

Honouring Voice: Viewing Qualitative Data Analysis as an Ethical Practice in Nursing Research [Comment]

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Introduction: Listening as a Nursing Value

Nursing has long known the value of listening and truly hearing what people have to say. In clinical practice, genuine attentiveness to the voices of patients, families, and communities is central to understanding their needs, delivering care, and building trust and authentic therapeutic relationships. In nursing research, this commitment to listening is most evident in qualitative inquiry, where people contribute to nursing research and knowledge through sharing their experiences, insights, and often, their vulnerabilities in the hope that their participation will advance knowledge and improve care.

Yet while much attention is paid to research design and data collection, the ethical significance of the analytic phase is less often made explicit. In this commentary, we consider what it means to work with other people's words, experiences, and lives, and explore qualitative data analysis as an ethical practice through which participants' stories are interpreted, shaped, and translated into nursing knowledge.

From Voice to Knowledge: What Happens in Analysis

In qualitative research, data analysis is the stage at which participants' voices are translated into research findings. Spoken and written accounts shared through interviews, focus groups, or written narratives do not enter the nursing knowledge base in their original form. Instead, they are interpreted, organised, and reshaped through analytic processes that involve identifying patterns, developing themes, and constructing meanings. These processes allow researchers to move from individual accounts to insights that can inform practice, education, and policy, but they also involve choices about what is emphasised, combined, or left in the background.

These analytic choices are not simply technical decisions. How data are grouped, interpreted, and represented influences which aspects of participants' experiences are made visible, and which receive less attention. In this way, analysis plays a central role in shaping how participants and their experiences are understood by others. Recognising this helps position qualitative analysis as more than a procedural task; it is a point at which ethical responsibility is enacted, as researchers decide how participants' voices are carried forward into the research record and into nursing knowledge.

Analytic Clarity, Representation, and Ethical Care

Recent methodological discussions in nursing have highlighted both the strengths and challenges of commonly used qualitative approaches, including the importance of 'quality' in qualitative research (Cleary et al., 2025). For example, Villamin et al. (2024) describe qualitative descriptive design as a flexible and accessible approach that remains close to participants' accounts while allowing researchers to address practice-relevant questions. This proximity to participants' words is often seen as a strength, particularly in nursing research that seeks to reflect lived experience. However, use of qualitative methods is a double-edged sword, creating challenges in ensuring methodological rigour; this closeness also carries responsibility. This involves critical self-reflection for researchers, including the identification of biases, values, and preconceptions. Engaging in reflexivity helps researchers navigate their role as a 'human instrument' and encourages active reflection on how their biases may influence the research process and, ultimately, the study's outcomes (Villamin et al. 2024). When analytic processes are loosely described or taken for granted, there is a risk that the careful listening that occurs during data collection is not fully sustained through analysis.

Similarly, ongoing debates about analytic clarity and methodological coherence in qualitative nursing research underscore the importance of making analytic decisions visible and intelligible (Watson & Jackson, 2024). While these discussions are often framed in terms of rigour or quality, they also raise

ethical questions about representation and respect. Analysis is a site where power is exercised; it is a form of ethical practice in action. Analyses which are poorly articulated or analytically weak risk undermining methodological integrity, but also may fail to honour the time, trust, and experiential contributions of study participants. From this perspective, analytic transparency functions as a measurable fulfillment of an ethical obligation to the participants' by working to ensure the stories are neither diminished nor misrepresented as they are translated into the nursing knowledge base.

Participants rarely see how their accounts are analysed, yet the outcomes of this process shape how others understand their experiences. Clear and robust analytical processes, therefore, can be understood as a form of ethical care.

Viewing qualitative analysis through an ethical lens invites reflection rather than prescription. It does not require adherence to a particular analytic method, nor does it imply that there is a single correct way to analyse qualitative data. Instead, it encourages researchers to remain attentive to the human origins of their data and to consider how analytic choices honour, preserve (or potentially distort) participants' contributions. This may involve staying close to participants' meanings, resisting unnecessary over-abstraction, or acknowledging uncertainty and complexity rather than smoothing it away in pursuit of tidy findings.

Uncertainty is an inherent part of qualitative analysis, and researchers' responses to this uncertainty have ethical implications. Participants' accounts may be partial, contradictory or emotionally difficult to work with and the pressure to produce coherent findings can lead to premature analytic closure. Resisting over-abstraction, acknowledging complexity and attending to what does not readily align are not analytic weaknesses but ethical choices. These practices recognise that the lived experience is rarely tidy and support careful representation of participants' contributions, rather than reshaping them to fit analytic convenience.

Analytic Care as an Ethical Responsibility

Ethics in qualitative research is often considered in terms of consent, confidentiality, and governance processes, particularly through the ethics approval pathway (Pieri et al, 2025). These considerations are essential, but they do not exhaust the ethical responsibilities of qualitative researchers. In qualitative research, ethical considerations continue beyond formal approval processes to include how participants' accounts are interpreted and presented. Decisions about which data to highlight, including the use of particularly vivid or emotive excerpts, shape how participants and their experiences are portrayed. Careful and balanced representation of the dataset, alongside openness about its boundaries and limitations, supports ethical research practice by respecting the contributions participants have made (Broom, 2006).

Approaches to qualitative analysis that are careful and transparent contribute not only to the strength of the research, but also to ethical research practice. Making analytic decisions visible helps show how interpretations are shaped by participants' accounts and supports responsible representation of their contributions within the research record. Ethics is therefore enacted in practice, through everyday research decisions that shape how participants are represented and positioned. From this perspective, analytic transparency and reflexivity are not only markers of ethics and rigour, but expressions of respect for those who have shared their stories, as they make visible how participants' accounts have shaped the findings and acknowledge the relational responsibility researchers hold toward participants' voices (Peddle, 2022).

For nurse researchers, particularly those early in their research careers, recognising analysis as an ethical practice may be especially valuable. Qualitative analysis often feels challenging and uncertain, with pressure to rush from data to results and dissemination. Framing analysis as 'ethical attentiveness' legitimises the time, care, and reflection this work demands. This perspective also

aligns closely with nursing's broader professional values, reinforcing the idea that *how* we generate knowledge matters as much as the knowledge itself.

Conclusion: Why How We Analyse Matters

In emphasising the ethical dimensions of qualitative data analysis, this commentary does not seek to add another set of procedural expectations. Instead, it provides an invitation to pause and reflect on what it means to work with other people's words, experiences, and lives. Honouring participants' voices is not achieved at the moment of data collection alone; it is realised, sustained, or sometimes compromised in the analytic phase. Attending carefully to this process is one way nursing research can continue to reflect its foundational commitment to care, respect, and listening. In this sense, qualitative analysis is not only a methodological responsibility but a moral one, shaping how participants are remembered within the nursing knowledge base. Everyday analytic decisions, including what is foregrounded, how meanings are framed, and how findings are written, are therefore also ethical acts. Recognising analysis as an ethical site invites researchers to approach this work with the same attentiveness and care that underpin nursing practice itself.

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