

In-depth Presence, Rethinking the Other and Focusing on Empathy: A Re-Understanding of Nursing Ethnography Research

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Abstract: Nursing research in China is generally quantitative in nature and qualitative research is relatively rare, especially nursing research using ethnographic methods. Ethnographic methods have been widely used in nursing research abroad, and extended to various fields of nursing research. Many ethnographic research results have been produced in Taiwan, but there are only a handful of related studies in the Chinese mainland. Therefore, aiming at the problems existing in the research of nursing ethnography in China and combining with the related research of nursing ethnography abroad, three aspects of nursing ethnography research in China can be improved: from in-depth interviews to in-depth presence, from focusing on cross-cultural nursing of other nations to focusing on nursing practice of our own nation, and from invasive "care" to "empathetic care".

Keywords: Nursing anthropology, Ethnographic research, Empathy

1. Introduction

Ethnography is a combination of the Greek word "ethnos" and "graphic", which means "descriptive anthropology", and is a detailed and dynamic approach to the portrayal of people and their cultures [1]. Clifford Geertz, a famous anthropologist, summarized its spiritual essence as discovering "local knowledge", that is, recording the cultural system of ethics, values, world outlook and actions composed of observable and unobservable aspects of social life [2]. Since its birth, anthropology has developed significantly at both the theoretical and methodological levels, and its unique perspective and research methods have had a profound impact on many disciplines, giving rise to such subdisciplines as medical anthropology, sport anthropology, and food anthropology. In the 1870s, nursing was influenced by anthropology, and nursing research began to use ethnographic methods to explore nursing cultures and phenomena that are not suitable for quantitative research [3]. Nursing ethnography research has developed rapidly in foreign countries and achieved fruitful academic achievements, but it has developed slowly in China. In recent years, it still stays at the stage of introducing research methods, and some empirical studies need to be improved. The reason for this is the lack of in-depth understanding of nursing ethnography in domestic academia. For example, some studies have confused the interview method with ethnographic research, and are shackled by the research of "cross-cultural nursing", lacking a deeper understanding of "the other". In addition, how to understand the essential pursuit of "empathetic care" in nursing ethnography needs to be discussed in depth. Therefore, this paper will discuss the above issues.

2. In-depth Presence: In-depth Interviews Cannot Replace In-depth Presence

Field investigation is an important method of anthropological research, but anthropology did not conduct field research at its inception. Early anthropologists were more akin to biographers than researchers; they did not conduct field investigations, but rather wrote ethnographies based on the biographies of explorers and adventurers. Therefore, early anthropologists were also called "anthropologists in rocking chairs". At the end of the 19th century, anthropologists gradually walked out

of their studies and went to the fields for field research. Choosing a specific site for field investigation was a very important part of the process for anthropologists^[4]. When field investigation is mentioned, it is always associated with the British anthropologist Malinowski, who was not the pioneer of field investigation, but the leader of the scientific field investigation. His book *Navigator on the Western Pacific* is regarded as an important symbol of the birth of “scientific ethnography”. He carefully defined the time cycle and specific steps of field investigation and was recognized by anthropological colleagues. Since then, going out to the field and “presence” has become the basic principle of anthropological research.

“Presence” is a very important anthropological concept, which includes several meanings: first, it emphasizes the presence of the researcher, especially the need for ethnographic researchers to collect data by being present and observing; second, it highlights the significance of presence in action, thus indicating that anthropology is fundamentally a practice-oriented discipline, what Marcus calls “doing research”^[5]. In addition to the temporal dimension of the present, ethnographic presence refers to an interactive relationship between the ethnographer and the other, a process in which both parties shape each other through their respective practices (words, actions). Therefore, “presence” also reflects the true state of “communication and interaction” in the dimension of practice. Because what is aggregated in the presence is no longer some preexisting conceptual system or social structure characterized by practice. Rather, it is the process of transforming and reshaping each other’s identities through a series of actions such as asking, participating, assuming, and performing, in which a profound sense of questioning and a spirit of reflection is diffused, which is the true form of ethnographic research^[6]. Therefore, the “presence” of anthropological researchers is an important convention or criterion for ethnographic research. However, at present, many nursing ethnographic studies in China and abroad only use in-depth interviews or focus group interviews to obtain data and call them nursing ethnographic studies, which is obviously different from the in-depth and detailed examination of the research subjects pursued by anthropology. The process of “presence” is a process in which the researcher is fully engaged, not only in participant observation and in-depth interviews, but also in the perception of multiple paths such as smell, perception, and apprehension. Sometimes it is these “indescribable” feelings that are the true meaning of anthropological research.

Along with the development of the discipline of anthropology, ethnographic research methods have also gradually evolved. For example, “focused ethnography” is an improvement on traditional field investigation. According to Joan Miquel Verd, associate professor at the Institute of Labor Studies of the Autonomous University of Barcelona, Spain, focused ethnography is sometimes an alternative to other traditional ethnographic methods, and sometimes a complement to them. In traditional ethnographic methods, data are usually obtained through direct contact with the group being studied. Researchers conduct long-term field investigations and provide detailed and precise descriptions through interviews, participant observation, and literature analysis. Comparatively speaking, traditional ethnography pays more attention to making an overall judgment on the cultural values and common customs of a certain group; focused ethnography focuses on more explicit and concrete issues on research topics, such as communication behavior, feeding behavior, technology use, etc.^[7] With this guidance, some nursing scholars have conducted relevant studies. To overcome barriers in cross-cultural communication and nursing between Spanish nurses and Moroccan immigrant patients, Plaza Del Pino et al. used focused ethnography to conduct semi-structured interviews with 32 nurses from three public hospitals in southern Spain and analyzed the data to develop the concept of “boundaries”^[8]. In this study, the researchers mainly used the semi-structured interview method, without in-depth field observation of the subjects. Although this kind of research is qualified qualitative research, it is worth discussing whether the ethnography without field investigation is still ethnography.

In a qualitative study conducted by the author, the research team was divided into two categories: a traditional field investigation combining participant observation and in-depth interviews, and a focused ethnography research based on in-depth interviews. The results of the research showed that there were significant differences in the information obtained through these two research methods. The field data obtained by traditional ethnography is richer and more in-depth, includes the subjective experience of the researcher, and can obtain a lot of “unexpected” materials. The focused ethnography research team mainly obtained the data through the interview outline prepared in advance, which did not go deep into the field, resulting in a weak “story” and many “plot” breaks. Therefore, through this research, the research team found that there are significant differences between these two research methods.

Nursing ethnography is essentially a cultural study of nursing practice, and therefore the experience of culture cannot be separated from the specific context of nursing practice. If data are obtained only through in-depth interviews, many details of nursing practice interactions will be lost, and this is also

very different from the “thick description” of ethnographic writing.

Therefore, in order to gain a deeper understanding of the subject and the process of nursing practice, the researcher needs to be “present” and to gain information through first-hand experience and awareness. There are a number of cases in nursing ethnography in which the research data were obtained by in-depth presence. For example, Ens et al. conducted a nine-month ethnographic study of cardiac patients, physicians, and pharmacists in a study field of doctors’ offices, pharmacies, waiting rooms, and pharmacies to explore the influence of cultural factors on medication adherence in South Asian cardiac patients, and collected relevant cultural data through field observations and semi-structured interviews to better answer the research questions [9].

Most current nursing ethnographic research is conducted within a specific cultural unit for a limited period of time, usually a few weeks or months, and not on an annual basis as in social anthropology [10]. However, in order to gain a deeper understanding of the cultural experiences associated with nursing practice, in-depth “presence” is a criterion that must be emphasized. While the value of a focused ethnography based on in-depth interviews cannot be denied, we should also recognize the advantages of the in-depth “presence” of traditional field investigation. Many details of nursing practice can only be obtained through the presence of observation. Many cultural experiences cannot be relayed by the interviewees, but can only be experienced by the researcher, so in-depth presence is an important foundation for nursing ethnography.

3. Rethinking the Other: From Focusing on Other Nations to Focusing on Our Own Nation

Since its inception, anthropology has been more concerned with writing about exotic cultures, which is an important feature of anthropological research that focuses on “the other”, so early anthropologists chose those exotic, wilderness islands for their ethnographic research. This path also influenced nursing ethnography, so early nursing ethnography also focused on “cross-cultural nursing” research.

Cross-cultural nursing existed as early as Nightingale’s nursing of the Australian Aborigines [11]. Since then, nursing staff have continued to contribute to cross-cultural nursing efforts. Taking the United States as an example, at the beginning of the 20th century, nursing staff working in public health were confronted with how to respond to the problems posed by different views of health, illness, and life and death in the context of cultural diversity in the care of immigrant communities such as those of Italian and Russian descent, and also discovered the importance of cultural perspectives [12]. The first peak of nursing-anthropology collaboration began in World War II, when soldiers from different countries, regions, cultures, religions, and ethnicities were brought together for war purposes as a result of multinational force coalitions [13]. A large number of wounded soldiers from different cultural backgrounds are concentrated in field hospitals, which brings great challenges to nursing work. At this time, cross-cultural nursing is particularly important.

While there is nothing wrong with focusing on multiculturalism in nursing ethnographic studies, it would be slightly parochial to always focus on the understanding of heterogeneity. Many scholars have a certain “bias” against “ethnicity” in ethnographic research, assuming that it is a cultural understanding of a minority group. While this was true of early ethnographic studies, ethnography itself has evolved. This has led anthropological research to focus on the culture of the native people as well as the culture of the other people. Fei Xiaotong, a famous anthropologist in China, pioneered the study of autochthonous cultures by anthropologists. When he was studying for a doctorate in anthropology at the London School of Economics and Political Science, he returned to his hometown of Kaixiangong Village in Jiangsu Province to study the economic, social and cultural aspects of the local rural areas. His supervisor, the famous British anthropologist Malinowski, wrote in the preface of Fei Xiaotong’s book, *Peasant Life in China*, that this study was an important milestone in anthropological field investigation and theoretical development, pioneering the study of the culture of his own people by local anthropologists. Thus, anthropological research has to break through the narrow understanding of the research object.

In the case of nursing ethnography, there is also the problem of expanding research horizons. Although the field of “cross-cultural nursing” is a very important part of nursing anthropology, we should not overshadow the possibilities of other research fields, especially the examination of nursing practices of our own nation. This requires the study of nursing ethnography to take root in the national practice and make an in-depth study of all kinds of social relations and cultural phenomena in nursing practice. This means that we need to redefine “the other” or to expand the understanding of “the other” and find a new “the other”. Where is “the other” among our own people? In fact, patients, families, and even

physicians in current nursing practice are “the others” that nursing anthropology research needs to focus on. Therefore, for the same ethnic group, there is also “cross-cultural nursing”, and “we” also need to be understood. In the context of nursing, anthropology can understand patients, families, nurses, and doctors as groups with different cultural backgrounds and interpret them as follows: (1) different groups’ understanding and perceptions of the same thing, such as disease perceptions, health and care perceptions, etc. Anthropology tries to put itself in the position of different groups and explain the specific content and the logic of formation of different groups’ perceptions. (2) Patients exhibit deviant behaviors that do not conform to the “norm”, such as “abnormal” behaviors in terms of adherence and willingness to treat. Anthropology can analyze the logic behind such “abnormal” behaviors from the perspective of cultural diversity to provide more culturally appropriate care solutions to meet the diverse needs of patients [14].

In addition, there is a need to focus on “the other” in the space outside the hospital. Currently, China is promoting “big health values”. It is a systemic concept of health, including not only physical health, but also mental, physical, social, and environmental health, etc. It is a global concept that aims to focus on the whole process of life, including food, clothing, housing, transportation, birth, old age, sickness, and death [15]. In the “big health” model, individual health is realized under the joint action of healthcare workers, individuals, family members, and social environment. This requires that nursing practice is no longer confined to hospitals, but must also extend to the home and the community. This also places greater demands on nursing staff to acquire multidisciplinary knowledge in order to provide more effective and meaningful nursing to the object of nursing [16]. Therefore, in the context of “big health values”, nursing ethnography research can focus on a broader space and a richer research population.

4. Focusing on Empathy: From “Intrusive Care” to “Empathic Care”

In the 1960s, Dr. Made-Leininger, an expert in nursing, pointed out that care is the essence of nursing, and that recognizing the patient’s socio-cultural background and providing culturally appropriate care is the core of nursing, so “nursing is a kind of cross-cultural care of professional and discipline”, he was also nominated for the Nobel Prize for establishing a worldwide intercultural nursing association [17]. This paper argues that nursing ethnography should not only reflect the essence of nursing “care”, but also “empathy”. In other words, ethnographic nursing research should not only reflect the “care” of the researcher, but also “empathy” from the perspective of the other person.

Ethnographic research has different meanings at different levels. At the level of data collection, ethnography refers to research methods, so anthropological research methods are often called ethnographic field investigation; at the level of data analysis, ethnography refers to writing methods, i.e., producing ethnographic texts through “thick description” and using them as a basis to obtain “local knowledge” that can fully explain the logic of daily life at the research site; at the level of research philosophy, ethnographic research is more a kind of “empathy”, i.e. care for different ethnic groups and vulnerable groups. Therefore, for nursing ethnographic research, we not only need to conduct field research and write ethnographic texts, but also need to emphasize its “empathetic” character. This places a higher demand on ethnographic research. Although field research, holistic principles, and the study of heterogeneous cultures are all characteristics of anthropology, which is the core of ethnographic research? In this paper, we believe that the core of ethnographic research should be “empathy”, “empathetic thinking” and “empathetic care” for different ethnic groups, cultures and communities. Qualitative research itself emphasizes the “thematic” perspective, that is, to understand and perceive from the perspective of the research object. However, anthropology focuses more on empathy, which is inherently consistent with nursing care for vulnerable groups, so this is the foundation that nursing ethnography research should be advocated and practiced.

Although many nursing ethnographic studies have conducted field investigations and written detailed ethnographic texts, they are still not true ethnographic studies if they neglect to pursue the “conceptual” level. Therefore, nursing ethnography should pay more attention to the disadvantaged groups that deserve our attention. For example, in Taiwan, Liu Xinyi used an ethnographic research method to analyze the care work of volunteers of the Home Care Association for the Tao elderly in Orchid Island from the perspective of the care relationship, and to explore the current situation of health care and care taboos of the Tao elderly, which laid the foundation for the implementation of cross-cultural care [18]. Chen Ni et al. used ethnographic research methods to study the shout behavior of dementia inpatients and uncovered the meanings behind of shout behavior of dementia inpatients, which provided a reference basis for healthcare workers to effectively respond to these shout behaviors [19]. Patients from different cultural backgrounds have different understandings of disease and health, different sensitivities, and their own appropriate care styles. Some behaviors of patients which seem to be incomprehensible and divorced

from medical logic have their own rationality under their own cultural background. Anthropology can help to understand the cultural metaphors associated with certain serious diseases, thus eliminating the negative effects on their detection, transmission and even treatment, and achieving better nursing outcomes [20]. In nursing ethnographic research, empathic care is about exploring how patients themselves think about, perceive, and understand illness from the patient's perspective. Patients often have their own interpretation of the disease, which is reflected in how they view the cause of the disease, how they treat the effects of the disease, and thus how they cooperate with nursing. Understanding patients' view of illness and the way they perceive the world is critical to nursing practice [14].

Therefore, the best state of nursing ethnography is not only caring, but also "empathy". The difference between caring and empathy is that caring is about guiding the other person to release their true self, rather than becoming a healer. Caring can sometimes have an "intrusive mindset", thinking and caring more from the researcher's perspective. But in fact, both anthropology and nursing need to deal with many vulnerable groups, for whom we need empathy first and care second. Therefore, for ethnographic nursing research, it is not only "research", but also "action" and "healing".

5. Conclusions

Nursing ethnography is more widely used abroad and has been extended to all fields of nursing research, and there are many research results on nursing ethnography in Taiwan, but there are only a few related research reports in the Chinese mainland [14]. Nursing ethnographic research in China is still in its infancy, which requires us to rethink the application of ethnographic methods in nursing research. In view of the current problems existing in the study of nursing ethnography in China, this paper believes that the study of nursing ethnography can be re-understood from three dimensions: "in-depth presence", "rethinking the other" and "focusing on empathy".

"In-depth presence" is a tradition in anthropological research, and it is also an adult ceremony for training anthropologists. Usually, anthropologists need to conduct field research at field sites for about a year in order to be able to immerse themselves in the field so that they can empathize. The author also used two methods of ethnographic investigation and in-depth interviews in nursing research, and deeply felt the difference between these two methods. Although the required information can be obtained through in-depth interviews, there is less sense of substitution. If the "first-hand information" is obtained through field investigation, then the "second-hand information" is obtained through in-depth interviews. However, for cultural research, those details that are left out need to be paid attention to. Therefore, "presence" to perceive should be an important principle of nursing research, and although we do not need to emphasize a year or even a longer field investigation, even a short period of "presence" can lead to a deeper understanding than a single "interview".

"Rethinking the other" is of great value for expanding the study of nursing ethnography, and our understanding of "the other" needs to change traditional thinking. It is not only between ethnic groups that "the other" exists. In fact, there are "the other" everywhere in the real world, and there is "the other" and "cross-cultural understanding" between any two people. Especially for nurses, patients and their families, they are often at different levels of understanding of diseases, which determines that they will have completely different understandings of the same problem. Therefore, this requires the researcher to understand the patients and their families as "the other". In fact, this understanding is no less difficult than the understanding of different ethnic cultural groups. When we redefine "the other", many studies around nursing practice can be studied ethnographically, which will bring different perspectives to nursing research.

"Empathy" is the essence of nursing ethnography. This paper argues that nursing ethnographic research should emphasize not only the external forms such as field research and thick description, but also the core elements such as empathic care, which is in line with the theoretical and practical demands of the nursing discipline. Therefore, the focus on empathic care in nursing ethnography is not only a goal to be pursued in academic research, but also a support for the cultivation of nurses' professional concept. The common concern of anthropology and nursing for minority groups and vulnerable groups makes the two disciplines more intrinsically linked, and nursing ethnography is the intersection between the two. Therefore, nursing ethnography can promote the development of nursing theory and practice by "focusing on empathy".

At present, China is implementing the Health China Strategy, which requires the provision of comprehensive and life-cycle health services for the people. "Big health values" has put forward higher requirements for both medicine and nursing, and humanistic nursing and whole-person nursing are the

development direction and goal^[14]. And the research perspective of ethnography can not only provide an in-depth understanding of nursing practice, but also has important practical significance for cultivating nurses with more empathic characteristics.

References

- [1] Chen Xiangming. *Qualitative Research in Social Sciences [M]*. Beijing Education Science Press, 2000: 25-28, 352-353.
- [2] Geertz, C. *Local Knowledge [M]*. (Wang Hanglong & Zhang Jiaxuan, Trans.). Central Compilation & Translation Press, 2004: 223.
- [3] Li Zheng, Liu Yu. *Research Methods in Nursing [M]*. Beijing: People's Medical Publishing House, 2012: 312-314.
- [4] Niu Yaohong. *Clue ethnography: A New Perspective of Internet Communication Research [J]*. *Journalism and Mass Communication*, 2021(04): 62-72.
- [5] Marcus G E. *Ethnography in/of the World System: The Emergence of Multi-Sited Ethnography [J]*. *Annual Review of Anthropology*, 1995, 24: 95-117.
- [6] Liu Heng. *Reshaping the Space of Problems: the Ontological Turn of Anthropology and Ethnographic Present. Thinking*, 2021, 47(03): 19-34.
- [7] Chen Yutong. *Optimizing focused ethnographic research methods [N]*. *China Social Science Journal*, 2021.
- [8] Pino F, Soriano E, Higginbottom G M. *Sociocultural and linguistic boundaries influencing intercultural communication between nurses and Moroccan patients in southern Spain: a focused ethnography [J]*. *BMC Nursing*, 2013, 12(1): 1-8.
- [9] Ens T, Seneviratne C, Jones C, et al. *Factors influencing South Asian Cardiac Patients' Medication Adherence: An Ethnographic Study [J]*. *Canadian Journal of Cardiology*, 2013, 29(10): S414-S414.
- [10] Chen Ni, Zhang Caihua. *Ethnographic Research Methods and Their Application in Nursing [J]*. *Chinese Journal of Modern Nursing*, 2012, 18(35): 4338-4340.
- [11] Powers B A. *Cross-Cultural Nursing: Anthropological Approaches to Nursing Research*. Janice M. Morse [J]. *Medical Anthropology Quarterly*, 1991, 5(4): 412-413.
- [12] Cheng Yu, Hu Xinyu. *Uses of Anthropology in Nursing [J]*. *Journal of Nursing Science*, 2020, 35(03): 90-93.
- [13] Dougherty M C, Tripp-Reimer T. *The Interface of Nursing and Anthropology [J]*. *Annual Review of Anthropology*, 1985, 14(1): 219-241.
- [14] Cheng Yu, Gong Ni, Zhang Meifen. *Application of anthropology in nursing and related considerations [J]*. *Chinese Journal of Nursing*, 2019, 54(08): 1276-1280.
- [15] Yan Xijun, Wu Yifeng, Yan Kaijing, Zhu Haobin, Shan Shujian. *On the Big Health and Big Health Values [J]*. *Medicine & Philosophy*, 2017, 38(03): 9-12.
- [16] Cheng Yu, Hu Xinyu. *Uses of anthropology in nursing [J]*. *Journal of Nursing Science*, 2020, 35(03): 90-93.
- [17] Fan Jiali, Kong Yue, Yin Tingting, Cheng Yuhong. *Research progress on Leininger cross-cultural care [J]*. *Chinese Nursing Research*, 2015, 29(12) 1409-1411.
- [18] Liu Xinyi. *The Construction of Elderly Care Relationships and Social Boundaries among the Tao (Yami) People in Orchid Island: An Ethnographic Study of Nursing Anthropology [D]*. Hualien: Institute of Anthropology, Tzu Chi University, 2005.
- [19] Chen Ni, Cheng Yun, Hu Sanlian. *Ethnographic study on meaning behind of shout behavior of dementia inpatients [J]*. *Chinese Nursing Research*, 2013, 27(32): 3610-3614.
- [20] Tan Jiping, Zang Yuli, Si Min. *Ethnography and its application in nursing research at home and abroad [J]*. *Journal of Nursing Science*, 2015, 30(17): 106-109.