Organizational Culture Shock: Ethnographic Fieldwork Strategies for the Novice Health Science Researcher

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Abstract: The increased use of ethnography in health science research warrants an in-depth examination of the experiential account of ethnographic data collection. Using OBERG's classic definition of "culture shock" as a framework, I share my experience as a novice researcher conducting fieldwork as part of an institutional ethnography on workplace mental health. I draw attention to the typically unspoken aspects of ethnography throughout this account by providing insights on role contradictions, in addition to ethical, emotional, and practical issues that are not readily addressed in traditional methodological descriptions of ethnography. I conclude with a variety of strategies for the novice health science researcher to effectively negotiate some of the typical dilemmas experienced in this type of research.

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1. Introduction

Ethnography is both a process and a product (SAVAGE, 2000). It has been described as a

> "style of social science writing which draws upon the writer's close observation of and involvement with people in a particular social setting, and relates the words spoken and the practices observed or experienced to the overall cultural framework within which they occurred" (WATSON, 2011, p.205). [1]

The ethnographer spends long periods of time working with people in "the field," or in their native environment, in order to observe behavior in the real-world context (FETTERMAN, 1998). The ethnographer is considered to be the primary tool of data collection, and will utilize observations and interviews to collect information about the people he/she wishes to study (O'REILLY, 2012; SCHENSUL, 1999). Deeply rooted in anthropology and frequently used in sociology, ethnography was not introduced into the health care field until the

1960's and 1970's (COHEN & CRABTREE, 2008). Since that time, ethnography is increasingly used in clinical and health care research; for example, Myra BLUEBOND-LANGNER's pivotal work on the impact of childhood chronic disease on children and their families (1980, 2000). [2]

More specifically, ethnography has been proposed as an approach to investigate healthcare quality and safety (LESLIE, PARADIS, GROOPER, REEVES & KITTO, 2014), inter-professional care delivery in intensive care (PARADIS et al., 2014), and cultures within hospitals around the world (VAN DER GEEST & FINKLER, 2004). Ethnography has been used to explore the experiences of families who have kin in hospital (PERRY, LYNAM & ANDERSON, 2005), and how patients engage in healthcare decision-making (YOUNG GARO, 1982). SAVAGE (2006) contends that ethnography offers a holistic way of exploring the relationships between the different kinds of evidence that underpin clinical practice, and several authors advocate for ethnography's increased use as a qualitative methodology for the in-depth study of health related issues (CRUZ & HIGGINBOTTOM, 2013; PARISSOPOULOS, 2014; SAVAGE, 2000). I argue that the burgeoning use of fieldwork in health science research warrants increased attention and better preparation of students so that they can become proficient in ethnography as a research methodology. Within the health sciences, there are only a handful of accounts that discuss the logistical implications of conducing ethnographic research (ELSEN & MONTICELLI, 2003; MOLL, 2012), and some literature that addresses ethical aspects of conducting ethnography (GOODWIN, POPE, MORT & SMITH, 2003; POPE, 2005); however, there is a dearth of literature that addresses the organizational politics and emotional trials and tribulations for researchers conducting ethnographic research within the health sciences field. Furthermore, there is little mention of the management skills that are required to navigate role contradictions in the researcher-clinician role, and balancing the vested interests of primary stakeholders within the research project. Critical discussion of these issues can help in informing the novice health science researcher of the experience of fieldwork, and can be used to better prepare students prior to entering the field. [3]

This article addresses this significant gap in the literature by providing a detailed account of my experience of conducting an institutional ethnography (IE) that incorporated 140 hours of fieldwork observations. IE differs from traditional ethnography in that it is an approach used to investigate how our everyday experiences are shaped and produced through the coordination of various social and institutional relations (SMITH, 1987, 2003, 2005, 2006). Thus, in IE, the coordination of these experiences becomes the focus of investigation. Although several strategies to overcome specific challenges embedded in the use of IE have been discussed elsewhere (BISAILLON & RANKIN, 2012), many of the same techniques and approaches used in IE are also utilized in ethnography, such as observations and interviews that support descriptions of how people understand, perceive, and negotiate institutional rules. Using OBERG's (1960) four-phase account of culture shock and adjustment to new cultural environments, I will demonstrate how emotional, ethical, and role contradictions experienced by the novice health science researcher are rarely discussed, yet

have a significant impact on the research process. The experience of culture shock and related feelings are often considered "taboo" within the anthropology community, as anthropologists are considered to be courageous, prepared, and well equipped to handle such experiences (IRWIN, 2007). Alternatively, from a sociological perspective BLACKMAN (2007) discusses the notion of "hidden ethnography," where emotions related to research are readily discussed, though goes on to add that the data does not get published. In my own experience, I quickly learned that accounts of emotion and feelings related to my research cast doubt on the validity of my findings with colleagues. Moreover, if these issues are mentioned in the literature at all, it is often only in the limitations sections of the paper as an accounting for researcher bias. [4]

This methodological reflection begins with my first exposure to ethnography as a PhD student researching workplace mental health in the Graduate Department of Rehabilitation Science at the University of Toronto. I entered into the program with over ten years of clinical experience working as an occupational therapist in mental health. I selected IE as my approach to explore how peoples work activities, and the associated texts and documents, coordinated the experience of "mental ill health" in the workplace. Several other health science researchers have applied IE to explore social relations, and in particular, to determine how institutional forces shape the experience of health care workers with mental health issues (MOLL, EAKIN, FRANCHE & STRIKE, 2013), to critically analyze text-based management in nursing practice (RANKIN & CAMPBELL, 2009), and to examine professional tensions in client-centered occupational therapy practice (TOWNSEND, 1998). [5]

The IE that I conducted was within a large industrial manufacturing company in Ontario, Canada. It involved several components, including fieldwork observations, interviews, and a review of relevant texts, documents, policies and procedures. The extensive fieldwork observation period allowed me to gain insight into how the workers talked about mental illness, and provided me with a context in which mental ill health was discussed. This also provided the opportunity for me to better understand how meanings of mental illness are produced and understood within this particular worksite. Additionally, as mental illness tends to be highly stigmatized, the fieldwork observation period provided me with an opportunity to familiarize the workplace with my purpose and objective, and was used as strategy to build rapport, reducing any perceived barriers for workers to share their stories. Through the use of OBERG's (1960) notion of culture shock as a framework, I draw attention to specific events, activities, and dilemmas that shaped my experience. The article concludes with a set of recommendations of strategies to be used by novice health science researchers to effectively negotiate some of the typical dilemmas experienced in this type of research. [6]

2. Ethnography and the Notion of Culture Shock

Although 140 hours of ethnographic observations by no means equates to a significant amount of time in the field compared to traditional anthropological research, it still became apparent to me that I had experienced what OBERG (1960) coined "culture shock." The concept of culture shock originated in the mid-20th century, and the term is still used to describe the state that is "precipitated by the anxiety that results from losing all our familiar signs and symbols of social intercourse" (p.177). Originally considered a phenomenon that anthropological researchers experienced in far away and/or remote research locations, literature is now beginning to acknowledge that culture shock can also occur when people enter into other new environments such as school, work, towns, or organizations (CUSHMAN, 2007; GRIFFITHS, WINSTANLEY & YIANNIS, 2005). [7]

Consequently, I will use OBERG's (1960) classic four-stage model of culture shock to describe my adjustment to the research site—a North American industrial manufacturing plant—during my ethnographic fieldwork experience, and the research process. These four stages include: 1. the initial honeymoon stage, where individuals are fascinated by the new environment/culture; 2. the transition to the negotiation and hostility stage, where individuals experience difficulty in the process of adjustment to the new environment; 3. the regression stage when the individual develops a sense of disappointment and critical views; and 4. the recovery stage when the individual starts to experience adjustment and acceptance. I will then provide suggestions to aid other novice health science researchers in the use of ethnography within new organizational or workplace cultures. [8]

2.1 Stage 1: The honeymoon

OBERG (1960) states that the honeymoon stage of entering into a new culture may last from a few days or weeks to up to six months, but that the duration is shortened if one is forced to cope with challenging conditions. In the case of my research, there were many challenges in securing a site for my investigation because most organizations I approached were not interested in engaging in research related to workplace mental health. I was ecstatic when I finally received an expression of interest from a potential research site. My honeymoon period began with the news that I had been given approval by the corporate head office and the local site to proceed with the research. An ethics application and legal agreement were soon underway and I was very excited to start my research project within this industrial manufacturing company that employed over 200 people . After following recommendations from published literature on how to best negotiate and maintain access to the research site (BONDY, 2013; MOLL, 2012), I felt well prepared. A research advisory committee (RAC) was assembled to help devise an entry strategy and provide ongoing support. The RAC was compiled of representatives from human resources (HR), two different labor unions (one representing professionals, and the other tradesmen), various levels of management, and frontline staff. After discussing my research proposal, the

entire team was on board, and everyone appeared to be very supportive of the initiative. [9]

An e-mail introducing my project was sent from HR to all staff. It contained a brief biography, an overview of the research project, and at the request of HR, a personal photo so that the staff would recognize me and be able to "put a face to a name." I strategically chose a photo taken with my newly rescued dog, a 170lb St. Bernard, hoping it might invite informal conversations with the workers. My first few days onsite were pleasant. I received an extensive tour of the facility, and was personally introduced to most of the workers by HR staff or team leaders. A lot of workers either commented on, or asked about my dog and shared stories about their own dogs. I also had formal orientation, which included health and safety training. I was provided with my own private office, which caused some initial confusion about my role as many of the workers thought I was offering in-house psychological counseling services. One worker commented: "When are you getting your therapy couch delivered to your office?" I used the question as an opportunity to clarify my role at the site, and to describe my research. For the most part, everyone was cordial and friendly. I started attending various meetings to talk about my research to further increase my visibility. I also took advantage of the opportunity to work out in the on-site fitness and health center. This presented as another opportunity for the workers to get to know me, and to further generate informal discussion and conversations with staff. [10]

I associate this "honeymoon" phase of my research with becoming somewhat of a "temporary" insider (MULLINGS, 1999, p.349): ADLER and ADLER (1994) discuss the various roles that researchers assume, which range in degree from complete membership within the group being studied (an insider) to complete stranger (an outsider). Although the use of the term insider has been critiqued in similar research processes (McGINN, 2005), I will use the term cautiously here to refer to the fact that, over time, I became very familiar with the workers within the organization. It is not to say that I conducted research in my own work setting as an indigenous or native insider (ibid.), but I did establish a reciprocal familiarity with the workers. Shortly after entering the field, I felt that I was being welcomed and accepted within the organization; thus moving along the continuum toward becoming more of an "insider." Over time, workers became less guarded around me and they started to share more and more of their personal stories. I had a genuine interest in learning about their job duties, their roles, and perspectives on the workplace. They also asked me many questions about academia and the research process. I became aware of many of the workers' personal and work-related struggles, perceptions, frustrations, and emotions. I ate dinner with the workers on the evening shift, and "hung out" in the kitchen while preparing brunch on the Sunday morning shift. I was developing a deeper understanding of the everyday challenges of their work and home lives through listening to stories about lay-offs, divorce, illness, families, hobbies, vacations, shiftwork, and job security. [11]

The initial stages of my fieldwork were going very well; I was building rapport with the workers, a key priority for researchers in the field (GAGLIO, NELSON &

KING, 2006; PITTS & MILLER-DAY, 2007). I was spending time learning industry acronyms, work processes, and terminology used within the plant. I was soon able to converse in their "work language," and felt integrated and accepted into the community. I was starting to understand the social networks with key personnel who could act as guides to and within the organization. However, it also drew attention to the time and effort needed to establish, maintain and nurture the professional relationships between the researcher and the researched (SCANTLEBURY, 2005). In view of the significant amount of time invested I could not foresee any major challenges regarding the research process, and I began to focus on my recruitment for interviews. Undoubtedly, the time I spent building rapport with the staff facilitated this process. Everything was going according to plan. [12]

2.2 Stage 2: Negotiation and hostility

Not knowing it at the time, I soon found myself in the "adjustment" phase of my new cultural environment. OBERG's (1960) second stage of culture shock is characterized by difficulties with the process of adjustment; a number of "troubles" arise, and there is much frustration and disdain. I was becoming more and more aware of the workers' stigma toward mental illness, the blurring of relationship boundaries, and how gender issues played out in this particular workplace. Similar to other ethnographers (DENNIS, 2009), I began asking myself a series of questions: Should an ethnographer intervene in the activities of the community/organization? Had I compromised my personal values and integrity by not addressing stigmatizing and discriminating comments? What are the boundaries between researcher, advocate, and ally? The following examples will shed light on how active involvement with research participants can challenge research ethics, and create significant ethical dilemmas for the researcher who faces tensions when choosing whether or not to intervene. [13]

Although my initial orientation and observations in the plant went well, there were still a few workers who refused to speak with me, and others who remained extremely guarded in my presence. Colleagues of these workers had informed me that they had previous negative experiences with management within the organization, which was causing them to distrust anyone who did not work directly with them. I tried very hard to be respectful of the workers spaces, and in situations where I felt I was not welcomed I would often relocate to another area to avoid intruding and inconveniencing the workers. As workers became more comfortable around me, they started using terms such as "crackpots," "nuts," "crazy" and "insane" to describe individuals living with mental illness. I frequently heard comments such as: "You've come to study the insane asylum," "Have you found any crazies yet? You're not looking hard enough, they're everywhere," "If you interviewed me, I'd end up in a straightjacket" and "If we see any crazies, we'll let you know." Even though the purpose of my fieldwork was to better understand the culture and context in which the workers understood and spoke about mental illness, I found myself getting agitated and irritated by the workers recurring derogatory comments and blatant expressions of stigma towards mental illness. I politely tried to provide information to these workers in a non-patronizing

way, but they did not appear interested or invested in learning about mental illness. I considered the amount of time I could spend on trying to educate the workers versus the purpose of my research, and quickly came to realize that I could not single handedly provide an anti-stigma mental health campaign within the organization. I made a conscious effort to not intervene, potentially contributing to my difficulties in adjusting to the new environment by not taking measures to address my discomfort with their use of derogatory language and terminology. [14]

Yet, on another level, once the people at the workplace became accustomed to my presence and more familiar with the purpose of my research, boundaries quickly began to blur. A new set of ethical dilemmas was introduced when I began interviewing workers; I struggled to maintain my position as a researcher and fought the urge to enact my clinical training during interviews. Many of the workers shared their personal experiences with mental illness, and it became increasingly difficult not to probe and question from a clinical perspective. Despite this instinct to enact my clinical training, I had to intentionally avoid engaging in counseling techniques, and reserve comments and advice about navigating resources within the community. Instead, I strictly adhered to the guidelines outlined in my ethics protocol and I provided the informants with a handout of local mental health resources that they could contact for further information. But I had a nagging feeling that there was more I could do, rather should do, for these informants. I felt that I had failed some of the informants as I knew many would not want to publically disclose their mental health issues or contact community resources for fear of stigma. They entrusted me with their stories and I had regular interaction with them in the workplace setting; yet I could not do anything further to support them. Again, I found myself questioning my decision to not intervene. [15]

Gender issues and conflicts between blue-collar and white-collar workers at the plant added another dimension of tension to my experiences in the field. As one of the few females onsite I was routinely made very aware of the hyper-masculine work environment. Safety and risk issues were often brought to my attention in a manner that emphasized the strength and bravado that was required to do the job. There was also a very clear chain of command that ranked the workers according to their level of power and authority; this hierarchy of status was attained through training, credentials, or position title. In addition to these tensions, I also began to struggle with how to maintain my neutrality within the site. The management and administrative staff had generously allowed me access to their organization and seemed confident that I would present a favorable perspective of workplace mental health within their organization. However, I was orienting my research from the standpoint of the worker experiencing mental health issues. I had spent many hours and days alongside of these workers, learning about their daily routines and everyday struggles. I became caught between two opposing forces; being empathetic towards the workers' plight, and feeling that I was indebted to senior management and administration for letting me into the plant. This put me in an extremely awkward

situation; a position where I would jeopardize my research if I ostracized either party. [16]

Maintaining this delicate balance between opposing forces became harder as the workers began to relate to me as an advocate and an ally in their struggles with co-workers and management. I found myself making a critical error in judgment; I had finally decided to intervene. I relayed a female staff member's concerns about working with a particular male coworker to management at her request. Despite my suggestion that she advocate for herself, I was empathetic to her plight of being one of the only females on staff. Because the nature of the concern involved staff safety, management had to take formal steps to address the issue, and word of my actions quickly spread throughout the plant. The dynamics of my relationship with the staff significantly changed; some for the better as I was seen as an advocate acting with integrity, but many others for the worse as my actions were also interpreted as intrusive and inappropriate with my role as a researcher. I had been completely ignorant of the impact this disclosure would have on my relationship with both the frontline workers and the management and administrative staff who had provided so much support for my research endeavor. My field notes reflected this sudden shift in dynamics:

> "Shortly after being informed that a formal process now had to be enacted to properly address the issue, [my primary contact] asked for my office key back. It was very awkward and uncomfortable for me as it felt like I wasn't welcome there anymore, and that I was being shoved out the door or punished in some way by having my privileges revoked. It was very demoralizing and demeaning ... I left shortly after with a very heavy heart as I felt I had disappointed everyone at the site." [17]

I was angry for being put in such a position, irritated and bewildered by the response I received from many staff, and felt discontent towards the organization as a whole. I was overwhelmed, and did not want to cope with the fallout of my misguided actions; I just wanted to walk away from the research altogether. [18]

The difficulties experienced with adjustment in this stage of the research project are not uncommon, neither are the ethical or political dilemmas faced by the researcher as to whether or not to intervene. An extreme example is provided by VANDERSTAAY (2005) when he describes how his attempts to intervene inadvertently led to a murder and the arrest and imprisonment of a research participant, a teenage drug dealer. Not all ethical dilemmas are of this magnitude; as I discovered, even dilemmas that seem minor by comparison can place the researcher in a compromising or uncomfortable position. To facilitate an understanding of the dilemmas an ethnographer faces around the issue of intervening, DENNIS (2009) describes three specific processes by which ethnographers might examine their ethical practices. The first process discussed by DENNIS includes identifying modes of intervention, which could be interpersonal, administrative, enactment, and modeling interventions. Prior to relaying the staff's concerns to management, I could have considered other means of intervention, such as encouraging the female staff member to write a

letter to her manager if she wasn't comfortable meeting with him in person to express her concerns. [19]

The second process that can be used to examine ethical practice would be articulating elements associated with the decision to intervene or not, which include reflection of researchers values, structural, and hermeneutic elements (institutional power relations among participants, goals of the project, trust/responsibility, egalitarianism, and inclusivity) (ibid.). Had I spent more time reflecting on the hierarchical nature of the organization and the limited number of women in the plant, I would have had a greater appreciation for the extent and nature of the concern that was expressed. [20]

The third and final process is to articulate underlying ethical principles and critiquing practices by locating contradictions in one's ethical claims. DENNIS presents a complications and contradictions "BUT" formula (p.144) that is very helpful in critically reflecting on these dilemmas. The formula first identifies the ethical practice, and then points out contradictions inherent in our ethical principles by using "BUT" statements to highlight contractions and limits in the ethical practices of intervening. Had I used this formula, I could have located the contradictions in my ethical claims and critiqued the associated practices. For example, the statement "I should remain neutral in regard to my research site participants BUT when a female worker expressed concerns I took it upon myself to advocate on her behalf" would have drawn my attention to the contradictions and limitations in intervening. Upon reflection of these principles, I should have contemplated alternate modes of intervention, and given greater consideration to the institutional power relations among the staff. [21]

2.3 Stage 3: Regression

Just over four months into my data collection I had completed almost all of my interviews and gathered all of the texts and documents that I required for my analysis. I started to sincerely regret the decision to engage in such a high level of intimacy with the workers at the plant. I no longer wanted to physically go into the plant, and I certainly did not want to interact with the staff. OBERG's (1960) notion of regression is characterized by extreme disappointment and a highly critical view of the new environment, which is exactly what I was feeling. Even despite the fallout from the incident that had changed the trajectory of my research process I reflected on the amount of time, energy, and emotional investment I had put into my data collection. I began to contrast my experiences in the field with that of my academic peers who were using quantitative research, and I became very envious of their clear-cut, straightforward, and predetermined protocols. The amount of energy invested in negotiating interpersonal relationships felt overwhelming. [22]

As I had collected most of the data that was required for my project, it was no longer necessary for me to be immersed in the day-to-day activities of the worksite. Therefore, I decreased the frequency and duration of my visits. At this stage of my research I no longer felt like an insider, and by all accounts I had

found myself as an "outsider." An example of this emotional shift along the continuum of insider and outsider is described in my notes:

> "At the start of the night shift, the first thing that was made VERY clear to me was that I was no longer welcome by the team leader. He pulled me aside and said 'you know everyone leaves here by 4, there's no one left, just [this trade]; everyone else is gone'. I suddenly felt that I was in uninvited space and/or intruding ... that it was unacceptable for me to be there. Some of the other workers started making small talk with me, but the team lead remained very removed and ignored me for the most part. I left early because it just felt too awkward to stick around." [23]

Understandably, I perceived that I lost the trust of some of the workers; therefore, I was treated with a more formal and detached approach. These shifts along the continuum of insider and outsider in the research process are commonplace, and they can be described as a common back and forth process occurring when situations involving different values arise (MERCER, 2007). However, the experience was still unpleasant. As an outsider, I was no longer privy to candid conversations or informal discussions with staff at the plant. [24]

My newly acquired outsider status brought to light the fact that I had never really contemplated an exit strategy on completion of my research. I had worked so long and hard on "getting in," that I didn't have a plan for "getting out." Recent events had precipitated a forced closure of my research and although I was preparing to leave, I wasn't prepared for the sudden disengagement. As the frequency of my visits had decreased, I simply left on my final day as if it were any other without any final goodbyes to the workers. I was able to formally thank the few management and administrative staff that were present on my last day. As part of the initial research strategy devised by the RAC included a "summary of research findings" or a debriefing about the project, some of the workers may have been left with the impression that I would be returning. But this would no longer be the case as I had created tensions within the organization and enthusiasm about my presence had faded significantly. WATTS (2008), in her methodological reflection, shares a similar experience of exiting from ethnographic research, and notes that the issue of unexpected departure raises emotional concerns for both the researcher and the research subjects. The exit phase can be emotionally trying for the researcher, and WATTS draws attention to the need to contemplate a strategy upon entering into fieldwork. [25]

2.4 Stage 4: Recovery

Fortunately, I had completed an adequate number of interviews for the purpose of my research. I had collected enough data to remove myself completely from the research site and move forward with my study. Only then was I able to reflect on how differently the organization functioned from the healthcare environments in which I practiced. Industrial manufacturing in general, and my research site specifically, had their own culture and customs, including a hyper-masculine work environment and a stanch hierarchical structure. Being a newcomer in the organization meant that, initially, I didn't fully understand or appreciate the

rationale behind certain actions and behaviors. Upon reflection I was able to better situate my experiences within the context of the organizational culture, and reactions of staff and management began to make more sense to me as I started to recognize that they were acting within their own customs and organizational traditions. As OBERG (1960) notes, this fourth stage is about acceptance, and adjusting to the new culture as "just another way of living" (p.178). [26]

The final data analysis and write up of my findings also provided some clarity and closure. Aside from a few minor issues with proposed publications as all work was being vetted through the company, the process was moving forward. I came to understand certain issues were to be flagged within the proposed publications, and the rationale made sense from the company's perspective. I was concerned with advocating for change, and the company was concerned with protecting staff, and their confidentiality. We were able to negotiate these differences in a fair and timely manner. I would occasionally reminisce about new things that I had learned about the industry during my time at the plant, such as how certain equipment was maintained, or how particular products were manufactured, regulated, and marketed. I genuinely missed many of the workers that I had gotten to know, and I wondered how they were managing with their personal and professional undertakings. [27]

3. Discussion

VANDERSTAAY, in a narrative review of ethical decisions he made in his fieldwork research stated: "While no recipe for ethical fieldwork can be written, a review of dilemmas faced by previous ethnographers can enable researchers to anticipate difficulties and to establish useful guidelines before entering the field" (2005, p.372). The present article combines the ethical, emotional, and practical experiences of a novice researcher in an effort to support health science students in preparing for ethnographic research. By using OBERG's (1960) account of culture shock as a framework, I provide a detailed explanation of my experience of collecting fieldwork data. I will now provide a summary of key ethical, emotional, and practical reflections for future consideration. [28]

The first recommendation is to recognize that most researchers in the field will be faced with ethical dilemmas at some point in their data collection. Representing multiple roles, such as a healthcare clinician and researcher, can lead to conflicting obligations, conflicts of interest, and ethical and moral dilemmas (McGINN & BOSACKI, 2004). Most likely, the researcher will be basing their actions on the well-being of research subjects, particularly within the context of researching vulnerable or exposed populations. The researcher must consider how they will react when facing the decision whether or not to intervene in the ongoing activities of the site. However, the researcher should note that their decisions may not be solely based on the objectives of the research project, but instead may arise because of personal investment in the people being researched, or because of the researchers own personal standards of behavior (DENNIS, 2009). This may lead to blurred lines between the researcher's personal and professional boundaries. Researchers need to reflect on their own

personal values at the outset of the project, and remain aware that their actions out of concern for some will also have an impact on others. [29]

Before acting, the researchers would be wise to consult with their supervisor or advisory committee to attain expert opinion and guidance. It is important to consider what is within their control to change and affect, and consideration should be given to alternate ways in which intervening may be possible. Using a process such as DENNIS's "BUT" formula to examine ethical practices will provide an approach to critically reflect on contradictions between the researcher's ethical principles and his/her actions. Furthermore, time should be spent anticipating typical dilemmas that may arise, and consideration should be given to what potential responses or options may be. For example, I had obviously expected to interview people with mental health problems, and after the interview I had planned on providing them with an information sheet on community supports and resources for mental health issues as per my ethics protocol. But I hadn't anticipated building relationships with these informants, spending time interacting with them on a daily basis, or having to negotiate how I could best provide support for them when limitations in practices for marginalized workers were exposed. [30]

There is an inherent unavoidable emotional component within the ethnographic experience. Establishing rapport requires some level of emotional commitment to those being researched. Moreover, it is important for the researcher to recognize that there will be times of transition across the continuum of being an outsider and then insider during the time spent immersed in the field. I had mistakenly interpreted the movement across the continuum as a failure, instead of a normal and ongoing back-and-forth process. These transitions require constant adaptation and adjustments in the researcher's social interactions, and thus, they also take an emotional toll on the researcher. Depending on emerging situations, the researcher will also experience a variety of feelings from their fieldwork. KONING and OOI (2013) discuss what can be learned from "awkward encounters," BLACKMAN (2007) discusses fear, and romance, whereas WARDEN (2012) talks about trauma, and VANDERSTAAY (2005) addresses shock, fury, anger, bitterness, and despair. As many of these authors suggest, these feelings should not be ignored and can be used as data to gain insights into key issues of the research. One technique is to examine the subjective position of "researcher" and the interaction with other subjectivities made salient in the research process (RILEY, SCHOUTEN & CAHILL, 2003). KONING and OOI (2013) recommend the use of "inclusive reflexivity" to enrich our understanding of the ethnographic experience. Inclusive reflexivity incorporates everyday experiences such as the emotions, anxieties and the agendas of researchers and the participants into reflective practices. It provides a means for ethnographers to reflect on interpersonal exchanges in the field, how these interactions can enrich an understanding of the field, and how reflection can direct how much of oneself to reveal in the field (ibid.). [31]

On a practical level it is prudent to ensure that the role of the researcher, the scope of the project, and the timeline for data collection is made very clear to all

stakeholders at the beginning and consistently throughout all stages of the research. Despite an informative e-mail sent to all staff, it was obvious that there was a lot of misunderstanding about my purpose for being onsite. It became apparent that the type and amount of information, as well as how that information was delivered to the organization had a significant impact on how it was understood by the workers. For example, as my research was intended to take up the standpoint of the worker I tried to align myself with their interests and experiences; thus they saw me as a vehicle to advocate for their cause. Therefore, it is also important to engage in regular contact with all stakeholders throughout the research process to maintain perspective of the project, provide updates, and seek guidance on any issues that may arise. [32]

An additional strategy that may facilitate the fieldwork process is the comprehensive recording of ethnographic field notes. Field notes not only serve as a dataset, but can also help the researcher make sense of their experience and record changes over time (EMERSON, 1995). Establishing an academic mentorship/working group or support outside of the research site would be helpful to have a safe place to confide in and disclose personal experience. For example, I was an active member of a working group specifically for students conducting institutional ethnographic research. Engaging in these regular exchanges, or simply reporting on experiences provides the researcher with an opportunity to debrief and check in with someone who is external to the immediate ethnographic process. Lastly, we need to recognize that these experiences and challenges can be considered a "rite of passage" (IRWIN, 2007), and are a necessary part of the transition to becoming a proficient researcher. The lessons learned through these challenges are invaluable, and will continue to inform future practice if researchers are given the opportunity to critically reflect on their decisions and emotions during the fieldwork experience. Discussions of ethical dilemmas, emotions, and practical considerations are important to uphold the integrity of fieldwork research, and to present a more holistic, as well as realistic, account of what happens in the field. [33]

Acknowledgments

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