

Research as Care: A Shared Ownership Approach to Rhetorical Research in Trauma Communities

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In this article, we tell stories from our own research experiences to demonstrate the need for a set of methodological tools within Rhet/Comp that is more fully responsive to the ethical challenges of working with traumatized communities. Drawing on feminist and indigenous approaches, we propose a methodological toolkit for trauma-related research to reduce participant risk. In so doing, we situate shared ownership within a research as care framework and suggest five pillars for conducting trauma-related rhetorical research: (1) mediating academic use, (2) responsivity to re-living trauma, (3) recognizing participant motivations, (4) collaborative meaning-making, and (5) accounting for identity evolution. In sharing our stories about our research and the complications involved in negotiating researcher-participant dynamics in traumatized communities, we hope to help other researchers more effectively navigate similar territory in their own work.

In Spring 2017, we—two newly minted PhDs in Rhetoric & Writing—were invited by our faculty mentor to talk with graduate students about our respective experiences conducting community-based

ethnographic research using oral history approaches. Maria's focus community was comprised of women dealing with infertility and reproductive loss; for John, the community was comprised of women who had been sex trafficked. Both projects explored participants' lived experiences and storytelling around traumatic events. While telling stories about conducting research within these communities, we noticed overlap in our thoughts about the ethical management of trauma-related research and our shared challenges. As we responded to questions from students, it became clear that we were both theorizing concerns about the lack of methodological resources on the ethics of rhetorical research within such communities. In what follows, we develop a set of methodological tools responsive to the ethical challenges of working with traumatized communities.

The concerns raised by our own experiences navigating research, and the questions graduate students posed after our panel, made us realize the need for methodological tools for trauma-related research. In particular, we saw a need to reduce participant risk and the risks of writing about their stories within the framework of institutional expectations. Drawing on feminist and indigenous approaches, we propose a methodological toolkit that we refer to as *research as care*. This phrasing suggests that our research not only cares for the stories we are told when collecting participant narratives, but that care is extended to recognition of embodiment (i.e., taken *onto* bodies). We care for the embodied being of our participants by operating through a series of reciprocal and fluid premises centered on the notion of *shared ownership*. These premises also act as a series of ethical checkpoints, aiming to care for participant stories by enacting methods that reinforce relationality between researcher and participant. More so, these premises take into account those unpredicted scenarios of negotiation that occur in trauma-related research.

THE NEED FOR A METHODOLOGICAL TOOLKIT

A review of literature demonstrates that currently no scholarship within rhetoric and composition specifically addresses *how* to work and do research within traumatized communities. While the discipline has, indeed, taken up and been concerned with experiences of trauma, calling for scholars to “bear witness to how rape scripts

remembrance and forgetting” across two documentary films (Hesford 1999, 215) or address composition course design in response to the trauma of “Indian removal and U.S.-Indian relations in general” (Cole 2011,122), little methodological work has been conducted. While Lynne Lewis Gaillet (2012) raised archival research concerns in attending to “trauma, Asian diasporas, and the social dynamics of Asian culture” (43), the *how* of working with traumatized communities remains absent.

Instead, writing to heal from experiences of trauma has dominated our disciplinary scope, ranging from the need to advance pedagogical theories based on conflict, dissensus, and engagement “with discourses on healing, shelter, and trauma” (West 2000, 52), to Laura Micciche’s (2001) suggestion to build “theories of emotion in composition studies [so as to] help teachers respond to students who may be damaged in ways that inhibit their ability to learn” (140). More recently, Cathryn Molloy (2016) evaluated the “efficacy of claims that writing personal narratives can heal individual pain” (134). On a broader scale, Gloria Anzaldua (1987), Jacqueline Jones Royster (1996), and Victor Villanueva (1993) have also made clear the traumatic violence of policed language. All of these authors crucially remind us that understanding trauma is important to rhetorically analyzing text and film, conducting archival research, and enacting thoughtful pedagogy, yet none articulate a methodological approach to *doing research* with traumatized communities or individuals.

From our research projects working with traumatized communities, we see a real methodological need to discuss *how to* care for these populations involved in the research process. While existing scholarship prepares us to guide students in using writing as a practice to reflect on and heal from traumatic experiences, little-to-no scholarship exists on rhetorical methods to prepare rhetorical researchers to work with and learn from individuals who have encountered trauma.

FEMINIST AND INDIGENOUS PERSPECTIVES

Our research orientation derives from our training in a program with faculty known for their work in cultural rhetorics and public rhetorics. These two areas influenced the scope of our dissertation

projects and our goals for working within traumatized communities. Drawing from our own personal experiences and motivations to revise narratives impacting these communities, we see our work as community-based activist scholarship. That is, we see our scholarship as not *only* listening to and representing marginalized voices and scenes of meaning-making, but as deconstructing current systems that fail communities so as to offer methods and possibilities to create more just, supportive systems. As Stuart Blythe (2012) suggests, the practice of reciprocity is paramount when working with communities to conduct disciplinary research (275). As such, we both attempt to build communities of practice and study their stories for activist purposes. Like Andrea Riley-Mukavetz (2014), who called for researchers to “speak with and alongside” (122) our participants, we work as scholar-allies and view our research practices and findings as outcomes that can promote a better sense of care for communities. This is the ultimate goal of *research as care*.

Our toolkit draws on two cultural rhetorics pillars: feminist and indigenous perspectives. While these theoretical frameworks inform working within traumatized communities, they are not focused solely on them. We engage in an effort to constellate these theoretical frames in a way that shapes our methodological toolkit specifically for doing this type of research. These approaches woven together remind us that: (1) research is embodied, acting on all bodies involved in research, the researcher/s and the participant/s; (2) stories are sacred and must be honored as such once transcribed, analyzed, and revised into “academic” scholarship; and (3) scholarship can serve as a model of alliance with those communities it represents. Such perspectives complement community literacy studies, which also seeks to create and utilize rhetorical scholarship to create social change.

Like community literacy scholars, we listen to silenced communities and work in relation with them so as to make their voices and needs heard. The need to account for embodied stories that comprise communities can be realized through attention to relationality. As Powell et al. (2014) put it, there is a tendency in rhetoric studies “to fetishize texts, to turn everything into a text that can be read, and to sometimes objectify those texts in a way that disconnects them from their relationship to humans and to place/space” (Act 1, Scene 2). We

draw on their concern about fetishizing texts, including stories, to establish a methodological need to connect with the people we write about and the motivations for writing about these stories. While these theoretical pillars inform our approach, it is in the actual *doing* of research that the application of these theories gets messy—especially when working with those who have endured trauma. In sharing our stories and reflections about our research and the complications involved in such negotiations—by airing the messiness, fluidity, and moments of disorientation we experienced in attempting to do so—we honor our participants by shifting the lens to focus on what we learned *from* working with them. Such reflection is our way of continuing to be accountable to our research participants. By taking ownership of our own missteps, and offering up our learnings from them, we hope to help other researchers more effectively navigate similar territory in their own work.

RESEARCH STORIES

We lead with two stories about our respective research projects to root our discussion in actual research experiences and to set the stage for our discussion on why we believe *research as care* is so pivotal to doing research with participants who have experienced trauma. In what follows, we share vignettes that convey the spectrum of experiences we later address in our discussion. John's story demonstrates the actual and perceived tensions that emerge in real time while conducting interviews and across the writing process. Maria's story shows the complex evolution of working with people and obtaining consent across the entirety of a research project.

John: Developing Relations

Prior to enrolling at Michigan State University for doctoral studies, I worked in federal law enforcement handling issues around human trafficking. It was a topic that I had been steeped in, and it made sense for me to reorient that work to an academic setting because of the potential for community engagement and activism. For me, engagement with the issue required direct involvement, and I sought out opportunities to build relations with local area organizations involved in developing public awareness and providing survivor support services, as well as legal representatives and law enforcement. The epicenter of engagement for me—because it brought all of

those elements together—was the Michigan Human Trafficking Task Force. I spent the first couple of years attending meetings and developing friendships. During that time, I built a solid working relationship with the organization's director and I reached out to her when it came time to initiate my project.

She helped me identify and initiate communications with potential research participants who self-identified as survivors of human trafficking and who had been involved with the organization in some way. My recruitment process was careful, slow, and methodical, spanning many months and encompassing a series of conversations with potential participants. It was during this time that I met Deb, who became one of my research participants. It took three months from the time I met her until the time she committed to enrolling in the study. That time was spent having multiple off-the record conversations through email, phone, and in-person. I did my best to address her questions, provide clarifications about the scope of the project, and— most importantly—tell her my own story. Deb, as someone whose trauma spanned decades and who suffered criminalization even as someone who had been trafficked, was deeply suspicious about working with me because of my law enforcement background. She needed to know more about how I had gone from the work of enforcing to the work of researching. This reticence reflected, I think, a concern on her part about my motivations. It was also something I was wholly unprepared for: her questions forced me to think about my own journey and why I had made the decisions I had. I realized, early on, that for me to truly develop a relationship with her, I would need to be wholly transparent. Telling my own story, which sometimes included telling the stories that I had “taken” in an interrogation setting, was emotionally fraught for me, but necessary to build trust. It was only when I was openly able to acknowledge the tensions in my own life and past as a law enforcement agent that she became willing to open up to me.

Gaining Consent

One of the first things I learned about Deb was that she possessed an incredible ability to communicate and that she seemed to enjoy talking the most about what her experiences had taught her. She knew we would likely cover some tough topics and painful moments from

her past and, as such, her primary request was that the project should *not* focus on her trauma but on the transformation that occurred in her life following those experiences. In her view, her participation was linked to an ongoing part of her evolving sense of comfort in telling her story to help others, something that she had been doing in various ways for the past few years but was still difficult. We agreed that the project, especially the write-up, would not focus on her traumatic experiences, but rather on her transformative moments. That was an important, perhaps essential, point to gaining consent to move forward to the interview stage.

The Interview

I'm in a conference room in the Learning Resource Center, sitting across from Deb, and we're engaged in some small talk while I work on setting everything up for our second interview. I am purposely not wearing a tie—they make me uncomfortable—instead opting for a cheery sweater vest that I hope presents a friendly and open appearance. I'm also wearing glasses, an overt attempt to look the part of the academic while also knowing that they help me appear a bit less rigid. The room is comfortable, with soft seats, mood lighting, and paintings on the wall. Deb comments, "I like these paintings—they're nice." I agree. I have with me the tools of my trade—a laptop, a recording device, some legal documentation. We're almost ready to get started, when Deb poses a question: "So, can you tell me again what you're trying to do with this?" She goes on to tell me that, after our last interview "something came over me a little bit. I was a little uncomfortable." I feel a shimmer of anxiety. *Uh-oh*, I think, *she's having second thoughts*. And then I catch myself...So what if she is? That's her right. These are her stories, not mine. I'm *not* just here to take her story and leave. I realize that she needs reassurance, but I'm also at a loss because no one has taught me how to handle this particular scenario. I talk again about my own story, how I became interested in how human trafficking narratives are framed, and that I am here to listen and to learn from someone who has lived through the experience. I reiterate the important elements of the process, the protections, and the consent form. "Deb," I say, "you can withdraw from this study if you want." She looks at me: "No, no. It sounds very interesting. I want to do this. I've got a lot to say." And she reaches out for the consent form and signs her name.

Every now and then she drops in an F-bomb, wondering if she can use that language—“isn’t this being recorded?” she asks, and laughs. She reflects on her experiences and tells me about survival and healing. She talks about what it means to not be believed, to not be listened to, to not be heard. And she shares with me the discomfort she still struggles with when it comes to her feelings, how every day remains a constant negotiation between past and present, between shame and pride, between pain and hope. She tells me what it means to be a mother and what it means to be a business owner. She also tells me about trauma, about being used, about life on the streets. She tells me about how others used her body for their own profit. We linger here on this, on the word “use.” I ask her about it, how she feels about telling her story, and what she thinks about how *it* will be used. “Each time you talk,” she tells me, “you have to go back to that place. It’s painful. It’s uncomfortable.” I ask about this discomfort. She responds, “I don’t know. I guess you never know, what you say, how people will take it and use it or anything.” This acknowledgement leads to a continual evaluation and reevaluation of what is being said and, more importantly, a questioning of how what is being said will be used by me and by others.

Relationality and Co-Participation

Our interview sessions were scheduled closely together, and after the first sessions Deb made it clear that she needed to pause, reflect, and recuperate. She simply needed more time to go through the process between interviews. That was a hard adjustment for me, as I was dealing with timelines, but I recognized that the adjustment was crucial if I was to maintain her participation. After our interview sessions were finally completed, I stayed in touch with Deb, making sure she received copies of the interview transcripts and initial chapter write-ups. She never requested any changes to the transcripts, observing that if she said it, she meant it.

The chapter write-ups were a slightly different story. Some of my initial writing had been constructed from a pre-designed outline, something I had in mind at the prospectus stage. Deb felt that it focused too heavily on my own preconceptions about what I had been hoping to do with the project—and she told me so, bluntly. So, I asked her what *she* thought her story was really all about and how she

thought it could be better represented. That led to some generative conversations that resulted in some major changes to the writing, including: (1) the inclusion of participant-selected standalone excerpts that stood as vignettes between chapters to give participants space within the dissertation to fully express their own voices and to highlight what they felt were the important parts of their stories; (2) trashing the outline, going back to re-listening to the interviews and rereading the transcripts, and building the dissertation from the bottom-up, rather than trying to fit participant stories into my preconceived ideas; and (3) adding in bits and pieces of my own story to be more transparent about my own motivations, concerns, and the inherent tensions involved in someone with my background and identity doing this type of work.

Confusion and Unease

It took a few months to make the necessary changes. I remember waking up one morning and checking my email, finding a message from Deb asking me what was going on with the project—why hadn't I been in touch? I immediately responded, apologizing for the delay and explaining what I was attempting to do. "It'll be another month or so, Deb," I wrote, "But you'll have a new draft to review soon." I could sense that she was growing impatient with the process and I realized that I needed to do a better job of keeping her in the loop. The next iteration was well-received, though she rightfully complained about how long it had taken. Her subsequent line of questioning was simple and straightforward: what was I going to do with this now that it was complete, how was I going to use it? She also wondered whether *she* could use it. The questions echoed those posed earlier, both during recruitment and the interviews. Even at this stage, the unease at how her stories might be used and circulated represented a primary concern. She particularly balked at the notion that I might tell parts of her story while on the job market, reminding me that her participation was linked to the idea that our work was activist in nature. I realized, well after the research itself had been completed, that I had done an inadequate job of addressing her confusion and unease, leaving her feeling vulnerable and, perhaps, without a sense of control over the application of her own story. This recognition made me aware of my own unease and left me wondering what else I should have done.

Maria: Developing Relations

I first met Meg in May of 2015. The two of us connected at a national infertility advocacy event, where I was interviewing individuals for an infertility oral history project. Interested in telling her story, Meg agreed to participate, and I learned about the years of diagnostic tests and a multitude of failed treatments she underwent to try and become pregnant. As her interview concluded, she shared how she and her partner were at a turning point. Nothing had worked to date, and they needed to decide if they would continue with one more round of treatment or embrace living “childfree.”

As she shared her story, I found myself connecting to Meg personally and shared with her my own personal struggle to embrace living childfree. Connecting over these shared experiences, we decided to stay in touch and began exchanging notes over email and social media. We became friends who confided in each other about the personal troubles of living with infertility. During this time, I was also in the process of designing my dissertation study, which focused on rhetorical representations of infertility. Meg’s story frequently came to mind as I created my dissertation prospectus—specifically, with respect to how her story countered typical representations of infertility. Curious if she would be willing to share how she negotiates her infertility identity against these more dominant infertility narratives, I emailed her asking if she would be willing to participate in my dissertation. She did not agree to participate right away.

Gaining Consent

Prior to agreeing, Meg requested that we have a brief a phone call. She told me that she did want to participate but wanted to know more about the project at large. On the phone, I explained how this was a project I was personally motivated by: I wanted to make the everyday challenges of being infertile more visible. It was with this larger goal, I told her, that I wanted to learn how others were engaging in forms of resistance by offering representations of infertility that countered typical infertility narratives. Her story, I believed, illustrated how counter-narratives of infertility frequently are not given as much attention, as they confront more standardized, culturally accepted views.

Sharing this over the phone, Meg explained that she wanted to participate but that we needed to be careful with who learned of her story and how it was told. Her openness to discuss her infertility was relatively new, and her decision to discuss her struggle to get pregnant was previously not well-received by some family members. Nonetheless, she said, she wanted to help. After all, we were friends. And she felt compelled to participate as she knew this work—and her story—may make space for other infertility narratives to more easily exist. I thanked her and assured her that throughout the research process I would try to ensure she felt protected. Feeling assured, we set a date for the dissertation interview.

The Interview

A few weeks later, Meg and I met on Skype and began our interview. During the two hours we talked, she recounted her diagnosis with infertility, when treatment failed, when friendships failed because of insensitivity to Meg's infertility, and how she used art as a method to make sense of an infertility narrative that seemed to counter those that emphasized "success." Before ending the call, I informed her that I would be sending the interview out for transcription and would then give her a copy of the transcript to correct or alter anything that she might feel was inaccurate. Later, I asked her to review the chapter of my dissertation that contained portions of her story, so as to involve her in the knowledge-making and consent process of the dissertation.

Relationality and Co-Participation

Weeks passed, but I eventually received Meg's transcript and sent it to her for review. After her initial review, she sent me a revised transcript clarifying portions of her story and clarifying moments during the interview that, upon reading now, she opted to slightly change. I thanked her for taking the time to review and informed her that I would be using the amended version of the transcript for my analysis.

After analyzing my transcriptions, I sent Meg an outlined "data" chapter containing a portion of her story. In the email, I asked her to review the information revealed, making sure she was okay with disclosing particular health information. A few days passed, and I heard from Meg. She informed me that since our interview, she and her partner had undergone additional testing, revealing that male

factor health conditions were now being considered the primary cause of infertility. This differed from the information shared in our Skype interview. Then, it was understood that female factors were the primary cause. Wanting her story to act as a counter to the many dominant infertility narratives that perpetuate assumptions that infertility is primarily a female issue, Meg made it clear that her story should highlight this male factor as the primary cause of their infertility. With his diagnosis revealed, I wrote back saying I would make this change and revise portions of her narrative to better represent the new information.

Confusion and Unease about Dissertation Circulation and Use

Months pass, and my dissertation is on hold. It is late summer, and I am preparing my dossier for the academic job market. Reviewing my materials, it occurs to me that my participants may want to understand how their stories will be shared in academic job materials and situated as having importance to the discipline of rhetoric and composition. Explaining how infertility connects to the field of rhetoric and composition was always a bit challenging for participants to wrap their heads around. Wanting to clarify this further, I email drafts of my dossier documents to each participant, informing them that these materials explain the importance of their participation to the discipline.

A day later I receive an email from Meg. She is deeply concerned and emphatically upset that I am sharing her story in my job market materials. She writes that she had no idea that her story would be used in this manner and feels betrayed. I write back panicky and extremely apologetic for eliciting such concern and anger. Taken aback by her response, I realize how participants may have no idea how their stories become circulated and shared on the job market. Frustrated at my inability to foresee such a disconnect, I send another email reminding Meg of our initial phone call, when I shared how participation in the project would ultimately include her story appearing in my dissertation. I then go on to outline the role of the dissertation in relation to the academic job market, explaining the need to demonstrate tenure-worthy scholarship via a dissertation, how her story is my “data,” and when interviewing for jobs hiring committees want to understand the potential implications of my

research. Given this, an abbreviated version of her story must be included in these materials. Pushing the “send” button, I cross my fingers hoping this explanation will relieve her concern.

A few hours later a reply from Meg arrives. Anxious, I hesitantly open and read the email. She writes that she did not fully understand the consequences of her participation. She notes that I should have done more to inform her of where and with whom her story would be circulated and that not doing so leaves her feeling as if I have betrayed our friendship. I am crushed. I feel like I have failed all of my methodological training.

Over the next few days, we exchange more emails. It is clear that if she could go back in time she would have never participated. She explains that over the past months, since being interviewed, she and her partner have decided to live childfree. Given this recent decision, she explains the difficulty of participating in the project. In particular, she tells me that her participation in this project is a continual disruption to her ability to find closure with infertility. Her email ends explaining to me that if we did not have a personal connection, she would have opted to pull out entirely. Instead, she tells me she wants to honor our friendship and agrees to let me use her story with a pseudonym. I write and extend my sincere thanks.

RESEARCH AS CARE: A FRAMEWORK REIMAGINING ACADEMIC USE

Reviewing our two stories, we see a recurring theme of stories and their “uses.” In particular, we call attention to how stories are used and situated in traditional academic research. By this, we mean that the way in which academic scholars talk about and write about issues like trauma is often rooted in otherness/othering. As a result, much of the language used, particularly when referring to those who have lived through traumatic experiences—is language of *use*. This, for Deb and Meg, was the lynchpin in the decision whether to continue their involvement. It is this language of use in the research paradigm that is so problematic.

While our research stories demonstrate how our participants struggled to understand the use of their stories, our stories also clarify

our failure as researchers to better prepare and predict moments in which we had to provide further explanation of use. In response to those unpredicted moments, we tried to find a path of balance: one that responded both to our accountability to participants as well as to the institution of academia. In this, we attempted to flesh out our responsibility to participant stories while also trying to acknowledge and adhere to institutional expectations. In retrospect, we believe these need not be necessarily mutually exclusive. Instead of *use*, we opt to acknowledge agency, emotion, humanity and re-imagine the “use” of trauma-related research within a *research as care* framework that meets the needs of participants and the needs of researchers while navigating institutional requirements.

Research as Care

As we conceive of it, the idea of research as care responds to concerns about “use” by embracing the idea of *shared ownership*. In *Research is Ceremony*, Shawn Wilson (2008), a Cree author and researcher, describes the role of researchers as that of mediators:

We are mediators in a growing relationship between the community and whatever it is that is being researched. And how we go about doing our work in that role is where we uphold relational accountability. We are accountable to ourselves, the community, our environment or cosmos as a whole, and also to the idea or topics that we are researching. We have all of these relationships that we need to uphold. (106)

Mediation necessarily implies collaboration and relationship, close listening, and responsiveness. The notion of shared ownership derives from the idea of researcher as mediator because the acceptance of knowledge as relational requires—in response to concerns about vulnerability and potential harm—a more deeply considered and enacted collaboration between researcher and participants. Therefore, the idea of researcher as mediator fundamentally shifts the paradigm from the traditional conception of research to *take/use*, to research as *creative collaboration* or co-creation.

Andrea Riley-Mukavetz (2014) situates Wilson’s discussion of mediation within the context of academic discourse generally and

the discipline of rhetoric and composition specifically. Recalling how the stories of her dissertation participants continue to impact her, she calls for practicing “there-ness,” a concept that underlines the centrality of both participant and researcher in the co-construction of knowledge. There-ness makes “visible the complexity of being the arms of the institution while working with and across cultures” (121) and hence is collaborative and responsible to the stories of participants. We draw on Riley-Mukavetz’s concept of “there-ness” as it practices *care* for participants by theorizing *with* participants the meanings of their experiences for greater intercultural knowledge. In our respective research projects, we both tried to follow a framework of *there-ness*, yet still struggled with the practical question of how to enact it. While some of this difficulty likely stems from the sensitivity of our participants’ stories, it also demonstrates the need for a clear methodological toolkit that incorporates concepts like mediation, there-ness, and shared ownership within a framework for researching trauma.

In what follows, we situate shared ownership within a research as care framework and offer five pillars to address tensions of the academic use of participant stories through the lens of relationality.

PILLARS OF SHARED OWNERSHIP

I. Mediating Academic “Use”

Despite the increased visibility of feminist and indigenous approaches “toward more reciprocal, collaborative, mutually beneficial research methods,” the reality is that community-based ethnographic research in rhetoric and composition—situated in and mediated by institutional expectations and the limited/limiting forms of academic writing—remains fraught with tension regarding not only how research is conducted, but *used* (Royster and Kirsch 2012, 34). Stuart Blythe (2012) offers a series of best practices to push back against approaches we believe are inappropriately justified as academic use. In his model, “researchers must attend to the needs and agenda of participants. Purposes, questions, methods, and results should be developed collaboratively, rather than by the researcher alone” (275). Blythe’s comments underscore the exigency for relationality—as Wilson and Riley-Mukavetz view it—to inform and guide community-oriented research. His methods apply to moments of negotiation,

with participants playing a clear role in defining outcomes in relation to research-based publications. In Blythe's view, researchers should "publish article-length works not so much to report results of research—those improvements or changes that many readers may expect—but to comment on issues related to research and social problems" (283). In this model of relationality, activist and community-engaged research almost always has *two* deliverables, one that is community-oriented and one that is academic-focused. This perspective is important, given the tendencies of academic publishing on participant stories and how publishing the stories of participants work to benefit the scholar and not always the community member. Lynne Davis's (2004) work reiterates such tensions, stating "telling stories is not innocent. Often, researchers reap not negative sanctions but professional rewards in the form of prizes, titles, promotions, accreditation as being an 'expert,' and other accolades" (17). Davis's work reminds us that while researchers may have good intentions in the sharing of stories, there is increased need and work to be done on behalf of participants to ensure that by going public with their stories. To be clear, as scholars working in communities, it is our responsibility to ensure that more good than harm is occurring when collecting, circulating, and publishing participant stories.

Building on the perspectives of these scholars, we contend that working with trauma requires an approach that explicitly pushes back at traditional expectations of academic use by deploying the lens of relationality to the researcher's methodological toolkit to open up use as a site of both negotiation and re-imagination. Relationality requires us, as researchers, to view ourselves not as "being *in* relationship with other people;" rather, "we *are* the relationships we hold and are a part of" (Wilson 2008, 80). In other words, because we *are* relationships rather than *in* relationships, we operate from a position that is less interested in *taking for use* (a violence that would harm both participant and researcher) than in finding the locus of what ultimately benefits the relationship itself. This moves the researcher beyond the definitional framework of the institution or academic field and situates research *as* relationship, thereby positioning both researcher and participant to open up "use" as a site of negotiation and re-imagination, collaborating, and theorizing in tandem to create meaning while also pushing back against traditional conceptions of academic use.

Our participants questioned how their stories would be used; even the consent forms they signed made explicit reference to the fact that their stories would be used at conferences, in publications, and elsewhere. By viewing research *as* relationship, any “use” must necessarily be negotiated within the context of the “beingness” and benefit to the relationship. Rather than solely considering how the project adds value to institutional knowledge, this approach to research instead focuses its inquiry on negotiating what it means to create and use knowledge within the relationship and, only then/after, on what it means to decide to extend that beyond the boundaries of the relationship. This negotiation, and the effort to situate the research as care, either happens or does not happen at the initiation of the research project in relation to a traumatized participant, i.e., the moment of “first contact” for recruitment. Whether it happens or not sets the tone for both how research is understood by participants *and* how it is conducted by the researcher(s).

Such a paradigm, viewing research *as* relational rather than researcher-participant *in* relationship, requires a re-imagination of what it means both to *do* and *use* research. This re-imagination, in turn, requires a stance of active mediation—in particular, mediating with respect to our own (i.e., the researcher’s) understanding of the academic research process itself. Under the traditional model, a research project requires specific questions that need resolution. It expects the researcher to predict not only the nature of researcher-participant relationships before they’re ever initiated, but also the ways in which participants will respond to or engage with research questions. In other words, academics are trained to predict the outcome of research; we assert that predicting *how to care* for participants should be paramount.

II. Responsivity to Re-Living Trauma

The stance of research as relationship necessarily makes space to halt the research process at moments when “re-living” trauma becomes too much. In respecting the relationship and in sharing ownership over the production of materials that result from that relationship, such an approach honors the idea that these stories are not lived in the past; rather they live on and in the body. Johnson et al. (2015) remind us that stories are embodied, and because of this, adjustments

need to be made for moments when the body becomes overwhelmed or fatigued or enters into a state of pain.

Thinking about embodiment reinforces the need to recognize the materiality of lived experiences. This necessitates focusing less on “words” and more on the underlying embodied humanity that is involved in storytelling, both our own and that of our participants. Language represents and yet never wholly captures embodiment, materiality, or event, so words cannot be the only focus when it comes to researching trauma. Yet, we cannot escape language: it arguably constructs a sense of reality. And we cannot escape embodiment; it is through the body that we construct language. Therefore, the practice of listening to bodies in the moment of storytelling becomes central because if the bodies are where the stories reside (*on* and *in*), then the bodies are also where the research and the there-ness of relationship manifests.

To re-live trauma is to be bombarded by a series of micro and macro decisions. For example, as an embodied aspect of identity, re-lived trauma must be claimed or the traumatized individual must “come out.” In our respective projects, few, if any, visible markers signified participant bodies as traumatized. Thus, when an individual who has lived through trauma is in an interview, they must, in that moment, quickly evaluate how best to respond to questions and convey their story. The response may vary depending upon interviewer, the scene/location of the interview, and other factors, such as the mood of the participant or the even the fatigue of retelling and re-living past traumatic experiences.

Our participants, at various times, felt the need to pause, withdraw, question the process, and express their discomfort. In John’s project, Deb explicitly asked for more time between interviews, realizing the discomfort they caused as well as the need for recuperation from the fatigue of telling stories about her trauma. This put the research timeline at risk, yet was essential to continuing the research at all. In Maria’s project, Meg made clear her misunderstanding of how, when, and where her story would be used. Her lack of familiarity with the academic research process led, unfortunately and unexpectedly, to additional stress. Centering on research as relationship requires responsiveness to these needs for the sake of the bodies involved. This

responsivity engages with Krista Ratcliffe's (1999) rhetorical listening, listening for pauses, and the articulation of concern. For example, in both of our research stories, our participants gave either pause (as in John's story) or spoke to us about concerns they had with sharing their story and making it public (as in Maria's story). Listening to the pauses as well as reflectively taking into account participants' anxiety about potential harm and risk is responsive to care, especially when working with individuals who have experienced trauma. Listening for these moments requires the cessation of research activities, pulling back to re-negotiate the needs of the bodies in relation. Simply put, the mediatory role of the researcher affords moments—whether brief or extended—to stop the process and check in with participants to determine, first, what their needs are and, second, whether the desire exists to continue the research relationship.

Julie Lindquist's (2012) "Time to Grow Them: Practicing Slow Research in a Fast Field" serves as a useful resource for rethinking our relationships when working with participants in trauma communities. Allowing participants time to think through their involvement and potential co-construction of the scholarship, as Lindquist notes, "is a long uneven process, and it develops within the context of carefully cultivated relationships of trust between researchers and participants" (649). The expectation for research is demonstrated *progress*. However, in working with trauma, progress is not always so clear cut and not always in the best interests of the participants, the researchers, or the project itself. The ways in which time-centric concerns can take over a project are serious matters. Those who have experienced trauma, physical or psychological, simply don't recount full stories in a perfect linear format. Reorienting scholarship towards models that embrace the slowing of the research process may allow for increased responsivity and care. While academia operates on institutional timelines (i.e., timeline to tenure, timeline for promotion), research as care asks scholars to make critical cases in promotional review materials about a slower-paced timeline as a purposeful and ethical methodology that engages in care for the greater community.

While the normative research model is deeply attentive to timelines, responsivity to the risks inherent to participants re-living trauma

requires an orientation that revalues time-centric research milestones. The notion of time, particularly as it relates to academic research, poses significant risks for research done in/around trauma. Indeed, in both of our projects we faced clear deadlines, grappled with the fear of “time running out,” and at various moments had to negotiate time in ways that unfairly burdened our participants. Even more importantly, rushing the process while participants needed to pause because of the pain and negotiation of re-living trauma presented unacceptable risks.

In the re-living of those moments, people who have experienced trauma sometimes need to stop, think, reflect, heal, and move on. Their stories exist in space, on/in bodies, and in memory; therefore, in the re-living of trauma, the trauma exists not so much at a point in time in the linear past but rather in an embodied space of experience and memory. Therefore, they have to negotiate competing temporal logics to organize events—the space of lived experience, the space of remembered experience within/on the body, and the unraveling of sequential time in the re-living of the trauma through telling. Consequently, we contend that trauma-related research requires patience and an orientation that is not only willing, but committed to rethinking the timeline.

III. Recognizing Participant Motivations

Research as care extends beyond bodies to consider the motivations of participants for agreeing to tell their stories in an academic research context. Sharing a story—any story, let alone one centered on lived trauma—is an inherently vulnerable act. In thinking about care, we believe it is essential to put the researcher’s orienting lines into conversation with participants’ orienting lines, guiding how listening, interpretation, response, and co-creation are enacted. Each of these intersections creates a complex constellating story matrix. Weaving together stories allows us to make new meanings by seeing our experiences and world in new ways. When we refer to putting orienting lines into conversation those of our participants, what we mean is that *shared ownership* necessarily must account for and be responsive to the multiplicity of participant motivations for sharing their stories, for making themselves vulnerable. In agreeing to participate in such research projects, participants don’t necessarily

need to tell their stories; they are under no obligation. And, frankly, they often have more to lose than gain by such sharing.

Across our respective projects, we learned that some participants simply want their voices to be heard, some want to extend a helping hand to others, some just want to express themselves out-loud, some seek to effectuate broader change or increase awareness about an issue, and others are curious about what academic research *is* and find personal value in being involved in it. By recognizing our connecting lines—the ways in which our stories connect with theirs and the ways in which trauma-related research creates spaces of increased vulnerability and potential harm—the idea of shared ownership enacts a stance of flexibility and caring in response to participant values and motivations.

With respect to the idea of shared ownership within this framework, researchers should meet participant expectations in the writing, conveyance, and “use” of their stories. It isn’t *just* about listening to their reasons; it is about applying their wishes to the project as a whole. Take Meg’s story. Meg wanted to share her story in Maria’s project for a variety of reasons. One, Maria and Meg had a friendship rooted in shared experiences of infertility. The two had formed a personal bond and because of their shared experiences, they noted an area of further study, infertility counter-narratives. Yet, as the research process evolved and Meg received additional information regarding her infertility, Meg felt it important to disclose particulars about her story (i.e., her husband being the main factor of IF) that added to the larger focus and aim of Maria’s research project. New negotiations had to take place and further complicated the control Meg felt over her own story.

Understanding how participant motivations can be developed out of friendships and shift throughout the research process, in part, situates the relevancy of Blythe’s call for a practice of reciprocity by looking to participants to play a clear role in defining research outcomes. While he advocates the creation of two research deliverables (one for the academy, one for the participant community), the reality is often more fluid and complex, requiring negotiation. Some participants may welcome the invitation to co-create or to collaboratively make

theory, while others may not tell stories for those reasons. The subsequent move of co-creation and collaborative making can often be “too much” for any of a number of reasons. So, a negotiation has to occur in such instances in how stories are represented when a participant does not want to participate beyond the telling.

IV. Collaborative Meaning-Making

In those instances when participant motivation *aligns* with co-creation, we recommend consistently approaching the project from a perspective of commitment to making meaning collaboratively. Granted, it is far easier to conduct an interview, transcribe it, code and interpret the “data,” and then write *about* it. From our vantage point, this “*use*” fits well within the traditional model of academic research conduct that we’re attempting to push against. Instead, we believe that each participant “creates frameworks in their language and on their terms” (Riley-Mukavetz 2014, 79). There must be an ongoing conversation involved about meaning and interpretation. Riley-Mukavetz represents, in our opinion, the best example of collaborative meaning-making within the rhetoric and composition field. Her orientation to and descriptions of collaboration are important ones, and her work serves as a foundation to our own thinking about collaborative meaning-making in the context of conducting research within traumatized communities. The application of this approach centers on the idea of theorizing and constructing ideas together, constellating stories—theirs and ours. Such emphasis helps us see the ways in which participants actively tell stories not only to theorize their own experiences, but also to theorize the world(s) they inhabit, particularly how they exist and are transformed by the act of storytelling.

Collaborative meaning-making isn’t just about the questions asked—or not asked—in an interview session; it is also about the ways in which the researcher writes the experience, inviting participant perspectives, ideas and input, and offering spaces for participant voices in the project write-up. This requires ongoing conversation with participants well after the “data” collection phase is completed. These considerations serve as the orienting lines for the research project as it moves from conceptualization to interviews to analysis to write-up to dissemination. In enacting shared ownership, the

researcher creates spaces for participants to voice their needs and requests—what, for example, do they view as important? What do they see as unimportant? What do they think should be excluded? How do they want their stories shared? For research to have any integrity, participants should wield substantial influence over what is emphasized and de-emphasized.

Take John's work with Deb, for example. Early on in the project she mentioned that "a lot of the time when I do tell my story, it's the bad stuff that everyone focuses on. But I like to talk about the recovery part of it. Only because that's the most important part." It would have been easy for John to focus his work on the horrors that Deb had been through—and she did share those stories with him, sometimes in quite explicit detail. But her comment—that she wished there would be less focus on the trauma and more focus on her personal transformation—provided a foundation for collaborative meaning-making across the project, guiding the decision-making process for what to emphasize, what to include, and, crucially, what to exclude from the write up. For Deb, her lived experiences of trauma and exploitation were not what she wanted the project to be about, asking that those details be left out in favor of a focus on healing, transformation, and her own community work. In considering this, John purposefully excluded the experiences of her trafficking experiences from any write-ups stemming from the interviews, re-orienting to engage in a shared process that aligned with participant expectations.

V. Accounting for Identity Evolution

Conducting research around trauma is hard work. Re-living trauma as stories are told is even harder. And, so, when doing this type of research, it is important to account for the fact that it involves individual transformation for both the participants and the researcher. Sharing stories, reading through transcripts, negotiating use, collaborative co-creation—each of these manifests in individuals in different ways. Some grow weary with fatigue; others find the process invigorating. In John's project, Deb vacillated between fatigue and invigoration, asking for pauses in the research process and, afterwards, negotiating the meaning of her involvement by taking a more proactive stance in her own work in supporting and mentoring others who had been through similar traumatic experiences. Throughout Maria's project,

Meg was in the process of coming to terms with her infertility. When she was first interviewed, Meg very much identified as infertile. Yet, as time passed and the reality sank in that pregnancy would not occur, Meg began to remove herself from the infertile community so as to embrace living childfree. We learn from our stories that the researcher must account for the shaping of identities throughout our interactions. Stated another way, it requires a stance of recognition that participation in research not only shapes the identity of the participant but also that of the researcher.

Throughout both of our projects, the identity evolution, level of engagement, and embodied impacts for participants varied. We experienced polarizing extremes of participant response. Some participants felt empowered by their participation, leveraging their involvement into their own individualized approaches to activism and advocacy. On the other end of the spectrum, some participants felt profound emotional fatigue, and simply let the process conclude without further engagement, in some instances severing the conversation at the project's conclusion. In between these extremes, participants found themselves at various times conflicted about their scope of involvement, leading them to push back and interrogate research approaches and motivations. No two people respond to trauma in precisely the same way, and responses to re-living that trauma through research can and do vary to the extreme. As researchers doing this work, we have to remain attentive to the individual needs of participants whose traumatic experiences and emotional responses are unpredictable and different. And because these are individuals who have endured trauma, we have to be willing to accept their individual reactions without questioning and provide support where we can, always furthering their wishes and respecting their position even if we might not fully understand.

This sort of individualized engagement across the spectrum of emotional ebb and flow and identity evolution also plays out for the researcher. As we listened to the stories our participants told, we slowly began to understand how they interacted, intersected, and constellated with our own. In some sense, too, they become part of our own becoming as researchers and as humans, not in the sense of academic ownership, but rather shared experience and shared

ownership. The telling and the listening are events that fold into our own stories in sometimes very personal ways. There is some discomfort in this recognition because in first coming to this work, we both desired to keep our lives separate from the stories of our participants. We both internally struggled with our own acquired and preconceived notions, the institutional expectations, and our dis/re-oriented understandings of story and self.

CONCLUSION

Our research projects inevitably concluded with defenses and “final” manuscripts forwarded to our graduate school for approval. Our lives and our work transitioned as we moved to different cities, started positions as faculty, and engaged in our individual processes of orienting to new contexts. But the fatigue associated with researching trauma and participant negotiation lingered. The space we each took after completing our dissertations was crucial in helping us think through where we had succeeded and where we had failed. More importantly, it allowed us to begin considering more deeply, without the limitations of time, what research as care might actually look like in rhetoric and composition. Given the complexity of trying to enact shared ownership in working with trauma participants, we hoped to begin developing a guiding framework while leveraging our own experiences to encourage conversation around the questions of what this type of research *is* and what it should or shouldn’t be like. As we write this essay, reflecting back, we realize that what we’re really talking about is a *state of mind*—an orientation to research—that informs *practice* as well as a set of practices.

A methodological toolkit that centers on shared ownership is necessarily fluid and flexing. It is messy at times and straightforward at others. But, by being adaptable, it allows for researchers to address the unpredictable, and thus acts as a more reflective and embodied act of “care.” We believe research as care transforms research from a mere recounting of stories and rhetorical analysis into a process that might otherwise be described as an “activity of hope” (Tuhiwai Smith 2013, 203). The individuals who agree to participate in this type of research—and the worlds they inhabit—are *real*, sometimes overlapping, and sometimes divergent. There is an impulse merely to read their words and to think about the implications of the

experiences that they describe. But it is important to remember that while *we think*, they continue to *live and deal with their lives*.

A *research as care* framework re-imagines this orientation and instead emphasizes researcher-participant interaction, relationship-building, role-definition, and participant agenda/needs from the moment of “first contact.” Re-imagining the research process and the methodological toolkit in this way shifts the lens from “answering tailored questions” or “getting desired results” to one that focuses on ethics, on initiating and sustaining moments of quality interaction with individual participants and participant communities, and that educates participants on the purposes and goals of academic theory, research, and jargon. This methodology also represents a better practice in searching for new meaning and knowledge. Rather than attempting to predict how participants will engage with the project, this orientation instead asks and honors—from first contact through the entirety of the project—how participants prefer to engage, provide input, and negotiate terms of use.

Stressing the nature of research as care from the beginning encourages the researcher to more carefully account for the ways in which he/she might enact a practice of care for participants while opening up opportunities for participants to articulate their needs, agenda, and stance of collaborative co-creation in relation to the project findings. The research as care approach, to a large extent, mitigates unpredicted moments of tension later in the process, while also re-situating the ownership of research as *shared*. By moving away from the predictive research model and towards a research as care model, the project necessarily becomes one of shared ownership, rooted both in researcher and participant negotiation, while mediating the traditional framework of academic use.

Notes

1. Our experiences were drawn from our recently completed dissertation projects.
2. As researchers embedded within these marginalized communities, we seek to work alongside them as allies making their stories more visible to necessary stakeholders.
3. We draw on Maureen Johnson et al.'s (2015) discussion of embodiment as feminist rhetoric to inform this claim.
4. Clark and Powell (2008) serve to guide our indigenous framework, particularly on the sacredness of stories. As researchers working with stories as data, we draw on indigenous scholarship to recognize the original purposes of these stories. In other words, such stories are normally not told for academic purposes but told for reasons that support needs in their communities.
5. We use Konrad's (2018) call to reimagine the effects of accessibility on labor as a model of how rhetorical scholarship can be operationalized in order to improve public lives.
6. We purposefully share stories about unpredicted interactions with our participants to highlight and frame the ways in which those disorienting learning moments led us to rethink/re-theorize the notion of "use."
7. In response to potential critiques about the language of "ownership," we are merely reflecting and responding to the realities of academic research. The economic system of academia necessarily means that research is owned; we cannot change this. But we can reorient our work towards an approach that values and makes visible steps toward shared ownership.
8. Sara Ahmed's (2006) *Queer Phenomenology: Orientations, Objects, Others* is a particularly helpful resource in thinking about

orientation to research and orientating research with participants. In her introduction to that book, Ahmed writes “orientation is a matter of how we reside in space” (1). If so, then we might consider research activity to require us to carefully think about how we and our participants inhabit/reside in the research space.

9. We came to these projects based on our respective individual experiences, our lives intersecting with the communities we worked with. Working around trauma can and does take its toll on the researchers. While it is beyond the scope of this essay to engage in a protracted discussion on secondary trauma and the ways in which working around trauma individually impacted us, we do acknowledge such questions as important, even essential.

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