

"Let's Do More Theoretical Work ..."

Janice Morse in Conversation With César A. Cisneros-Puebla

Key words: mixed methods, grounded theory, concept analysis, suffering, comforting, transcultural analysis **Abstract**: In this interview, MORSE traces her development as a qualitative researcher from the early stage of her quantitative Master's thesis. Her interest in mixed methods is longstanding. Formed through her background in anthropology, MORSE appears as an icon when she talks about analyzing behavior—this work resembles that of GOFFMAN. She is very serious and critical when thinking about the future of mixed-methods. Her approach to think about theoretical cohesion and theoretical drive can be very attractive to researchers involved in this kind of work. Also her vision of mixed methods can be polemical. She describes her work on suffering and comfort, and the methodological impact of her work on concept analysis.

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About the Interview

This interview was two hours overall and was conducted in two different locations. The first part was conducted in January 2004 after a marvelous dinner prepared for a few friends in MORSE's home in Edmonton, Canada, and the second in March, following the First Brazilian International Conference on Qualitative Research. Both sessions were audio taped, and César CISNEROS transcribed the conversation. Janice MORSE read, offered suggestions, and consulted on the editing. [1]

About Janice MORSE

Janice MORSE is a central figure in qualitative methodology in North America. She founded the International Institute for Qualitative Methodology at the University of Alberta in 1998 (<u>http://www.ualberta.ca/~iiqm/</u>), served as Director until 2004, and is presently Scientific Director. She is a very well known academic leader in qualitative research and is the founding editor of the journal *Qualitative Health Research* (Sage). In 2002 she created the online *International Journal of* *Qualitative Methods*, which is available without cost and is published quarterly in as "many languages as possible" (<u>http://www.ualberta.ca/~ijqm/</u>). Among her most important book publications are:

- *Nursing research: The application of qualitative approaches* (Chapman & Hall, 1985/1996) with Peggy FIELD
- The illness experience: Dimensions of suffering (Sage, 1991)
- Qualitative health research (Sage, 1992); with Joy JOHNSON
- Qualitative nursing research: A contemporary dialogue (Aspen, 1989/Sage 1991)
- Critical issues in qualitative research methods (Sage, 1994)
- Completing a qualitative project: Details and dialogue (Sage, 1997)
- The nature of evidence in qualitative inquiry (Sage, 2001); with Janice SWANSON and Anton KUZEL
- Readme first: A user's guide to qualitative analysis (Sage 2002); with Lyn RICHARDS (see also the complete <u>list of publication</u>) [2]

1. As a Student: From Penn State to Fiji

CISNEROS: Please, tell me the story about becoming a qualitative researcher. [3]

MORSE: I was a Master's student at Pennsylvania State University writing a thesis about culture shock. But you have to understand that Penn State is a very quantitative school, and this project was amazingly quantitative. I got it into my head in 1978, that when people moved from one culture to another and they became ill with the flu or colds, that this was a stress-related illness due to culture shock, rather than illness due to exposure to new viruses. And SELYE's theory of stress seemed to fit with this idea—Now this is going to be a long story. [4]

So I planned this wonderful master thesis. Penn State is a very large school and has a lot of foreign graduate students arriving in the fall of each year, so I intended to measure culture shock on arrival, and every month for six months, I took several physiological measures of stress (blood cortisol and cholesterol). I also measured stress psychologically with an anxiety scale. Finally, I asked them to keep a diary of every illness and gave them a health examination every month. [5]

Now, in order to do this, I first had to spend all summer developing a Likert culture shock scale. George GUTHRIE helped me, but it was a stressful task because I did not know really what I was doing. But I muddled through. Then, my thesis committee got into the act, insisting that I maximize the stressor. They set extraordinary criteria for subject selection—they wanted foreign students with English as their second language, who were alone and without a support system, and, they said, we only want males because the menstruation cycle will interfere with your physiological measures. And, they said, your subjects will have to be newly arrived in the US—within two weeks of your first data collection. [6]

Now all of these criteria were a lot of ideal nonsense—and I knew it, because I had moved enough to know that culture shock occurred with all international moves. But I didn't argue, unfortunately. [7]

That fall there were 900 male graduate students arriving on campus. The first thing that I found out was that all of those who fit my single and English-as-a second-language criteria had spent the summer in language school in the United States. So the two week arrival period disqualified almost everybody, but eventually I found six subjects. Amazingly, I did my study. What I learned was that the experience of culture shock was really a qualitative question, that should have been recorded using interviews rather than measured using a scale. But the physiological and psychological results were very interesting—and by about month 2, when the stress was maximal, they all got sick! [8]

I then enrolled in the University of Utah to do a doctorate in Nursing, and in that program they taught a lot of qualitative methods. At the same time I was enrolled in the Department of Anthropology, and they, of course, were also very qualitatively inclined. [9]

CISNEROS: What was it about the University of Utah and its doctoral program in nursing that led you there? Also, what led you to the anthropology department? [10]

MORSE: Madeleine LEININGER was there. I was enrolled in Nursing and Anthropology at the same time, and from that came another Master's thesis in Anthropology (which was quantitative), and two doctoral dissertations. The Nursing dissertation was mostly qualitative and little bit of quantitative, and the one in Anthropology was also mixed-method design—quantitative, with a little bit of qualitative—a path analysis and an ethnography. [11]

CISNEROS: At around this time didn't you publish an article about the triangulation process? Wasn't it one of the earliest articles on this matter? [12]

MORSE: No, I published first on mixed-methods ten years later in 1991 (MORSE, 1991). That article was one of the earliest on mixed-method design, although, of course, anthropologists have used mixed-method designs for a long time. [13]

CISNEROS: But in those days you were becoming more interested in ethnographic research? [14]

MORSE: Yes, I used ethnography because I was working on my dissertations in Fiji. After I finished my dissertations, I went to the University of Alberta because they needed somebody to teach qualitative methods. I designed an introductory course on grounded theory, ethnography, and other methods. [15]

CISNEROS: If we can go back to your early motivation to do qualitative analysis, what can you recall from your own experience dealing with data? [16]

MORSE: I will tell you about my nursing doctoral dissertation. I was really interested in looking at cross-cultural behavioral responses to pain, using childbirth as the pain stimulus. I wanted to compare the pain responses of the Fijian Indian and the Fijian birthing mothers. Now my proposal was stunning in its naiveté. I planned to do interviews when the mothers who where in early labor, and to document the course of labor and pain response and conduct behavioral observations in the delivery room. To record parturition behavior, I developed an ethological behavioral scoring checklist. To measure pain, I acquired a portable pulse transit time (PTT) machine. I planned to record the vocalizations of mothers during labor. It sounds great, but in reality, it was total nonsense. It did not work, and data were not interpretable. At the same time, I was interviewing traditional birth attendants and once I understood the cultural context of childbirth in each cultural group, it was that data that provided the foundation for understanding the behavior of these woman during childbirth. The Fijian Indian women vocalized, were restless, did not obey the instructions of nurses, and were terrified during childbirth. The Fijian women were silent, stoic and lay guietly. So I was simply lucky that these two groups were so different! Mid-study, once I realized what was going on I discarded all of the physiological measurements and behavioral checklists that were virtually uninterpretable. I discarded my PTT measures. I found that my recordings of the vocalizations, the sounds of labor, were mostly useless, as even screaming was drowned out with the noisy air conditioner, or when it was raining, which made a dreadful din on the tin roof. [17]

I was building my work on ZBOROWSKI (1969, 1972) who noted that pain behaviors were consistent within a cultural group and varied between cultures. I realized that the Fijian Indian women were culturally ignorant about the facts of childbirth—they did not know, for instance, how the baby was going to get out, much to the astonishment of the nursing and medical staff. Now I knew why they were behaving differently in labor. But I also recognized that each group evaluated childbirth and the amount of pain associated with childbirth differently. I remembered THURSTONE's paired comparison techniques and developed a scale very quickly of nine pain stimuli, comparing them in all possible combinations, to see how childbirth ranked. We gave this guestionnaire to everybody, to both cultural groups, including males, and females who had not been pregnant, because I was interested in *how painful* they thought childbirth was. It was very significant that each culture rated or evaluated or attributed the pain of childbirth very differently. While ZBOROWSKI noted that pain behavior is culturally learned, this research showed that each culture rated the amount of pain differently, so that how painful things were considered to be is also culturally transmitted. But importantly, you can see I was respecting quantitative measures when I needed them, as with the paired comparison scale, but only using these quantitative measures when I needed them, extending from a foundation of qualitative stuff. [18]

CISNEROS: Can you tell me more about your process of distinguishing the behavior from the experiential data in your transcultural analysis? [19]

MORSE: It was embedded historically in the interviews with the traditional birth attendants and that finding is not new. I spent a lot of time interviewing the traditional birth attendants exploring the context of birth, rather than just doing observations at the hospital. For example, Fijians were very quiet, because in the traditional setting the men sit outside the birthing hut, and they can hear but not see and usually do not participate in the birth. Obviously the women tried to coerce or teach the parturient mother to be silent so that the sounds of pain do not distress the males. If the mother does cry out, the women told me that she was teased mercilessly, and she was never allowed to forget that she cried out, so there are penalties for verbally expressing pain. On the other hand, the Fijian Indian women are very noisy and cried out for their mothers, but they traditionally gave birth with only the *dai* (the traditional birth attendant) present. Because childbirth was considered unclean and a time of defilement, their mothers, aunts and husbands were not present, and, compared with the Fijian mothers, they were not supported. [20]

CISNEROS: Did you follow your intuition to get a sense of the experiences and voices of your participants to analyze them from cultural perspectives? [21]

MORSE: It is much easier if you can compare two cultures. [22]

CISNEROS: Did the work of Margaret MEAD play a role in your own work? [23]

MORSE: For the Nursing, (childbirth) dissertation, yes. The Anthropology dissertation was about infant feeding. It was on the heels of the Nestlé scandal; that is, the fostering of bottle feeding in third world cultures in the late 1970s. This dissertation was comparing the differences between breast- and bottle-feeding in the six week post-partum period and was primarily a quantitative proposal, with some ethnography. [24]

CISNEROS: Could you describe what your theoretical interests were in those days? What theoreticians, theoretical work intrigued at the time? [25]

MORSE: No Because I was really into comparative health studies and mixing it with concerns related to nursing. [26]

2. Conversation About MORSE's Contribution

CISNEROS: What do you see as being your main contribution to the field of qualitative research? [27]

MORSE: Now? [28]

CISNEROS: Now! Yes only a little bit ... I know that is a difficult question to answer about yourself, because such evaluations usually come from other people. [29]

MORSE: Yes! Do you want to know what the most important thing is? [30]

CISNEROS: Yes! Because I know that you have been doing a lot. [31]

MORSE: There are two things in the research results: One would be the development of the concepts of suffering (MORSE & JOHNSON 1991; MORSE & CARTER 1996; MORSE 2002) and comforting (MORSE 2000a) and *compathy* (MITCHAM, MORSE, & DER STEEN 1998), and the second one would be my work on patients' falls (MORSE 1997), which is primarily quantitative work. With Robert MORSE I developed an instrument to predict patients' risk of falling. But in qualitative methods, I don't know. I think it is going to be in the area of developing qualitatively derived theory, but this work is not finished yet—I am still working on it. [32]

CISNEROS: How long have you been working on this? [33]

MORSE: On developing method for developing qualitatively derived theory? Probably 8 years. [34]

CISNEROS: Can you tell me a little more about this process. How did your interest in this work evolve? [35]

MORSE: Basically I believe the most important contribution qualitative inquiry can make is the development of theory. Most textbooks stop with methods of analysis and do not offer much beyond the development of categories and themes—with the exception of grounded theory. We realized that although there are ways to evaluate quantitative theories there were few or no ways to evaluate qualitative theories; worse still, no one could tell us structurally when we had a concept—what the structure should be, what a good concept is, and how one moves from developed concepts to develop a theory. [36]

CISNEROS: Will you be continuing your work and developing your ideas about this process? [37]

MORSE: Yes! [38]

CISNEROS: What do you think the future holds for this work? [39]

MORSE: I think once these techniques are proven enough to be published in a book, they would be very useful to other researchers. Qualitative researchers stop the development of their work too soon—they should not finish until they have done more theoretical work. [40]

CISNEROS: How do you think researchers will be able to use your work in this area? [41]

MORSE: Our techniques for developing concepts and qualitatively derived theory will become an outcome in itself. What I am doing now is linking concepts laterally and horizontally—I call it theoretical cohesion—to develop a theory that is much broader in scope than a single project. The theory will contain many

concepts and models, and can be quite powerful. But there is no reason why this method should be confined to health sciences—it could be used in sociology, or education or business. [42]

3. Methodology and Human Behavior

CISNEROS: Do you remember us reading in the Italian journal *Salute e societá* (MORI, 2003) an analysis of your work and you as being in the mold of GOFFMAN? [43]

MORSE: Yes. Other people said that too but it is because I am interested in behavior. [44]

CISNEROS: I am quite interested to know more from you about this because as a sociologist I recognize the need for sociology to improve its methods. [45]

MORSE: I know a lot of people do research on suffering and try to do this research by having people who are in the midst of suffering think and talk about their suffering. I know from my research that when they are suffering intensely, they are enduring and they are suppressing their emotions But it makes it impossible to suppress the emotions of suffering and to reflect and describe suffering at the same time. Thus enduring itself mutes the participant, and emotional suffering overwhelms the participant, so that the interviews are of poor quality. These participants cannot reflect, so my research has included a lot of observations, e.g., videotapes of people who are suffering, so that I may describe their behaviors. I also use interviews with the relatives of those who are suffering, in addition to interviews with those suffering. I have more data sets—examples of different contexts of suffering— than other researchers who are studying suffering. [46]

CISNEROS: Can you define what suffering behavior is? At the conceptual level, what does suffering behavior mean? [47]

MORSE: Suffering is reflected in behavior. Obviously it is reflected in facial expressions, it is reflected in the way people speak, and it is reflected in what people simply do. When we are interviewing people about the occurrence of some stressful event, while describing their emotions they mimic those emotions they were experiencing at that time. In class, when I ask someone who is married to tell us how she first met her husband to be, her face lights up! So we can get a glimpse of the feelings she felt at that time. I call this emotional re-enactment and it this that adds credence to the validity of our research. So in addition to the interview data, I can code and describe concurrent behaviors within a context. [48]

CISNEROS: What about to keep the concept of behavior? Behavior in the way of behaviorism, you do not think behavior is a positivistic concept? [49]

MORSE: It can be—it depends how the researcher decides to approach it. Remember research methods are only tools to use to help you get the type of data, and the insights/information that you need. And if conversation analysis provides you the kind of data to give you the insights, you need to use it; if unstructured interviews provide you the interpretive data for the type of results needed, go for it! If you need to code behaviors to conduct analysis at the micro-analytic level and then eventually put that data through the computer then do it! You do whatever you need to do to get your answer. [50]

CISNEROS: If you are thinking that concept development is your major goal, could you describe other concepts that are emerging to complement or supplement your behavioral analysis work? [51]

MORSE: I coined the concept that I called *compathy*, which is the physical equivalent to empathy. *Compathy* is the sharing of pain, and this concept has a wonderful manifestation of behavioral patterns associated with it, as well as very rich interview data. It probably has physiological measurements associated with it but I haven't identified these yet. [52]

4. Mixed Methods and "Theoretical Drive"

CISNEROS: In what ways do you see multimethods evolving? How will qualitative researchers deal with such diversity? [53]

MORSE: I think it is going to get into a terrible mess but it will sort itself out in the end. [54]

CISNEROS: What kind of "terrible mess" are you talking about? [55]

MORSE: I think people lack analytic skills to handle both qualitative and quantitative data. I don't think there has been enough work done on theory development, I think that not enough people even want to do theoretical development and are content with their descriptions. I think the pressure to do mixed methods, in order to get funding, overwhelms or overrides the goals of qualitative inquiry. I think the funding agencies say they fund qualitative inquiry, meaning that they really do fund mixed methods. This still places qualitative inquiry in an inferior position. [56]

CISNEROS: What are the empirical implications of using mixed methods? I mean, facing the complexity of the actual world every one of us for sure will be more in need of mixed- and multiple-methods. [57]

MORSE: I do not think we all have to give into these pressures. I feel I use multimethods if is required in the design, not simply to please funding agencies. [58]

CISNEROS: Because we need this kind of multi-method research to produce knowledge? [59]

MORSE: Nonsense. Fiddlesticks. Basic knowledge also comes from doing qualitative research alone. [60]

CISNEROS: But qualitative research needs multi-methods? [61]

MORSE: No, it does not need multi-methods; the funding agencies need multimethods and some questions need multi-methods. [62]

CISNEROS: Using multi-methods is not a question for qualitative research multi-methods is in your view an answer for the agencies? [63]

MORSE: No. You are asking me loaded questions. I did not say either of those two things! I think the biggest advances can come from qualitatively-derived knowledge. Some problems lend themselves to some mixed-method designs. Why would funding agencies still fund qualitative research if it could not stand alone? [64]

CISNEROS: What is your view about the contemporary discussion on multimethods? [65]

MORSE: I do not think that those who write about multiple-methods understand the concept of *theoretical drive*; I think the literature lacks the specific instructions for how, when, where and why one should transpose qualitative data to numeric data, and it lacks good guidelines for synthesizing the findings. [66]

5. Speaking About Concept Analysis, Suffering and Future Directions

CISNEROS: I know you have been working on concept analysis in the last years (MORSE 1995, 2000b), so what is your view about this specific field of qualitative inquiry? [67]

MORSE: I think we have to do a lot of work here. I think it is one of the most essential areas of qualitative inquiry in need of development and people are not attending to it. [68]

CISNEROS: How did you get interested in concept analysis? [69]

MORSE: It started in 1989 when I was looking at the many conceptualizations of caring, and caring as a concept, and later empathy and other concepts used extensively in nursing I realized what a mess the theoretical base in nursing was. It seemed sometimes that everybody was rushing out and doing some kind of study or other. [70]

I think once we learn enough about concept development methods to be able to develop them easily from data we will be ahead. I think that most people stop at categories and do not develop categories into concepts and then theory. If they did that, the development of theory would be easier. [71]

CISNEROS: What do you think are the possibilities of producing a handbook of concept analysis? [72]

MORSE: It would be a good thing, but we are not ready to write it yet. I think we are ready to write a text, but not a handbook. My guess is we will not be ready for a handbook for the next ten years. I do not think we need superficial coverage of the field, we need an in-depth description. [73]

CISNEROS: Could you tell me something about your future projects? [74]

MORSE: On methods, the first thing that I want to do is to work on concepts a bit more and develop the methods to develop qualitatively-derived theory. And on topics, these two things—topics and methods—go hand in hand. There is a need to work more on suffering. I have almost all the pieces now. [75]

CISNEROS: You have been working on this for almost 10 years. Don't you have enough material by now? [76]

MORSE: But I need 10 more years! [77]

CISNEROS: And is it enough to build a theory? [78]

MORSE: We are doing a study at the moment with people who are enduring breast cancer biopsies to see whether or not they enter emotional releasing and where they exit the suffering model. Can they exit it directly from enduring? This will be a key study. [79]

CISNEROS: What are your views about the international perspectives of your influences on this specific field? [80]

MORSE: Minimal! [81]

CISNEROS: Do you know why? [82]

MORSE: I have to write a book. I think that a book is a way to gain influence, the only way to get in-depth knowledge out there. If we looked at the research that is concerned with suffering of illness, probably 50% comes from nursing; probably 10% comes from medicine, and the rest from other disciplines. Geographically it is spread from Scandinavia all the way to the USA. What is happening in the field is that we are developing schools of thought about suffering and these schools are not necessarily exploring work from other regions and schools. [83]

CISNEROS: Do you think your research style has been influenced by phenomenology, grounded theory or ethnography? [84]

MORSE: My methods? No, I do not think it has. I do not think my research has been dominated by any particular method, and I use quantitative methods sometimes. I think that we are having success studying suffering because most people just use interviews to study suffering. Interviews are not very good when people are suffering because when they are enduring, the process of enduring mutes the person and silences them, and when they are in emotional suffering, the emotions overwhelm them, and they internalize their focus and cannot give good reports of themselves. But when we combine the interviews with observations, or interviews with other people's observations—their friend's or relative's—then we get much better data. [85]

CISNEROS: Do you feel comfortable keeping a kind of quantitative orientation in your studies? [86]

MORSE: Yes, it is essential, totally essential to answer some questions or to move inquiry into a different place. But it must be done appropriately! [87]

CISNEROS: Can you tell us a little more about that. [88]

MORSE: My work was reviewed for a foundation, and one of the reviewers said that I should be moving into quantitative inquiry. I have no understanding why I should be moving on to quantitative inquiry. I know that there is a research group out East who are studying suffering and want to move on to quantitative inquiry, but they realize they cannot measure suffering—so they are substituting for "quality of life!" They are measuring a different concept before and after the intervention to reduce suffering. As far as I am concerned, they are not measuring suffering at all. Until we know enough about suffering to be able to measure it, you cannot move inquiry forward using quantitative inquiry, and are doing black box research! I think we've got too much work to do at the moment on understanding suffering itself to move onto quantification. [89]

CISNEROS: I know that you are the editor of *Qualitative Health Research*. Can you tell us something about the relevance of this journal for qualitative inquiry? [90]

MORSE: The journal addresses issues in illness and health, and some methodological issues, and we do special issues on methods. I think it is an important journal for people who are in health care, but I think its contribution to methodological development is moving the field through problems encountered when applying methods. [91]

CISNEROS: What are your ideas about the future of on-line journals and on-line discussion groups on qualitative methods and research? [92]

MORSE: I think on-line journals will be the way of the future, though we've got problems at the moment. We've got problems with the lack of prestige, and they are not equipped to put on-line journals in the library. [93]

I think they are moving very quickly. I think the difficulties for indexing are really bad. But I do not have problems with publishing in on-line journals—it is a better medium for illustrations and movies than a paper journal. And they really have potential for overcoming problems of dissemination, cost and language barriers. We can truly become an international community of qualitative researchers! [94]

CISNEROS: What words of advice do you have for the new generation of qualitative researchers? [95]

MORSE: I'd tell them to build a good methodological toolbox! New researchers are still coming out of programs that teach just one method, and these researchers do not know enough strategies or enough methods to conduct research optimally, efficiently and effectively. I think that new researchers need more confidence. If they cannot get enough confidence to have faith even in their own results, that's part of the training and the problems in the program. [96]

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