required for CA. The classification systems used can seem strange at first exposure, and non-CA researchers may consider the level of detail in a CA transcript unnecessary. For instance, the symbol of "(0.1)" indicates silences, pauses, and gaps within and between speech, and timed in tenths of a second. Moreover, it is recommended that the researchers do at least some of their transcriptions rather than delegating this task to research assistants as the transcription

process itself is part of the analytical process (Clayman & Gill, 2004). However, modification to the CA approach may be more acceptable for nurse researchers. For instance, Cowley et al (2004) did not employ detailed transcriptions notations, as their primary study aim was to understand health visiting practice rather than the organising features of conversations. Moreover, another obstacle may be participants' discomfort of having their interactions scrutinised so closely. Cowley et al (2004) appear to offer some solution to this. Some autonomy for the health visitors in their study was achieved by agreeing that they record interactions with clients of their own choice.

Nevertheless, Alvesson and Skoldberg (2000) are vocal in their criticisms of CA, and argue that the use of CA is "...a short-sighted and detail-ridden focus on the actor level....entangled in trivialities..." (p.43). They further add that: "The rigour of this procedure combined with its far from amazing results, invites comparisons with Horace's mountain that gave birth to a mouse" (p. 44). They conclude that it is no surprise therefore that CA has been characterised by empiricist canon. This is an odd and even excessive criticism when one considers that ethnomethodology was borne out a need to break away from empiricism. Conversation Analysis clearly holds much potential for the generation of nursing knowledge, especially in its exposure of the *how* of interplay in nurse-patient communication, where so much remains to be discovered.

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