



Article

Focus Groups as Transformative Spiritual Encounters

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Abstract

Focus groups are a valuable method for exploring the construction and negotiation of meanings. In her doctoral research the author explored how Australian women's experiences of menstruation, birth, and spirituality are invested with meaning and how that meaning influences and shapes those experiences. The focus group has been described as a potentially liminal space, which enables the discussion of taboo subjects by breaking the ice and giving people permission to comment. In addition, she discovered that the groups could be occasions of empowerment and transformation for both participants and researcher. In a way that far exceeded her expectations, the group format was ideally suited to feminist research and the organic inquiry methodology she used. Some groups became deeply spiritual encounters that were nourishing and transformative for all. This article explores how focus groups can be vehicles of spiritual transformation, examining one group in particular to highlight the points raised.

Keywords: focus groups, feminist research, women's spirituality, menstruation, birth, organic inquiry

Author's note: Sharon Moloney has a background as a women's health practitioner, educator, and therapist. With a Master's in Women's Studies specializing in women's health and spirituality, Sharon completed her PhD, which explored Australian women's experiences of menstruation and birth as spiritual phenomena. She has a private practice, working with individual women and couples on a range of reproductive and other issues.

Introduction

Focus groups are a valuable method for exploring the construction and negotiation of meanings (Wilkinson, 2004). In my doctoral research I explored Australian women's experiences of how menstruation, birth, and spirituality are invested with meaning, and how that meaning shapes and influences those experiences. Originally I had planned to run focus groups as precursors to what I saw as the main body of my research: in-depth interviews. I thought the groups would heighten my sensitivity, expand my knowledge about how participants discussed the topic (Stewart & Shamdasani, 1990), and assist in developing the interview schedule (Morgan, 1988). However, after facilitating the first few groups, I realized the group forum was an incredibly rich context, not only for generating meaningful data but for a spiritually rewarding encounter. In this article I consider some of the factors contributing to that richness and explore the focus group as a potentially sacred container.

Background

Focus groups first began after World War II to investigate the effectiveness of wartime propaganda (Morgan, 1988). They were subsequently used as a market research strategy before eventually emerging as an increasingly valued form of qualitative inquiry. Feminist researchers recognized their alignment with feminist principles (Kitzinger & Barbour, 1999). Focus groups are contextual, relying on social contexts rather than the isolated individual; they tend to be nonhierarchical, with the power balance favoring participants; they can be consciousness-raising, enabling new information and taboo subjects to be aired; and they are interactive, highlighting the primacy of relationships (Kitzinger, 1994; Litosseliti, 2003; Wilkinson, 1999). By positioning the focus group as a place of spiritual encounter and transformation, I wish to expand this feminist perspective into a valuable new dimension.

As focus groups are "particularly useful for exploratory research where little is known about the phenomenon of interest" (Stewart & Shamdasani, 1990, p. 15), they were ideally suited to my inquiry. Menstruation and birth are not usually regarded as spiritual phenomena in Western culture, and there is very little research into either domain. Conceptualizing them as spiritual gave other women permission to voice their experiences and enabled those experiences to be explored and interpreted beyond the physiological events. This approach is significant for several reasons. A cultural reform of attitudes toward female body processes can alleviate oppression in women's ordinary lives; for example, by dismantling shame associated with menstruation or by promoting a spiritually respectful birth practice. The groups gave me an overall perspective on some of the features of this unexplored terrain. In addition, I discovered that they fostered transformative change right in the midst of my data collection.

Focus groups are valuable because they enable participants to "speak in their own voice" and "to express their own thoughts and feelings" (Wilkinson, 1999, p. 71), though this very much depends on the creation of a "safe space" within the group dynamic. Focus groups allow participants "to generate their own questions, frames and concepts and to pursue their own priorities on their own terms" (Kitzinger & Barbour, 1999, p. 5). Further, the group context prioritizes participants' hierarchy of importance and "their frameworks for understanding the world" (Kitzinger, 1994, p. 108, emphasis in original). My focus groups enabled me to gain an insight into what other women see as key issues of my topic, their use of the vernacular, and potential sensitive areas. They also raised my awareness of the not-yet-articulated dimensions of women's experiences, with a focus on the unsaid in order to make it speakable (Devault, 2004). The following discussion attempts this articulation.

Sample and methods

My sample comprised 48 women and included mothers who had given birth in the previous 10 years, some midwives, and staff from a local women's service. As my data collection evolved, I conducted 10 interviews (n = 10) and seven groups (n = 38), the two methods interweaving and overlapping rather than being sequential as I had anticipated.

In the literature, a focus group is described as having 6 to 12 participants (Morgan, 1988). Four of my groups had 6 to 11 participants, but two groups had just 3 women, whereas another became a meeting with two home birth midwives. The last three groups were scheduled with 6 to 8 participants, but as events transpired, several women from each group were unable to attend because of child care problems, a sick child, or babies being born, not uncommon situations for midwives or mothers with small children. Rather than cancel for lack of numbers, I went ahead but modified the format. Instead of facilitating a group discussion, I suggested that each woman simply tell her story. The intimacy of these small groups provided a depth and contrast to the breadth of the larger groups. They were not strictly speaking focus groups; "women's circles" was a more apt description.

The methodology: Organic inquiry

My methodology was organic inquiry, an emerging approach that presumes research as a partnership with Spirit (Clements, 2004). Originating in San Francisco in the mid-1990s, it developed out of the women's spirituality movement, feminist research, and transpersonal psychology (Clements, Ettling, Jenett, & Shields, 1999). Organic inquiry is ideally suited to topics with a psycho-spiritual orientation, making it perfect for my study. Alongside intellectual knowledge, it incorporates feeling, intuitive and body-based information as vital aspects of human experience in both data collection and analysis (Clements, 2002).

Openness to the movements of Spirit is a defining feature of the organic methodology, requiring flexibility and an acceptance of nonlinear progressions. It requires the researcher to actively facilitate the shift into liminal space, yet simultaneously relinquish control over outcomes. The main characteristics of organic inquiry that distinguish it from other methodologies are its emphasis on the sacred, the personal, the relational, the chthonic, and the transformative (Clements et al., 1999). However, the primary distinguishing characteristic that sets it apart from other methodologies is the goal of transformative change for all involved in the research (Curry & Wells, 2006). Alongside the traditional goal of expanding knowledge, an organic study offers the opportunity of transformative change to all involved: researcher, participants, and eventual readers of the study. This goal is not a luxury extra; the methodology requires evidence of "transformative validity" to demonstrate the rigor of the study. This innovative research goal required breaking new ground and transgressing some of the accepted norms of focus groups, especially my active participation, an issue I address in more depth later in this article.

Organic inquiry differs from other feminist methodologies in several important respects: by making spirituality its central focus, by including arational dimensions like intuition and the chthonic (that is, dark times and unconscious processes), by overtly incorporating the body (sensations, feelings, and body knowledge), and by actively seeking transformative change. In drawing on these embodied, transpersonal, and numinous aspects, the organic methodology expands the feminist research frontier as well as contributing to the evolution of qualitative research generally.

Norman Denzin (2001) described the Seventh Moment of qualitative inquiry (which began at the turn of the millennium) as characterized by "a willingness to experiment with new representational forms" (p. 7) in which the sacred is both implicit and explicit. Key elements were a sacred awareness, narrative as a political act, researcher reflexivity and vulnerability, and inquiry as an ethical and critical moral consciousness (Lincoln & Denzin, 2000). In its embodiment of these attributes, organic inquiry can be seen as a distillation of Seventh Moment consciousness. A key feature of the methodology is the inclusion of the researcher's subjectivity and personal experiences of the topic as part of the data. As I now describe, this personal element was a factor in creating a numinous space for my focus groups.

Initiating the discussion

Kitzinger (1994) referred to the benefits of an external point of reference for facilitating focus group discussions, such as a card game or the use of vignettes. My external reference was a PowerPoint presentation entitled "Reflections on Female Spirituality." Aware of the one-dimensional inadequacy of words when talking about spirituality, I created this visual representation in the early stages of my doctoral candidature as a way of communicating what I mean by female spirituality. Lasting about 8 minutes, it presents a series of visual images—the egg cell, the developing fetus in utero, pregnant and birthing women, Goddess figures, Aboriginal women dancing, the Earth, the Moon, spiral galaxies—slowly passing from one to the other, accompanied by some beautiful evocative music.

Prior to my first group, I had shown this presentation to a group of honors students, several of whom told me they had never thought of their body processes in that way before. The seed was sown. Conceptions of menstruation and birth in Western culture usually revolve around mess, shame, pathology, pain, and medical concerns (Martire, 2006; Owen, 1998; Shuttle & Redgrove, 1978). This visual presentation, like a kaleidoscope, offered an alternative view. The nonverbal, right-brain modality of images, music, and symbols evoked a felt experience of the spirituality of menstruation and birth, engaging participants' subjectivity and sometimes producing strong emotional responses. Beginning my groups in this way created a liminal space that led easily into a discussion of my topic.

Showing this presentation was a way of playing my own hand, of saying, "This is how I see it," implicating me directly in the group process. I was not a detached observer, safely facilitating but removed from the discussion. In making myself vulnerable by disclosing my own perspective, I invited my participants to reciprocate, trusting them—as intelligent, informed adult women—to respond in ways that were true to them. Consequently, the groups became an authentic space in which soulful reflection and deep disclosure occurred, where the women could say, "Yes, that rings bells with me too," or, "No, I don't see it like that." They responded honestly, straight from the heart, sometimes contesting my viewpoint, at other times agreeing, but willing to engage in candid discussion.

The role of the facilitator

The focus group literature paints a lofty picture of the ideal facilitator. For the group to function optimally, the facilitator is required to create a "non-threatening and non-evaluative environment in which group members feel free to express themselves openly and without concern for whether others in the group agree with the opinions offered" (Stewart & Shamdasani, 1990, p. 87). Further, the facilitator should ensure an atmosphere with high levels of comfort, trust, openness, and interaction for participants (Litosseliti, 2003). A good facilitator is expected to inspire

confidence; foster synergy; be animated and spontaneous, insightful, sensitive, empathetic and curious; listen well; use silence; distill participants' responses; and be expressive of their own feelings in an opinion-free, neutral, and nonjudgmental way (Litosseliti, 2003; Morgan, 1988; Stewart & Shamdasani, 1990)—a tall order by any standards!

There is an onus on the facilitator as a detached guide who keeps the group's focus directed toward answering preset questions without leading them (Litosseliti, 2003; Morgan, 1988). To minimize bias, it is argued that the moderator should have minimal input so as to obtain "pure" unbiased opinions, feelings, and thoughts from the participants. Litosseliti sees moderator bias and manipulation as a limitation of focus groups, warning of the "danger of leading participants and encouraging them to respond to your own prejudices" (p. 21). It could be argued that the presumption of facilitator prejudice leading compliant participants to respond in kind is a patronizing, diminished view of participants' intelligence and agency.

Postmodernist perspectives have challenged the notion of fixed attitudes and beliefs being passively extracted from participants, instead maintaining that identities are fluid, dynamic, and actively constructed; that is, performed by individuals according to social context rather than preformed (Puchta & Potter, 2004; Reissman, 2001). Moreover, the ideal of the detached facilitator devalues the significance and reciprocity of the relationship between researcher and participants, which I found to be a vital component of the group process. One of the rigorous precepts of organic inquiry is its emphasis on the relational quality of the research encounter and its requirement for transparency, equality and mutuality. One definition of bias is: "A slanting direction across the grain of a fabric" (Soanes, Waite, & Hawker, 2001). This is precisely what I sought to do in my research: to cut across the grain of the cultural fabric that depicts menstruation as a shameful secret or birth as a medical emergency. My intention was to disrupt that dominant discourse and provide a different lens with a countercultural view that could facilitate the transformative change sought by organic inquiry.

In their discussion on focus groups, Waterton and Wynne (1999) described the shift of emphasis from quality control to trust in the research and the need to "rely on ourselves as researchers" (p. 128). Researcher integrity is a core ingredient of this process. I wanted my groups to be a nourishing, uplifting experience for the women who attended, not just a means for me to get information from them. For me personally and in keeping with organic inquiry, it was as much about the quality of the experience as it was about data collection. Has this encounter been real for them? Has it moved them or challenged their assumptions about their body processes? Do they perceive their experiences differently or have greater self-awareness than before?

The researcher's persona

Kitzinger and Barbour (1999) highlight the importance of including an account of "how the researcher's persona influences the data collected" as well as theorizing about "participants' perceptions of the researcher" (pp. 14–15). These valuable but infrequently cited aspects of the research encounter, which involve issues of identity and self-presentation, merit further elaboration. In my case, it seemed likely that my professional reputation and skills as a women's health therapist actively influenced the quality of my focus groups. In my invitation to participate, I presented the groups as an opportunity to explore deeply personal and sensitive matters like menstruation, birth, and spirituality. It is possible that my persona enhanced participants' comfort levels to disclose their innermost thoughts and feelings by inspiring confidence that the group was a safe and competent space in which to do so.

In the first three groups particularly, my professional work was well-known, and it is interesting to speculate on how different the group dynamic might have been if I had been a nurse, a teacher, or an academic. Moreover, I did consciously draw on my counseling skills—active listening, empathy, normalizing, reframing, validation, and support—in facilitating the groups, particularly during sensitive moments, and it is probable that this further contributed to deepening participants' self-disclosure. Although I clearly positioned myself as a researcher in my invitation and again when I introduced the group session and collated consent forms, my professional persona was undoubtedly influential in the process and the dual roles probably worked in favor of my data collection.

These dual roles raise the question of the power differentials between me as researcher/therapist and participants. Here, too, organic inquiry provided a framework in which that differential became a "power with" and "power for" rather than power over. The methodology deepens the notion of equality by calling for "a release of authority" (Clements et al., 1999, p. 66) and by incorporating the presence of Spirit. Curious to discover how an experience is seen through the participants' eyes, the researcher cultivates a reciprocity that honors the participant. Nora Taylor (1997) noted that when the researcher is positioned on the same critical plane as participants, a mutual construction of knowledge is possible. The researcher becomes an attentive collaborator, listening for the voice of Spirit speaking through the participant's story (Clements, 2002). Trust becomes the "vital ingredient of truly representative data" (p. 29). Trust is inspired by the quality of the relationship and by transparency during all stages of the research, for example, in returning both the transcripts and edited stories to participants for their verification, comment, and veto.

Ethical considerations

My study was approved by the university Human Ethics Committee and all participants signed informed consent forms. Annual reporting back to the ethics committee ensured that my adaptations to the original design were overseen and endorsed. With such a sensitive topic, ethical considerations were paramount. A genuine ethics of care derives from the researcher's integrity and personal honor code. I was mindful that broaching women's intimate experiences of menstruation, birth and spirituality required sensitivity, respect, and compassion. My personal experience and professional work had taught me the painful vulnerability many women feel about these aspects of our lives. Birth complications or trauma, reproductive losses, postnatal depression, memories of sexual abuse, and humiliation or shame about menstruation were just some potential raw places. I was also aware of each woman's sacred territory in that vulnerability. Although my role as researcher was different to my therapeutic role, my approach was underpinned by the same ethics of care and concern, and a commitment to be compassionately present with each woman as she explored her inner reality. With the groups, I endeavored to create safe boundaries and a respectful space at the outset, the group itself providing the caring container.

Group dynamics: An in-depth examination of one focus group

The chief characteristic of focus groups that makes them unique is the interactive nature of the group dynamic (Kitzinger & Barbour, 1999; Litossoleti, 2003). Whereas group interviews rely on participant-researcher interaction, the focus group hinges on the relationships between participants themselves. Consideration of group dynamics is therefore a vital part of the organization, facilitation, and analysis of focus group research.

Wilkinson (1999) has described the social interactions between participants as constituting the *primary* data, a fact frequently overlooked in the literature. After reviewing more than 200 studies covering a 50- period, Wilkinson found none that concentrated on participant interaction, yet it is precisely this relational aspect of the group that fits so well with a feminist framework of mutuality and interrelationship (Kitzinger & Barbour, 1999; Wilkinson, 2004). It is also a key aspect of spirituality, defined as living our connectedness (Burkhardt & Nagai-Jacobson, 2002), a dimension of research emphasized by organic inquiry

Although unruly and challenging at times, this interactive process enabled a penetration of my topic that revealed "dimensions of understanding that often remain untapped by the more conventional one-to-one interview or questionnaire" (Kitzinger, 1994, p. 109). Wilkinson (1999) saw the value of this interaction as a process of negotiated meaning-making and "collective sense-making" made possible by the group context (p. 67). Although groups contain the potential to exert collective norms that might muffle more subtle individual views, nevertheless the "synergistic effect" can produce "subtle nuances in expression and meaning" (Stewart & Shamdasani, 1990, p. 16) that foster a cumulative awareness of salient issues. The following example from my first group illustrates this point.

Comprising women from the local active birth movement, the group took place one Saturday afternoon in a comfortable room at my home. The interaction highlights the role of the caregiver during birth, the meanings ascribed to women's body processes and notions of dirt and cleanliness. Of particular interest is the significance attributed by these women to the placenta.

Andrea: We often have caregivers who believe completely different things about birth than we do.

Jane: And who don't know the implications of their actions on you as a woman and how that affects you later on—particularly me with the doctor pulling my baby out and then telling the nurse to clean me up because I'd made a mess. Now as a new mother, I felt dirty, so I don't want to hold this baby, who's all clean . . . That brought me back to thinking about menstruation and how when you give birth a lot of women are worried they'll poo and there will be a mess . . . Another thing I really regret is that I didn't do anything with the placenta. But it was part of me and my babies. It was special and it shouldn't have been just thrown in the bin. It deserved a proper ceremony.

Researcher: The placenta is an extraordinary thing. And you know, in some other cultural traditions, it's endowed with great significance, even mystical properties.

In parts of Russia, they regard that as the baby's connection to consciousness.

Susan: When my son was born, he was in special care nursery and about two hours later the nurse said to me with this look of disgust on her face: "Do you want me to get rid of this placenta or do you want to keep it because it's gonna start stinking soon!" (Gasps of shock rippled around the group.)

Ellen: But the staff are meant to nurture and empower you, not make you feel terrible and degrade you.

Helen: It's even less sacred if you're having a caesarean. You're exposed from the waist down to a room full of people—anaesthetists, nurses, doctors—who are often joking and talking about their golf games—they really do! They may see this a

hundred times a week but this is the sacred birth of your child and it will never happen again.

This rich discussion ranged over common ground experienced by many women. In raising these important issues, the group interaction broke down participants' isolation, enabling them to support one another and change the meaning of their raw experience. When Jane described the effect of her doctor's words about her "making a mess" and her feelings about the specialness of the placenta, it found a resonance with Susan's experience: Both women knew they were not alone. Ellen's comments about the staff shifted the source for Jane's feelings of degradation away from her body processes to her caregivers' attitudes, and Helen's professional observation as a nurse validated their perceptions of those cavalier attitudes.

This example illustrates the web of responses evoked by focus groups where "participants respond to and build on the views expressed by others in the group—a synergistic approach that produces a range of opinions, ideas and experiences, and thus generates insightful information" (Litosseliti, 2003, p. 2). The group dynamic draws out multiple views and attitudes, encouraging a greater diversity than other forms of data collection. Further, mutual reinforcement, jokes, teasing, anecdotes, arguments, stories and loose word association all contribute to the diversity of the group interaction (Kitzinger, 1994). I found that humor was often a way in which participants defused painful or awkward moments, as the next example shows.

Another advantage of groups is that they can successfully open up a discussion of taboo subjects because when one brave soul breaks the ice, it gives permission for more reserved people to comment (Kitzinger & Farquhar, 1999). The following example illustrates this well. The previous discussion had revolved around different meanings associated with menstruation. Some women spoke of the pain of infertility and miscarriage, and the group had listened respectfully and empathetically. Out of the subdued mood, one participant picked up the meaning-making process by reframing menstruation as symbolically significant.

Andrea: After having my first daughter and losing the blood afterwards, it became very different. I could see my period as the beginning of that process. So for it to go on for five days is not an issue for me, it's a source of pride. It's an issue for my husband because he doesn't want to do it when I'm bleeding—but he'll get over it (laughter)! And the hygiene aspect of it has changed for me too. I prefer not to use tampons any more. I go with pads now more than I ever did before.

Others (all talking together, very excited): So do I! Me too! I do that too!

Jane: I see all the tampons at the shop and I put the big pads in the trolley (laughing) . . . but I don't share that with my friends. A good friend of mine, she's always talking about her tampons and I wouldn't ever dare tell her I bring out the big pads, you know, it's just something I wouldn't do. So it's good to know I'm not the only one.

Andrea: My vagina is a lot more sensitive now, so putting in a tampon is painful. And I think: I just want to let this out, not block it up. It's a flow of life.

Helen: When I was a teenager, I did a workshop called First Blood by Amrita Hobbs. We told our menstruation stories and did some rituals acknowledging ourselves as women.

Researcher: That's a good example of creating a rite of passage to honour coming into the power of your fertility. I wonder what other things we could do to reflect that spirituality?

Susan: It would be good—when young men and women are taught about menstruation and birth—if it was more connected, like how you've shown it in that presentation. As it is now, it seems like women get their period and they bleed, and another story is that guys get erections. Then there's birth, and it's all compartmentalised.

Helen: And you don't necessarily connect menstruation with having babies, so actually making the connection between it all.

This exchange really highlights the synergistic potential of the group dynamic. Kitzinger (1994) refers to turning points in the group that represent moments of heightened intensity. Andrea's taboo-breaking disclosure about not using tampons was certainly one of these moments, producing intense animation for the group with an eruption of laughter, exclamations, and a sudden recognition of common ground that up to that point had been hidden. The taboo had been broken and the energy was contagious. Moreover, Andrea's use of blunt humor turned this moment into a fun-filled counterpoint to the grief expressed just a few minutes earlier. This use of humor seemed to me a characteristic way in which women often express their resilience, strength and solidarity in the face of adversity.

This example also illustrates how focus groups can be useful in "enabling people to articulate experiences in ways which break away from the clichés of dominant cultural constructions" (Kitzinger & Farquhar, 1999, p. 112). These women certainly thumbed their noses, not only at the secrecy shrouding their intimate hygiene practices, but also at the advertising industry with its claims that no one need ever know, notions of cleanliness, and expectations of sexual availability. In addition, Andrea reframed and articulated on behalf of several other participants, a different meaning to menstruation when she declared, "It's a flow of life!"

The sensitive moment

Kitzinger and Farquhar (1999) described the focus group as potentially a liminal space, in which participants can seize the opportunity to brave issues normally censored or not discussed. The above example demonstrates this aspect. Morgan (1988) also noted the potential for focus groups to "bring forth material that would not come out in the participants' own casual conversations or in response to the researcher's preconceived questions" (p. 21). At its optimum, the group context can elucidate a depth of engagement and relationship that leads participants into the transformative potential of a liminal space, a betwixt and between zone actively pursued in organic inquiry. The sensitive moment is a particularly valuable occasion for engendering depth and evoking powerful responses (Kitzinger & Farquhar, 1999). One such moment occurred just prior to the above taboo-breaker when two women disclosed they had miscarried:

Jane: Before I had my kids, I had that sense of messy periods, get it over and done with. But now, it has a more spiritual sense because the day my period didn't arrive was when I first had a baby coming.

Researcher: So the meaning of it changed after having a baby?

Jane: Oh yes, definitely.

Helen: I think it's powerful that as women, we can conceive and grow a child, and menstruation is part of that. When you menstruate, it means you are fertile so my views have changed to perceive it as a much more positive thing.

Nola: Before we had our little girl, we were infertile. I had endometriosis, so every period was a terrible amount of pain and a constant reminder that I couldn't have a baby. Now, when I get my periods I feel like it was a lost opportunity. I've just recently lost a pregnancy, so that colours the way I feel . . . (tears) . . . I've felt really sad . . . (long pause) . . .

Andrea: . . . When you want to conceive a child and your period comes, the disappointment can be extremely raw . . . (pause) . . . and once you've had a child, you understand what it is to do that, so it can be very hard . . . (pause) . . .

Jane: When I had my periods last week which was the first one after my miscarriage, that was bad and hard, and a very hard week, because . . . you're just I suppose grieving . . . (crying) . . . I was busy with my other children, so I would only think about it at night, which is when I do all my thinking. I don't want to grieve every time I get my period but at the moment I've linked them together . . . (tears) . . .

Researcher: The experience of miscarriage is a very intimate kind of loss and death, right inside your body. It cuts through to the depths of your being. That's what I mean by spirituality—that life-changing experience when something in your core is touched. Yet miscarriage is often dismissed as being an insignificant loss.

Jane: But in those photos (in the presentation) of an embryo, you can see the little knobs for their fingers . . . (tears) . . .

This poignant moment illustrates the powerful spirituality elucidated by the supportive group context. It was very moving for all of us. There is some ambiguity in the contrasting views expressed: menstruation as an indicator of both fertility and infertility; 'messy periods' becoming imbued with spiritual significance; the depth of the hidden grief of miscarriage brought home by the photos of the embryo. What was most noteworthy to me was the gentle, supportive nurturing that emerged in response to these women's grief. The group became a safe container for them to express their sadness and loss, the long silences filled with an almost palpable empathy. Something special happened in that process that was deeply reassuring for all of us, an unspoken message of acceptance, that it was okay, that these experiences are part of what it means to be female. I imagined this was how it was in times gone by: women sitting in a circle, sharing their intimate experiences with one another and gaining strength.

Feminist research and researcher "control"

Sometimes groups can take on a life of their own, governed by group processes that follow the natural flow of the discussion (Stewart & Shamdasani, 1990). Participant numbers mean the balance of power shifts in a lateral direction, putting "control over the interactions in the hands of the participants rather than the researcher" (Morgan, 1988, p. 18). Diminished researcher control is depicted as a disadvantage in much focus group literature (Krueger & Casey, 2000; Litosseliti, 2003; Steward & Shamdasani, 1990). There are even warnings that the group could usurp the moderator (Watts & Ebbutt, 1987, in Wilkinson, 1999).

However, the legitimacy of such concerns "depends on whether you want to keep control in the first place" and what is meant by losing control (Kitzinger & Barbour, 1999, p. 13). One of the chief attractions for me in using focus groups was their non-hierarchical structure, the lateral transfer of power to participants consistent with my feminist ethic and the equality sought in organic inquiry. Kitzinger and Barbour highlight the skills of the group participants, pointing out: "it is incorrect to assume that total anarchy will ensue unless the researcher handles the group situation with consummate poise" (p. 13). On several occasions in my groups, I had to work hard to return the discussion to the topic in hand but these tangential excursions are often how women process things and frequently lead to new ideas and perspectives (Wickham, 2004).

Morgan described reduced researcher control as an advantage "which enables participants to contribute to setting the research agenda, resulting in better access to their opinions and conceptual worlds" (1988, p. 71). As the previous excerpts show, this participant-led process can be very revealing and fruitful. It was also a mutually enriching experience for me, as in a process of complex shifting roles, "participants guide the moderator as well as the other way round" (Myers & Macnaghten, 1999, p. 181). This mutuality grounded me in a broader range of issues about my topic, sometimes extending it far beyond where I had thought to go, and taught me to trust women's ways of exploring and constructing knowledge.

Emancipatory potential

The focus group can be a valuable means of pursuing feminist goals. In a society with a long history of not listening to women's voices (Wickham, 2004), the group context provides an emancipatory forum. The pooling of experiences "helps women to overcome their structural isolation in their families and to understand that their individual sufferings have social causes" (Mies, 1983, in Wilkinson, 1999, p. 75). When women get together and share their stories, they begin to realize that what they have perceived as their personal, private struggles or failures may have deeper roots. In the following example the participants identified some of the barriers to trusting themselves in labor and birth.

Jane: In my first birth I trusted the doctors and believed they would do the right thing by me. It was a highly intervened birth and I ended up feeling very disempowered. The only person I didn't trust was myself, but I needed to hold onto it and that's what I did with my second baby.

Researcher: So the trust came back to you instead of going out to the medical staff?

Jane: Yes and that made all the difference. I don't think there was anything a doctor or a midwife could have said, I just knew I was going to birth my baby myself and . . . oh, there was so much power behind it! But I'd spent a lot of time preparing myself; it wasn't something you can just do.

Nola: My sisters are both pregnant and they are terrified of the birth. They have zero confidence and everything is like: Oh the doctor will take care of me!

Andrea: I think when we have our babies the first time, it's so normal to just go and ask the doctor, you know, because we don't understand. If we could trust ourselves and our intuition as children and as teenagers, we would go through a lot less grief as mothers. But if that trust in your own ability is not instilled in you, then it's very easy to hand that power over to somebody during birth and afterwards to feel overwhelmed with the responsibility.

Nola: Well, I think we do have that knowledge here (pointing to her heart) but it's beaten out of us or we're taught to ignore it.

As this passage shows, the group context can enable participants to see that their problems may not be the result of personal failure or inadequacy but instead are rooted in social structures (Orr, 1992, in Wilkinson, 1999). This discussion about self-trust, which began with a tone of personal insufficiency, changed direction with the suggestion that women's trust in their own abilities and body knowledge is neglected as they are growing up, and in fact is undermined by a social system that privileges both male experience and medical expertise. Wilkinson noted that in "realising group commonalities in what had previously been considered individual and personal problems, women will develop a clearer sense of the social and political processes through which their experiences are constructed—and perhaps also a desire to organise against them" (1999, p. 75).

As a researcher, I experienced the emancipatory potential of the groups too. I discovered that there is a resonance between how others see my topic and how I see it. The lively group discussion was no simple blind agreement with my perspective. Participants sometimes contested my viewpoint, at other times concurred with it and expanded it. In the process, my own conceptions were challenged, consolidated and stretched. As facilitator, I felt honored and inspired by the depth of my participants' willingness to share and blessed to witness their courageous self-revelation and discoveries.

This particular group became a transformative opportunity in which participants creatively negotiated their identities and views. For many, the vision of an alternative perspective of their female body processes was empowering and galvanizing. It was also a form of soul nourishment, as the following excerpt reveals.

Helen: It's been great talking and sharing; it's the kind of thing I could do all day!

Nola: I've really enjoyed it. I think it's been special and good for people to talk about it because I don't think we do talk about it. I feel empowered too

Jane: I'm feeling inspired! This has really helped me to get back to my roots, to know what it is that I'm passionate about.

Susan: I found it really interesting to listen to all the stories and I also think it helped me because I had a long labour last time so it's been good to talk about trusting women's bodies and that they know what to do.

Nola: Just going back to what you were saying earlier about how do you change things? Part of the problem is that a lot of women don't get an opportunity to talk about these things and we just never go there. I think it's really beneficial to be able to be open like this in a group.

Researcher: So this is one way of being able to bring about that change?

Nola: Absolutely, I think so. Just to have the opportunity to talk about those things and making it accessible to other women too. I wish we could do this every week!

Helen: It would be great if we could do this as a regular event.

The sentiments expressed at the end of this group echoed the closing comments of several other groups, reflecting the participants' longing to explore the inner world of their menstruation, birth and mothering experiences with other women. The lack of opportunity to do so is part of women's search for validation of their embodied female spirituality. As women, we are still finding the language and conceptual frameworks that do justice to these intimate, female realities. For this group, breaking the shroud of silence surrounding them was not only inspiring and empowering; it was also perceived as a way of bringing about that cultural reform.

Report on transformative change

A key component of organic inquiry's validity is the Report on Transformative Change, a thesis chapter in which the researcher describes how the goal of transformative change has been achieved for both participants and researcher. There are two dimensions: changes of mind, "insights that have risen from engaging with Spirit," and changes of heart, whereby "one's picture of who one is and how one operates in the world alters" (Clements, 2002, p. 198). My participants completed a brief questionnaire at the end of their involvement in my project and this reiterative process was a crucial part of my accountability process.

In this focus group, four participants sent me their feedback. All noticed changes in self-awareness, and one reported how these changes had radiated out to others. Jane spoke of her growth: "The group enabled me to discuss personal feelings and opinions about many issues surrounding womanhood, pregnancy and motherhood and as I read my comments, I felt proud that I shared my stories. A few years ago this is something I would have kept to myself." Susan told me participating in the group had changed her thinking about birth: "I really enjoyed it and in preparation for my next baby, I feel it helped me to change the way I think about birth." Helen also recognized growth and made new connections: "There were areas where I had never thought about the issues like that and I really liked your analysis. It's interesting to see how I've changed, seen other perspectives and grown in myself."

One participant, Ellen, experienced deeper changes that had a ripple effect: "It was the first time in my life I'd heard other women's experiences of menstruation, giving birth and being a mother, and I found it enlightening. It certainly changed my view and increased my respect for women as mothers and nurturers. It also gave me a new framing for relating to my own body and the wonder of creating a baby. I felt so encouraged to uncover the shame and celebrate the wonderful differences of women, amongst both men and women friends. I had a number of great discussions with friends over the following weeks and months. I also felt it had a highly positive impact on my (and my partner's) own journey of becoming pregnant and having our baby, particularly by reframing birth as a natural, amazing experience that is best when not medicalised."

Receiving these participants' comments on their experience of their focus group confirmed the transformative validity of my study. It enabled me to know that I had honored their contributions and presented their stories reliably, and that the goal of transformative change had been actualized.

Conclusion

My research topic was a qualitative exploration of menstruation and birth as spiritual phenomena. In a way that far exceeded my expectations, I found focus groups ideally suited to my topic, to feminist research and to the organic inquiry methodology. This article has discussed one group in depth but many other groups in my study became deeply spiritual encounters that were equally transformative. The desire for more opportunities like this was a recurrent theme across the

groups, reflecting the cultural vacuum and the deep hunger many women feel about their female spirituality. Women's circles for this kind of soulful sharing must have gone on for millennia. Enlisting them as a research tool both honors that heritage and extends feminist research approaches into a new and potentially very fruitful domain. The focus group as a sacred container is a far cry from its post World War II origins, perhaps signifying the hope that as human nature evolves it can transform itself into its greater spiritual potential.

References

- Burkhardt, M., & Nagai-Jacobson, M. (2002). *Spirituality: Living our connectedness*. New York: Delmar.
- Clements, J. (2002). *Organic Inquiry: Research in partnership with Spirit.* Vinalhaven, ME: Unpublished manuscript. (Accessed through Serpentine Press).
- Clements, J. (2004). Organic Inquiry: Toward research in partnership with Spirit. *The Journal of Transpersonal Psychology*, *36*(1): 26–49.
- Clements, J., Ettling, D., Jenett, D., & Shields, L. (1999). *Organic Inquiry: If research were sacred*. Palo Alto, CA: Serpentine Press.
- Curry, D., & Wells, S. (2006). An Organic Inquiry primer for the novice researcher: A sacred approach to disciplined knowing. Pasadena, CA: Infinity.
- Denzin, N. (2001). *Interpretive interactionism*. Thousand Oaks, CA: Sage.
- Devault, M. (2004). Talking and listening from women's standpoint. In S. Hesse-Biber & M. Yaiser (Eds.), *Feminist perspectives on social research* (pp. 227–250). New York: Oxford University Press.
- Kitzinger, J. (1994). The methodology of focus groups: The importance of interaction between research participants. *Sociology of Health and Illness*, *16*(1), 103–121.
- Kitzinger, J., & Barbour, R. (1999). Introduction: The challenge and promise of focus groups. In R. Barbour & J. Kitzinger (Eds.), *Developing focus group research: Politics, theory and practice* (pp. 4–19). London: Sage.
- Kitzinger, J., & Farquhar, C. (1999). The analytic potential of "sensitive moments" in focus group discussions. In R. Barbour & J. Kitzinger (Eds.), *Developing focus group research:*Politics, theory and practice (pp. 156–172). London: Sage.
- Krueger, R., & Casey, M. (2000). *Focus groups: A practical guide for applied research* (3rd ed.). Thousand Oaks, CA: Sage.
- Lincoln, Y., & Denzin, N. (2000). The seventh moment. In Y. Lincoln & N. Denzin (Eds.), *The handbook of qualitative research* (2nd ed., pp. 1047–1065). Thousand Oaks, CA: Sage.
- Litosseliti, L. (2003). Using focus groups as research. London: Continuum.
- Martire, G. C. (2006). *Menstrual consciousness development: An organic inquiry into the development of a psycho-spiritually rewarding menstrual relationship*. Unpublished doctoral dissertation, Institute of Transpersonal Psychology, Palo Alto, California.

- Morgan, D. (1988). Focus groups as qualitative research. Newbury Park, CA: Sage.
- Myers, G., & Macnaghten, P. (1999). Can focus groups be analysed as talk? In R. Barbour & J. Kitzinger (Eds.), *Developing focus group research: Politics, theory and practice* (pp. 173–184). London: Sage.
- Owen, L. (1998). Honoring menstruation: A time of self-renewal. Freedom, CA: The Crossing.
- Soanes, C., Waite, M., & Hawker, S. (Eds.). (2001). Oxford dictionary, thesaurus, and wordpower guide. Oxford, UK: Oxford University Press.
- Puchta, C., & Potter, J. (2004). Focus group practice. London: Sage.
- Reissman, C. (2001). Analysis of personal narratives. In J. Gubrium & J. Holstein (Eds.), *The handbook of interview research: Context and method* (pp. 695–710). Thousand Oaks, CA: Sage.
- Shuttle, P., & Redgrove, P. (1978). *The wise wound.* London: Harper Collins.
- Stewart, D., & Shamdasani, P. (1990). *Focus groups: Theory and practice*. Newbury Park, CA: Sage.
- Taylor, N. (1997). Women's experience of the descent into the underworld: The path of Inanna— A feminist and heuristic inquiry. Unpublished doctoral dissertation, Institute of Transpersonal Psychology, Palo Alto, California.
- Waterton, C., & Wynne, B. (1999). Can focus groups access community views? In R. Barbour & J. Kitzinger (Eds.), *Developing focus group research: Politics, theory and practice* (pp. 128–142). London: Sage.
- Wickham, S. (2004). *Sacred cycles: The spiral of women's wellbeing*. London: Free Association Books.
- Wilkinson, S. (1999). How useful are focus groups as feminist research? In R. Barbour & J. Kitzinger (Eds.), *Developing focus group research: Politics, theory and practice* (pp. 64–78). London: Sage.
- Wilkinson, S. (2004). Focus groups: A feminist method. In S. Hesse-Biber & M. Yaiser (Eds.), *Feminist perspectives on social research* (pp. 271–295). New York: Oxford University Press.