

Vulnerable Listening: Possibilities and Challenges of Doing Qualitative Research

Sara I. McClelland
University of Michigan

In this paper I reflect on an important and infrequently discussed aspect of qualitative research: *listening*. Listening is often imagined as easy. It is however, is a difficult skill that not only takes practice, but also comes with possibilities and challenges for a researcher. In an effort to develop and elaborate a practice of listening in a research context, I develop the idea of *vulnerable listening* and offer 3 scenarios from my own research. These include: (a) emotional dangers associated with listening, (b) the often unacknowledged role of the listener's body, and (c) the role of extreme emotions in research, such as feeling outraged. Drawing on my own experiences interviewing women diagnosed with Stage IV breast cancer, I highlight how researchers who collect data by listening might care for their own and others' vulnerability. Toward this end, I outline several strategies for researchers looking to support and maintain a practice of vulnerable listening.

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When researchers discuss developing skills in interview methods, the emphasis is often on writing questions and analyzing transcripts. Less frequently discussed is what a researcher does when conducting interviews, namely: *listen*. Listening is often imagined as easy and something that everyone is good at. Many assume it merely involves nodding one's head, not interrupting, and "remaining open" to a participant's answers. Listening, however, is a difficult skill that not only takes practice, but comes with challenges for which a researcher should be prepared (Norkunas, 2011). Without attention to listening as a practice, qualitative researchers risk not attending to the full set of skills that one needs, and even more impor-

tantly, risk being unprepared for what it means to listen to another person talk.

To explore the concept of *vulnerable listening*, I draw on experiences interviewing women diagnosed with Stage IV breast cancer about their sexual health information needs. As this was a study that concerned death, illness, sexuality, and pain, it was not surprising that there would be difficult material or that I would have a wide range of emotional experiences as a researcher. These experiences, however, are infrequently shared in routine discussions of research methods. In documenting them here, I aim to contribute to the larger discussion of possibilities and difficulties researchers face when they listen as their primary form of data collection.

I root this set of observations about listening in the affective context of *vulnerability* in order to draw out several elements that deserve greater attention (Behar, 1996). Vulnerability encourages greater focus on the affective and embodied aspects of listening, as well as potential ethical considerations to support those listening to participants. My aim in detailing qualities of vulnerability is not to argue that being more vulnerable leads to "better" or "worse" research. Nor do I mean that researchers must protect themselves from vulnerability. Instead, I

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Correspondence concerning this article should be addressed to Sara I. McClelland, Departments of Women's Studies and Psychology, University of Michigan, 204 South State Street, Ann Arbor, MI 48109. E-mail: saramcc@umich.edu

propose that we must continue to be vulnerable in research and we must care for this vulnerability. This focuses attention on the emotional aspects of data collection that require metabolism, debriefing, and collegial support, rather than warnings about potential trauma, requiring safety precautions, or avoiding danger. I highlight vulnerability in order to talk about the dangers (and pleasures) of listening, recognizing the responsibility to take care of oneself and others, and perhaps most importantly, taking steps to remain vulnerable even in the face of difficult and painful research.

Vulnerable listening stands on the shoulders of feminist social scientists who have long argued for feminist methods that take the relationship between researcher and participant seriously, as well as the subjective experience of the researcher (Oakley, 1981; Stacey, 1988; Wilkinson, 1998). I build on several long-term discussions about vulnerability and listening across the social sciences, including: anthropology (Behar, 1996), clinical psychology (Jenkins & Baird, 2002), community psychology (Campbell, 2002; Dickson-Swift, James, & Kippen, 2005), and psychoanalysis (Davies, 1994; Stolorow, Atwood, & Branchaft, 1994). In *The Vulnerable Observer*, Ruth Behar (1996) argued for incorporating the ethnographer's emotional life in ethnography, building on Devereux' (1967) and Geertz's (1995) arguments in which they similarly argued for the centrality of the observer's inner life in ethnographic work. Highlighting how little is known about how ethnographers actually engage with the material they study, Geertz (1995) observed that we "lack the language to articulate what takes place when we are in fact at work" (p. 44, quoted in Behar, 1996, p. 9). Behar (1996) drew on her own sense of vulnerability as an observer, refiguring it as a source of information and as an inevitable aspect of fieldwork, further developing contemporary feminist approaches to social science research. My contribution to this ongoing conversation is to explore how these theories might shift when applied to psychological research, as well as develop more guidance for psychological researchers, in particular, those dealing with the more difficult aspects of vulnerability.

Contemporary psychological research is often concerned with eliminating issues of bias, and to this end, largely concentrates on remov-

ing any trace of the investigator. However, if we turn our gaze away from questions of *bias* from the researcher and instead toward questions of relational *impact* on the researcher, we must contend with questions about research methods, methodological training, qualitative interviewing, and the role of emotions in any research endeavor. As the field of psychology increasingly backs away from the messiness of people, their contradictory meanings, and confusing answers in exchange for the "clear" evidence provided by physiological data, qualitative researchers must develop more and better ways of taking care of ourselves or we, too, will be lost.

With this in mind, I invert common anxieties about the vulnerability of the research *participant* (particularly anxiety about participants in sex research that relies on interview methods) and focus, instead, on the vulnerable *listener*. This is not to deny, but to recognize the duality of vulnerability within the research dyad. Using my own experiences as an interviewer, I develop three aspects of vulnerable listening: (a) the dangers of listening to difficult material and developing practices to support the listener; (b) bringing a focus to my own and participants' bodies and how the interviews were shaped by the presence of our fleshy bodies, in this case, the presence and absence of breasts; and (c) my own emotional experiences, in this case feeling outrage, as central to my analysis. Together, the three sections tell a story about developing a practice of vulnerable listening, a set of ideas and challenges that are essential for those who listen when others tell us about their lives.

The Study

For this discussion I draw from a multi-method study about the sexual quality of life of women diagnosed with Stage IV breast cancer. Interviews focused on how women imagined their intimate lives in this vulnerable period of life, when time was short, and for some, the end of life was near. Information about sexual well-being for this population has been slim, with little guidance for patients or their providers (McClelland, 2015; McClelland, Holland, & Griggs, 2015a; Stausmire, 2004; Vilhauer, 2008). Of those women diagnosed with breast cancer, about 5% develop metastatic (or Stage IV) breast cancer, a specific form of breast cancer that spreads to the brain, liver, lymph,

lungs, and bones (Silber et al., 2013). Median survival rates are approximately 26 months for those diagnosed with metastatic disease since 2007 (Thomas, Khan, Chrischilles, & Schroeder, 2016).

The mixed methods study included 113 surveys and a subsample of 32 interviews. Participants were recruited from the breast oncology program at a Midwestern comprehensive cancer center; they were approached during a routine clinic visit and asked whether they would be interested in participating in a study concerning quality of life (for details on recruitment and screening, see McClelland et al., 2015a). Participants who were interviewed ranged from 35 to 77 years old; two thirds of participants were currently partnered, either married or with long-term dating partners, and all of these were in heterosexual relationships. Time since initial breast cancer diagnosis was approximately 9 years and time since diagnosis of metastatic disease was just under 3 years; see McClelland et al. (2015a) and McClelland, Holland, and Griggs (2015b) for further discussion of the sample's medical history and the full interview protocol. In the interview portion of this study, I asked women about the kinds of expectations they had for their bodies, what kinds of intimacy they experienced or wished they could experience (if any), and how this might have changed for them as a result of aging, illness, or something else. Interview questions included, "What role (if any) does intimacy play in your life?" and if partnered, "How has breast cancer affected your sexual relationship with your partner?" I focus here, not on participants' responses, but instead on my own experiences while conducting the interviews, including my own memories and interviewer notes I took following each interview.

The three experiences I elaborate in this discussion were all unexpected aspects of this research project and, frankly, ones that I was underprepared for. I discuss them here as part of the larger project of feminist research that aims to detail the unexpected and surprising material that is generated through research (of any type) and that too often goes undocumented or is relegated to the cutting room floor (Granek, 2012; Harris, 2015; Lerum, 2001).

Listening Can Be Dangerous

Scholars have begun to describe the impact that difficult material can have on researchers (Burr, 1996; Campbell, 2002; Dickson-Swift, James, Kippen, & Liamputtong, 2008; Gilbert, 2016; Granek, 2012; Harris, 2015; Hubbard, Backett-Milburn, & Kemmer, 2001; Johnson & Clarke, 2003; Lalor, Begley, & Devane, 2006; Lumsden, 2009; Malacrida, 2007; Probyn, 2011; Rowling, 1999; Sampson, Bloor, & Fincham, 2008; Smart, 2009). Burr (1996), for example, noted suffering from "compassion stress" in her work with the family members of critically ill people. "The effect of being involved in, and in a sense, sharing the private world of people in despair, can be a 'psychologically and emotionally wrenching' experience" (p. 176, cited in Sampson et al., 2008). In reflecting on her work with rape victims, Campbell (2002) stated this plainly, "It was costly—emotionally expensive—to engage in this work" (p. 144). Most researchers note feeling unprepared to bear this emotional weight. Rowling (1999), for example, stated:

Nothing that I read in planning this study prepared me for the emotionality of the research process. I read recommendations about how I should address confidentiality, harm, deception and privacy, but there was not much written on such things as the impact on the researcher of listening to people talk about their grief, their fears and anxieties, sometimes being expressed for the first time and in times of crisis. (p. 175)

Although some have focused on the qualities of listening that can be wonderful and even a "gift" (e.g., Frank, 1998), others have recognized how listening can also be extremely dangerous. Sometimes referred to as "vicarious trauma," the costs of listening to traumatic material have been documented by clinicians and social workers who often bear witness to traumas large and small in research environments (Jenkins & Baird, 2002; Pearlman & Saakvitne, 1995). Research on the impact of working with clients who have experienced trauma such as rape has found that clinicians experience a range of negative outcomes as a result of listening, including disruptions in cognitive schemas, memory and belief systems (e.g., becoming more distrustful of men), and difficulties dealing their own emotions such as anger, sadness, fear, and helplessness (Pearlman & Saakvitne,

1995; Schauben & Frazier, 1995; Trippany, Kress, & Wilcoxon, 2004).

Clinicians across psychology, social work, psychoanalysis, and other listening-based practices have well-developed strategies concerning vulnerability that arises as a result of listening to patients. Psychological researchers, however, have largely not developed strategies in their work, leaving them often without tools and supports to manage the emotional toll that listening can take. Like those listening in clinical contexts, researchers must work to develop skills in how to hear, how to follow another person's story, how to pay attention to their own experience, as well as attend to their own vulnerability within the interview context.¹ In addition to these similarities, there are elements unique to research environments. The psychological researcher often sees the participant only once (in contrast to ethnographic and clinical work). This limited contact with a participant explains why there is less attention paid to the listening work that researchers engage in. However, psychological researchers continually revisit the interview material (often listening again and again to the same interview) during the analysis phase, which extends long beyond the initial meeting. These and other aspects that are unique to the research relationship require attention to listening in this environment, particularly how it differs from other dyadic or therapeutic relationships.

Listening to details about sexuality adds another important layer. The person being asked questions has traditionally been the focus of concern in sexuality research. Participants are often considered to be "in danger" from the research itself: from the sensitive nature of the questions, to sharing details of what is often considered the height of "private" with a stranger, as well as the affective aspects of the research (i.e., difficult memories, feelings of discomfort, embarrassment; Senn & Desmarais, 2006).² This participant-in-danger has been contrasted with the assumed perversity (and assumed safety) of the person who insists on asking questions about sex. The researcher/participant dyad, therefore, sits within this uncomfortable space: being asked questions about one's sexuality is assumed at best uncomfortable, at worst damaging; being the one to ask questions is at best voyeuristic, at worst perverse and pathological. While these dangers

may be true for some research endeavors, they nevertheless have come to stand in as the only possibilities for how researchers and participants are imagined in sexuality research.

Listening, however, can be quite dangerous. Asking participants to talk about their sexual lives often involves listening to stories of pleasure, as well as pain, violence, and sadness. We hear about things that surprise us, tap into our own pain, violence, and sadness, and what we hear may haunt us long after the interviews end. When doing research, thoughts that had previously operated as theoretical debates now occupy space—and sometimes a lot of space—in our bodies (Carroll, 2013). Importantly, this can include listening in the room during the interview, as well as listening to audio recordings during data cleaning and/or analysis, listening (in audio and/or written form) while reading and coding transcripts, and listening to participants' words during manuscript preparation.

In my own study, after each interview, I recorded my impressions of the interview content and atmosphere. Similar to how other researchers have relied on interviewer notes as integral to the analysis process, I used notes to record my own reflections, emotions, and thoughts about the material, as well as the process itself (Goodwin & O'Connor, 2006; Wolfinger, 2002). These notes were transcribed along with the interviews and offered an essential archive of the often unspoken and intangible parts of the interviews, particularly those parts of the process that were extremely emotional or were wrapped in silence and went unspoken during the interview itself (Hepburn, 2004). The following is an excerpt from my interviewer notes after I finished an interview:

As soon as we finished she started to cry—I think some of that's on the tape—and said it was a really hard topic to talk about. This is . . . a really hard topic to ask

¹ For guidance on the broader set of skills needed for interview-based research see Kvale and Brinkmann (2009), Kvale (2008), and Gubrium, Holstein, Marvasti, and McKinney (2012).

² In contrast to assumed damages wrought by being included in research, studies across subfields consistently show that participants report that being a part of sex research is challenging yet rewarding (Bay-Cheng, 2009; Mustanski, 2011; see also Campbell, Adams, Wasco, Ahrens, & Sefl, 2010). Researchers have found that participants report benefits, including, "insight, a sense of emotional relief, and feelings of being supported" (Bay-Cheng, 2009, p. 243).

people about. I feel like I might have just done some damage by simply bringing up this topic [pause] but the act of being in the interview was very painful for her. I asked if there was something I could do, and she said, "Make it go away." Meaning the cancer . . . um, yeah. . . . (Interviewer note, June 2012)

When I read my own words now, I can remember the feelings I carried around while doing these interviews. These were the most difficult interviews I have ever done. Over the past 20 years, I have interviewed many people about sensitive topics, including HIV/AIDS, sexual assault, drug use, and homelessness. Even with this experience, the material from this study was not only difficult to hear, but difficult to talk about and process with others. On the surface, the interviews themselves went well; I did all the right things, I listened carefully and thoughtfully, I asked useful questions that enabled participants to talk about experiences they had and experiences they wished for. However, I was also deeply affected by doing the interviews and by reading the transcripts afterward. During this period, I wrestled with fears about my own health, my own sexual body, and consistently had what clinicians might call "intrusive thoughts" about my own breasts, including a foreboding sense that I would necessarily face a breast cancer diagnosis in the future. Unlike previous research I had done, my body was thrust into the research process in a way that was unexpected and felt difficult to bear. These feelings only grew as I began to train students to work with the interviews and had to figure out how to help them contend with the data and the feelings it brought up in them as well. This led me to wonder, what happens when we admit that listening can be dangerous?

Sampson and colleagues (2008) analyzed online comments from researchers who conducted interviews about "sensitive research" and found that while some emphasized that they were unaware how they would be affected, most of the researchers assumed the material would be challenging, but that, "emotion work was often underestimated and sometimes came out of the blue for researchers who were surprised to find empathic pain present in 'mundane' research contexts" (p. 927). As one researcher noted,

It caught me by surprise to be so affected by someone after all the interviews I've done. But you never know who or what will affect you really as people do tend to use the interview space as an opportunity to raise all sorts. . . . (Sampson et al., 2008, p. 927)

Still others have wondered about the loss associated with leaving some stories on the "cutting room floor," the pain of leaving some people, things, and events behind, untold, heard only by the researcher and no one else (Granek, 2012).

This emotion work extends beyond the initial moment of listening to participants and continues into later phases of a study, including data analysis and writing. This is where a practice of vulnerable listening encourages researchers to think about potential dangers when encountering material at all stages of a listening project. For example, transcription is often imagined as a technical process rather than an emotional one. However, some researchers have acknowledged the difficulties associated with transcribing research interviews regarding sensitive topics (Dickson-Swift, James, Kippen, & Liamputtong, 2007; Gair, 2002; Gilbert, 2001; Warr, 2004). As one researcher noted, "I mean it broke my heart to hear the story and every time I came back to try and analyze that material it broke my heart" (Dickson-Swift et al., 2007, p. 337). When transcribing interviews, researchers often listen to the tapes a number of times, becoming more familiar with the interviews with each listening. In this way, transcribing interviews can be more difficult than the interview itself because, "the second time you have to actually hear it and feel it" (Dickson-Swift et al., 2007, p. 337).

Campbell (2002) has encouraged the notion of "emotionally engaged research" as a way to imagine the inevitable role of emotions in research and an "ethics of caring" that includes "caring for the research participants, caring for what becomes of a research project, and caring for one's self and one's research team" (pp. 123–124). Pulling on this last thread means that we must collectively engage in an ongoing conversation about what vulnerable listening looks and feels like. We must develop strategies for making this work sustainable, even in the face of listening to and thinking about difficult material for extensive periods of time. With these dangers in mind, protocols have been developed that aim to protect the physical safety of researchers in the field (Craig, Corden, & Thornton, 2002; Paterson, Gregory, & Thorne, 1999), as well as protect researchers from "psychological trauma, either from listening to subjects' traumatic experiences or from actual or threatened violence" (Social Research Association

[SRA], n.d.). Others have discussed strategies to manage their own emotional experiences such as psychological distancing from interview data or “bracketing” off difficult aspects of interview material as a form of self-protection (Dickson-Swift, James, Kippen, & Liamputtong, 2009; Rolls & Relf, 2006). These interventions, however, are each predicated upon the assumption that the researcher should be (and can be) separated from the listening process.

I offer another perspective. Rather than designing psychological safety protocols or establishing a practice of remaining distant, I argue that vulnerable listening encourages an ethics of caring for oneself and one’s colleagues. By acknowledging that listening can be dangerous, my aim is not to stop listening or to protect researchers from this danger. Rather, my aim is to care for myself and my colleagues who are working in sometimes dangerous conditions.

Fleshy Bodies in the Room

While feminist social scientists have long argued for the importance of gender and sexuality in research, there is a less explicit recognition of our physical bodies as sites of meaning making. If we consider the role that our bodies already play in how we interpret the world, we must also recognize how our bodies—both real and imagined—are central to the listening scenario. More than 20 years ago Grosz (1994) argued that feminist theory must bring our bodies and viscera back to center stage as modalities of knowing, as “the *stuff* of subjectivity” (p. ix), as particular (i.e., raced, gendered, sexed), and ultimately, as meaningful to the process of knowledge making. Grosz’s (1994) call for a “corporeal feminism” offers a useful genesis point for my own exploration of how my own physical body figured in these interviews. Building on this previous work, I highlight how our bodies are inevitably part of listening.

Many have written about how the researcher’s gender, sexuality, and emotions impact access to the field, relationships with participants, and the research process (Burns, 2003; Del Busso, 2007; Ellingson, 2006; Engelsrud, 2005; Lerum, 2001; Lumsden, 2009). Pascoe’s (2007) discussion of adopting a “least-gendered identity” offers a useful parallel to my own experience of gender in the research relationship. Her study with adolescent boys in a high school

prompted her to create a liminal stance, somewhere between sexual object and masculine peer. Pascoe’s decisions, including how she dressed, walked, sat, and identified herself during her fieldwork, prompted her to think about the implications that each of these had in how she felt (confident or not), how she was perceived (teacher, old, gendered, accessible, or not), and how she imagined being perceived by participants (like them, authority figure, or not). Pascoe (2007) noted how these reflections on her own gendered experiences contributed to her analysis: “Paying attention to my own feelings and desires as the boys drew me into their objectifying and sexualizing rituals helped me to recognize processes of masculinity I otherwise may have missed” (p. 245). Pascoe’s experiences with studying masculinity in many ways mirror my own analysis of femininity processes throughout the set of interviews, and in particular, offer a compelling model for how the researcher’s own physical presence does not merely “muddy the waters,” but offers insight that might have otherwise been missed.

During the interviews, participants would often look at my breasts. In the intimate space of interviews about sex and cancer, the centrality of my breasts was many things at once: a question mark (Why are you asking these questions? Do you have cancer?), a form of reminiscing (I remember having those), and a line in the sand (You are there, healthy; I am here, sick). My breasts were rarely spoken of, but present and meaningful in ways that struck me as obvious only once the research had begun. My breasts occupied space in the interviews; at times a source of envy, a symbol of youth and health, a shared history of being women, a stumbling block when connecting with a participant. In addition, they were an important and real reference point for both of us in the room as participants discussed what breasts meant for them, what they had provided, and what was once there and was now gone.

Because my breasts were a silent presence in the room, rarely spoken of, mostly gestured toward, or implicitly present in the interview, there is no record of their presence in the data. There is little “evidence” of my body or how it played a part in this study, except of course through my own testimonial. I didn’t take field notes on these interactions; I didn’t realize the role my breasts were playing until I recognized

how carefully I was getting dressed for interviews. I picked out my shirts very carefully; in addition to avoiding anything low cut, I attended to the shape of my shirts, the way fabric might cling (or avoid clinging) to my breasts. At the time I thought I was being “sensitive” about the topic, but with more reflection, I became more aware of trying to walk a very thin line; aware that my breasts were a part of the interview, I wanted to make sure I acknowledged their role and not hide them, but also not make them a focus. It was only after I recognized how carefully I prepared for interviews that I recognized how little guidance I had for thinking about my body in the interview room. I present it here as a way to think about the generative possibilities of our bodies and the meanings they bring with them. I do not introduce the presence of my breasts to reduce our bodies to “noise,” distraction, or something to overcome, but rather to recognize the thin line that we walk when dressing our breasts for work. Vulnerable listening, in this case, encouraged new attention to the ways that our fleshy bodies are always part of a listening practice.

Looking to other disciplines that rely on interviews offers some guidance when considering the embodied aspects of vulnerable listening. For example, being a fat researcher who asks participants about their bodies has been an area where the central role of fleshy bodies has been highlighted. Sociologists Throsby and Evans (2013) explored their own experiences as fat women in research situations where they were unsure of how their bodies were being interpreted by participants. They write, “our own (fat) bodies were both indisputably present in these exchanges and integral to the research environment, and yet at the same time, oddly absent” (p. 11). In their discussion of the role that their own bodies played in the research, Throsby and Evans (2013) highlighted how the “size, composition, sensation and performance” of a researcher’s body are essential aspects of the interview process (p. 9). These embodied elements stand alongside, but differ from how a researcher’s body is perceived as gendered, raced, and classed, elements that have been more routinely explored in feminist explorations of research methods (Archer, 2002; Reay, 1996).

In therapeutic relationships, analysts and therapists have long discussed the ways that

their own physical forms and responses are in the room, enmeshed in the material, and often an object of analysis for themselves as well as patients (Atlas, 2015; Balsam, 2012; Davies, 1994; Field, 1989). For example, Atlas (2015) noted how aspects of a relationship with a patient were made visible through their physical bodies:

I become more aware of our bodies when we sit in the same manner, unclear who is imitating whom. I notice when the rhythm of our speech becomes synchronized and when we laugh together with the same body movements. One day Ella enters with the exact same boots as mine and says that she looked everywhere for them, because she wanted to walk like me. (p. 128)

Atlas (2015) focuses here on subtle physical gestures that can be observed, such as how one sits or walks. Others have focused on other embodied aspects of clinical relationships and explicit physical disclosures such as wedding bands (Elder, 2005), tattoos (Stein, 2011), or pregnancy (Stuart, 1997). In her research about hepatitis C, and as a former intravenous drug user herself, Harris (2015) described how her own body was a site of meaning-making and intersubjective relationships between her and participants she interviewed. She noted throughout interviews how participants assessed her body and her past written into her arms: “track marks, [have] been remarked on approvingly by one participant: ‘a lot of heroin must have gone in those arms’” (Harris, 2015, p. 1692). This work highlights how physical bodies constantly reveal qualities about a person, sometimes by choice, but the physical, embodied nature of these interactions provides essential contributions to psychological research.

These examples offer just some of the ways that participants interact with listeners’ bodies. Embodied aspects must be more routinely recognized for how researchers’ bodies—in all their shapes, forms, and flesh—are an essential part of the listening process. In addition, a focus on vulnerable listening urges researchers to remember that listening to participants’ material also impacts the researcher’s body. This adds a necessary layer to discussions of reflexivity in qualitative research; the researcher is a present, embodied creature who must attend to the ways that their body is always a part of the listening dynamic. Listening is not limited to our ears, but happens between and through bodies, which

importantly, become part of the interview material. This is an obvious point; we know people can see us. This recognition, however, is not often included in the ways we discuss our interview procedures; we do not often discuss what we wore (or didn't wear), how we sat, whether we smiled a lot or cried during the interview. We avoid introducing details about our presence in an effort to portray ourselves as blank slates and, instead, foreground our interview protocols and analysis techniques. Instead of describing aspects of our physical presence, we have opted for describing our gender, race, and class as indicators of what we looked like in the room. These may, of course, be important. But what else of our physical bodies is left out, discarded in our memories, our transcripts, and our writing that might help us understand the phenomenon we seek to understand?

Feeling Outraged

The third and last part of this triptych is outrage. This last vulnerable listening scenario is situated among feminist writings about the role of outrage in research (Cohen, 2004; Gill, 2011; Nadasen, 2007; Probyn, 2011; Ringrose & Renold, 2014; Roberts, 1997) or what Fine (2006) has called "bearing witness" to oppression through the lens of research. Following the lead of feminists of color who have long argued that outrage at the conditions of inequality is essential as a tool of research as an emancipatory practice (Cohen, 2004; Gobodo-Madikizela, 2003; Nadasen, 2007; Roberts, 1997), I turn to my own experiences of feeling outrage during interviews and how this brought insight that I would have otherwise missed. Outrage is a strong emotion that signals misalignment and difference. In this case, my outrage was not a mirroring experience; rather, an emotional one that brought me outside of the research relationship and introduced a set of meanings that were not necessarily provided by the participants. Vulnerable questions arose as a result: were my emotions extraneous to the questions I was asking or informational about the phenomenon I was studying?

When I started interviewing women diagnosed with Stage IV breast cancer, I had expected to hear about material related to loss, pain, and fear. I had not anticipated hearing so many women—in fact, each woman in her own

way—talk about feeling fat. As one participant noted during her interview: "I guess I'm going to die fat. This is how much I detest being fat. I'm having a closed casket. I've already determined that. No way am I having all those double chins. . . ." Discourses of weight and fatness were woven throughout the interviews. Feelings about weight occupied many participants' minds as they discussed their intimate lives, including why they did not feel sexual or why they would not pursue any sexual contact for fear of being seen, and seen as fat. For some women, feeling fat was far worse than having cancer: "I don't like to look at the extra weight. But no, as far as the cancer stuff, that doesn't bother me at all." In addition to feeling fat, participants spoke about experiences of sexual pain and coercion and tremendous guilt about not being more sexually available or physically attractive (see McClelland, in press). Some women were emotional while talking about these issues; others were not. I, however, became outraged—at the material I was listening to and at myself.

The chorus of women talking about feeling fat unleashed my outrage, not only about gender norms and the ways that women are taught to hate themselves, but outrage at myself. I was surprised to hear women near the end of life talking about feeling bad about their bodies—and this surprise outraged me. Why was I outraged for these women and not for the "fat talk" I heard circulating around me every day—in classrooms, family and friends, and my own head? Even with this utter familiarity, fat talk in these interviews was surprising. I became outraged about hearing women's body shame and how intractable femininity norms were, because here they were, even in these last moments of a woman's life.

As I listened to these stories of fat shame and sexual guilt I realized that I was outraged for them (on their behalf) and outraged at myself for being surprised. My outrage came much later, with the collection of interviews inside of me, the patterns clearer than a singular interview allows for. It was the collection of patterns that outraged me in a way that one woman's experience did (and could) not. This was not a mirroring experience; I was not mirroring their outrage. The women I spoke to were often sad, but not outraged as I was (and am). In this case, the outrage came from me, the researcher. This

raises critical research questions: What are the methodological dilemmas when we are outraged and participants are not?

Anthropologists and sociologists have long written about observing injustices in the field, negotiating how to respond, how and if to intervene, and how these decisions affect those involved (Scheper-Hughes, 1995; Stacey, 1988; Valentine, 2003). When a researcher's emotional responses are big, negative, unanticipated, and born of fury rather than affinity, we are vulnerable as researchers. Vulnerability in this case comes from many possible sites: being unprepared for how the work feels, feeling the misalignment between self and other, and the inevitable questions of what role emotions play in research. In psychology, researchers' emotions are often described in hushed tones and shared only when these emotions brought greater alignment or feelings of affiliation between researcher and participant (e.g., Johnson, 2009). I want to add another layer to these emotional responses: when it is the researcher who sees injustice, is outraged, and the participant is not.³ While affiliation assumes sameness or shared perspectives, outrage feels like utter difference between self and other.

Rather than seeing this as a perverse or extraneous set of emotions inserted into the data by my own needs, these emotions played a central role in my analysis. My outrage led me to think about three additional questions that would not have occurred without recognizing my response to the material. One, why did these experiences of fat talk sound more outrageous than that of younger women? Two, had I simply gotten used to hearing this kind of female narrative and had, in fact, become accustomed to it? Three, how is outrage a form of privilege? Outrage is the result of thinking that something can change and has not yet changed. However, outrage is not always possible and is impossible for some. Through experiencing my outrage as generative, I was able to see something new about my own adaptation to injustice and more specifically, my assumption that being a woman meant being burdened by fat shame and sexual labor (McClelland, in press). By taking a closer look at my own outrage, I wondered more about the ways we hear gender and sexual injustices spoken about as an aside, described as "not a big deal," accompanied by a shrug or a rolled eye, signaling that this is too common to be

worthy of comment (McClelland, Rubin, & Bauermeister, in press). This is where vulnerable listening led to new thinking; these insights would not have been possible without my own emotional response to women's stories of gender and sexual labor. Being outraged felt enormously uncomfortable and vulnerable, yet it was in this discomfort that I was able to think more about what participants were telling me, and perhaps for some, unable to tell me if outrage was no longer an option for them.

Discussion

Listening presents several important dilemmas in research. Most assume they are already good listeners, do not need to practice, and have been doing it their whole lives. Listening is, therefore, often seen as a "natural," easy, and subsequently a depreciated research practice. However, researchers who have asked questions and listened to responses know the rich and complex answers one can hear—and the wide range of reactions one can feel while listening. In the prototypical research dyad, the researcher is imagined to be potentially dangerous, but never in danger herself. For example, while participants are alerted to the potential benefits and dangers of participation in research, the researcher asking the questions is not prompted to think about the possible benefits and dangers of listening.

The notion of vulnerable listening as a methodological practice highlights several aspects of interview-based research that shift the focus (if only for a moment) from participant to researcher. I detailed three scenarios which help to elaborate what a practice of vulnerable listening might look like in order to help researchers recognize how listening requires attention, practice, skill, and self-care. Listening requires a lot of a researcher; it is more than simply remaining "open" to research material, it is more than being a passive subject, a blank slate, or a mere receptacle for a participant's words. Vulnerable listening requires that the researcher understand what is happening inside of them when asking participants to speak; it highlights

³ Those who have "studied up" have certainly been witness to these kinds of dynamics and have described the struggle to be witness to normalized violence, misogyny, and denigration (e.g., Sanday, 1990).

the difficulties as well as the generative possibilities of a listening practice.

The three scenarios make more visible what vulnerable listening might involve. One, listening can be dangerous. My aim in describing listening as dangerous is to not to stop listening, but to prepare and advise others (and myself) how to take care of ourselves. Two, when we listen to others, our bodies are often in the room. This physical presence is not merely an opportunity for bias, but an opportunity to analyze how our own physical bodies are meaningful and meaningfully present. Three, emotions are an essential aspect of listening. In this case, my own experience of feeling outrage directed me to look more carefully at my own surprise that gender rules do not end and, in fact, persist.

The concept of vulnerable listening is instructive as a way to imagine listening that is *not* vulnerable, what we might think of as invulnerable listening. Remaining invulnerable might include when a researcher erases their body or ignores their physical presence in data collection, such as the way they walk, dress, or sit. Invulnerable listening might include being deaf to the ways that research impacts the listener or those involved with the research such as transcriptionists or research assistants. This might include training students, for example, to write excellent interview questions, but not training them to listen to their own experiences during an interview. Invulnerable listening might also include prioritizing IRB approval at the expense of developing an ethics of care for the participants and listener(s). Listening that is invulnerable might also result in ignoring or suppressing any emotions that arise in the course of collecting data.

I do, however, want to avoid framing a certain kind of research as necessarily vulnerable, and, alternatively, some types of research as invulnerable. In my own case, my vulnerability might have been tied to the research context (breast cancer), the interview content (sexuality), the research method (interviews), and the temporal moment in participants' lives (near the end). All of these and none of these are possible. Rather than a type of research or researcher as necessarily vulnerable, I offer instead that all research and all researchers are potentially vulnerable. Anytime we ask a question, we do not always know what types of answers we will get and how these will affect us. Vulnerable listen-

ing as a concept brings our attention to the possibility for this vulnerability to be present across a wide variety of studies, topics, and methods that involve the practice of listening.

To help the researcher working on their own or leading a team of researchers, I offer several strategies—some easier to do than others—to help develop, nurture, and manage one's vulnerability in qualitative research. I conclude with seven suggestions for psychological researchers who listen as part of their data collection process.

Advice to Researchers

1. Teach yourself, your colleagues, and students that not all data collection is the same.

Some data collection takes more time, some takes more equipment, some takes more personnel. If all data collection is imagined as the same, we do not give ourselves the space to take care of ourselves, our students, and the work. This is not simply about the common perception that qualitative research requires “more” (time, money, personnel), but rather the recognition that diverse types of data collection require different resources. Interview-based research requires training, supervision, and debriefing that should be built into the design in order to maintain good self-care for the members of the research team. A more persistent focus on what is needed to successfully carry out listening-based research would offer a way for those planning this type of research, as well as those advising, mentoring, or evaluating qualitative studies.

2. Read transcripts with others.

This might include reading transcripts with a research group, a therapist, and/or colleagues. Access to a formalized arrangement, such as a peer support program, can help researchers get support as well as professional supervision (Dickson-Swift et al., 2007; Johnson & Clarke, 2003). This might, of course, require informing participants (via a consent form) of the possibility that an individual or individuals outside of the research team may have access to their anonymized transcript. While this may add an additional detail to the consent procedure, this kind of structural support from the beginning of a project might be warranted for some researchers and/or for some types of research.

3. Develop a community of informants.

Building on models provided by participatory

action researchers (e.g., Torre, 2009), scholars might consider developing a community of informants—a group of people who are similar to the participants, but are not participating in the study. This group could be recruited to talk through the affective elements of the study, offer expertise, guidance, or correctives for the research.

4. Keep interviewer notes. While field notes are a staple of ethnographic practice (e.g., Pascoe, 2007; Wolfinger, 2002), this kind of record keeping of the researcher's experiences has not been taken up as commonly in qualitative research in psychology. In fact, some of the few times interviewer notes are mentioned is after a taping failure and interviewer notes are used in place of a transcript. Interviewer notes, however, are an invaluable tool for the psychological researcher and offer additional insight to data collected from participants. Notes might include observations about the research setting (room, temperature, seating arrangement, lighting, etc.), content of the interview (verbal, gestural, silences), as well as emotions felt by the researcher and/or observed in the participant. In order to capture these elements, I have found it best to record notes immediately before or after an interview and transcribe them for analysis. Notes, in fact, lend necessary insight when listening moves to reading during the transcription and analysis process (see Hepburn, 2004). Researchers' notes provide an archive of the unspoken and intangible parts of interviews or other qualitative data collection methods, particularly those parts of the process that go unspoken. This move to incorporating the researcher's personal experience as a part of the data record is essential to developing a practice of vulnerable listening. Trends in psychological research have increasingly erased the presence of the listener; researchers' participation in data collection and analysis has, unfortunately, come to be read as suspicious rather than informative. In contrast to this trend, collecting and using interviewer notes encourages a methodological practice that acknowledges the role of the researcher in listening-based research.

5. Write thoughts and emotions down for yourself. Researchers have suggested the supportive function that journal writing can play in the research process (Davison, 2004; Lalor et al., 2006; Malacrida, 2007; Rowling, 1999). For example, Malacrida (2007) asked all members

of the research team, including students, transcriptionists, and everyone who interacted with the data to "write about their concerns and joys in terms of doing the research" (p. 1331). Over time, this led to asking questions and offering responses to previous journal entries, to which the team members responded. The journaling process helped the research team address issues and concerns that stemmed from the team's exposure to sensitive, emotional, and potentially demoralizing material generated by the study. Rowling (1999) argued that in addition to the supportive role these notes might play for the researcher, the notes play an important role in the analysis process, in part, because recording the emotional reactions also forms a supportive "debriefing" role for the researcher.

6. Take time away from the interviews. Distance from the immediacy of the material can be very helpful. It has taken me 3 years to return to the hardest parts of my interviews; in the meantime, I have written about the parts that were easier to digest. This advice may be difficult for those who are writing on timelines related to institutional demands or feeling pressed to circulate data quickly (due to severe injustices, time-sensitivity of information, etc.), but if possible, could be built into plans for data collection and analysis.

7. Develop self-care strategies. Researchers have offered ideas such as debriefing, counseling, scheduling of rest breaks throughout the project, and the development of protocols focusing on physical and emotional safety (Rowling, 1999; SRA, n.d.). Researchers may want to have access to professional counseling support, as is provided for clinicians. This kind of support is rarely written into research budgets, but could be developed and sustained throughout the life of a project.

Conclusion

Qualitative methods that place researcher and participant together in the same space, engaged in a process of asking one person to share and another listen, can often tap deep wells of emotion in researchers as well participants. I develop the concept of vulnerable listening and detail three scenarios from my own research to illustrate how I see vulnerable listening as attentive to the affective, embodied, and relational aspects of qualitative research. My aim is

to develop a conversation about what vulnerable listening looks and feels like in order to develop strategies for making this work—and the invaluable insights developed from listening-based research—sustainable, thriving, and engaged in the deeply psychological process of understanding people and their relationships with one another.

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