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Access as Trajectory: Entering the Field in Organizational Ethnography

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Since ethnography has been recognized as a proper method for organizational analysis, many textbooks and articles have acknowledged its characteristics and specificities and sought to account for them. Curiously, many of these works have not considered (or have explicitly avoided) one important issue concerning organizational ethnography, namely the negotiation of access to the field. Drawing on a one-year organizational ethnography on the production and reproduction of inequalities in accessing health services in Italy, this paper focuses on the organizational and ethnographical dynamics involved in accessing the field. In particular, it shows that the negotiation of access may per se be an important moment of observation in that it reveals some of the principal characteristics of the organizational processes that the ethnographer is about to study. Moreover, drawing on ethnographic observations, the paper shows that there are no substantial reasons for assuming that negotiating access to the field takes place in a dimension unconnected with the actors' everyday logics and practices of action. Accessing the field is thus framed as a trajectory, a never-ending process of engaging with multiple actors and organizational dynamics which can lead in different directions, depending on the ethnographer's ability to follow organizational processes and to demonstrate his/her ability to take part in them.

INTRODUCTION

Since ethnography has been recognized as a proper method for organizational analysis, many textbooks and articles have acknowledged its characteristics and specificities and sought to account for them. Ethnographic rhetoric (Van Maanen, 1988), narrative genre (Jeffcut, 1994), the role of the researcher (Kunda, 1992; Van Maanen, 1995) and the different (organizational and gender) identities that s/he can perform and that are attributable to him/her (Bruni, 2006), are just some of the major themes currently under debate. In addition, various handbooks on organizational research or on qualitative sociology describe techniques for observation, interviews, data recording, interpretation of fieldnotes, and show how to write a research report. Curiously, however, the issue of accessing the field often seems under-represented or taken for granted in this debate. This is odd, considering that gaining access to the organizational setting of interest is essential for a study to begin. This may be related to the fact that, since the early organizational ethnographies (Dalton, 1959), the ethnographer's presence has sometimes been covert or mingled with the role of consultant.

This paper refers to an organizational ethnography on the organizational production and reproduction of inequalities in accessing health services in Italy. It concentrates on the organizational (and ethnographical) dynamics involved in accessing the field. In particular, it shows that negotiation of access may be an important moment of observation per se, in that it reveals some of the principal characteristics of the organizational processes that the ethnographer is about to study. Moreover, the paper draws on ethnographic observations to argue that there is no substantial reason for assuming that negotiating access to the field takes place in a dimension unconnected with the actors' everyday logics and practices of action. Accessing the field will be framed as a trajectory, a never-ending process of engaging with multiple actors and organizational dynamics; a process which begins on entering the field, but which may lead in different directions, depending on the ethnographer's ability to follow organizational processes and participate in them.

The paper is organized as follows. The first section describes the research aims, setting, and design. The second section presents the ethnographic account of what happened on entering one of the services observed. This will be used as a starting point for discussion of some of the main issues debated in the literature on accessing the field in organizational ethnography. Finally, the conclusions underline some of the practical and ethical implications raised by the story presented and by the more general issue of access in organizational ethnography.

STUDYING INEQUALITIES REPRODUCTION IN ACCESS TO HEALTH CARE SERVICES: THE RESEARCH BACKGROUND

The accounts that I am about to present require a brief description of the research aims, setting and design. The observations are drawn from an ethnographic research study conducted in the city of Bologna (Italy) in 2003-04 and centered on the organizational processes that may generate or reproduce inequalities in access to healthcare services (Bruni, Fasol and Gherardi, 2007). The research arose from the local authority's desire to map local best practices in access to health services, with particular regard to how these practices facilitate access for different categories of users.

Our intention was not to interpret inequalities as ascribed to individuals, but instead to emphasise their socially inscribed and embodied component, consistent with the current interest among organization scholars in the processual (Cooper and Law, 1995) and practical (Gherardi, 2000) dimension. The view that the study of organization amounts to the study of organizing practices is increasingly accredited in the sociology of organizations (Fox, 2006; Gherardi, forthcoming); and, in particular, from the study of gender as a practical and situated activity (see for example *Gender, Work and Organization's* special issue on Theorizing Gender as Practice, 13: 6, 2006). I borrow the idea that, like gender differences, inequalities also spring from relational

processes comprised in the interactive and discursive practices of everyday organizational life.

RESEARCH DESIGN: ZOOMING IN ON THE FIELD AND PLOTTING THE MAP OF ACCESS POINTS

In the initial phase of research, I zoomed in on the field (Silverman, 2000) by focusing my observation on the Centro Unico di Prenotazione (CUP), the central booking service in Italy for healthcare appointments. From an organizational point of view, a CUP is the obligatory passage point for anyone requiring healthcare, and it may generate specific trajectories of access: waiting times for an appointment, point of delivery, and the reference medical unit. However, as the operators themselves pointed out to us, the CUPs handle access for users who have already been selected to some extent. Use of a CUP requires enrolment in the Healthcare Register and the issue of a doctor's prescription¹, so that the user has already in some way begun an access trajectory, which leads him/her to the CUP.

In January 2004, I began to plot a map of access points to health services (catering to unequal categories) in the province of Bologna. I identified a service providing general medical examinations and basic pharmaceutical treatment for illegal immigrants²; a surgery providing general medical examinations and basic pharmaceutical treatment for the indigent; a service for recently-immigrated women and children not yet eligible for the National Health Service and providing gynaecological and paediatric services, psychological counselling, and general medical examinations.

After obtaining this first snapshot, on the basis of a similarity/difference criterion, I decided to combine observation of dedicated points of access with observation of ones that were instead universal: an accident and emergency department (still one of the most frequently used points of access to healthcare services) and a health advisory bureau (because of the close links of these facilities with the local community). Then, as often happens when a flexible research design is used (Cardano, 2003), the observation was extended to two other settings which were not originally considered but acquired significance as the fieldwork progressed.

Each service was observed for the duration of a working week in the months between February and July 2004. The main observation method was participant observation, together with the shadowing (Sachs, 1993; Bruni, Gherardi and Poggio, 2004) of some operators and ethnographic interviews carried out at the same time as the observation. My role as researcher was always announced to the operators, but it was not always disclosed to the users, for two reasons. The first was strictly connected with the research: because observation was being made of organizational processes (not of the service users), it was agreed with the service managers that it was not necessary to inform the subjects about the researcher's presence. The second reason was more pragmatic: it would have been impossible to inform every single user without disrupting the workflow.

1. With some rare exceptions (e.g. ophthalmology and basic dentistry).

2. Under current Italian immigration law, immigrants without stay permits are ineligible for any form of health care except so-called "lifesaving assistance". Note, however, that obtaining a stay permit in Italy may take anything up to six months, and also that there are various interpretations among clinicians of what constitutes lifesaving assistance.

The research setting thus seemed a situation where access for observation had been negotiated and was almost an entitlement. The services that I was about to enter all depended on the local health board (i.e., the research commission), which had assured me that access would be substantially unrestricted. The heads of the various services had all been informed that a sociologist from the University of Trento, engaged in a research project on access to healthcare services commissioned by the local health board, would contact them to arrange a brief interview and request permission to observe their service's activities for a working week.

Around one month after the letters had been sent to the service heads, however, many of them had not replied, and those few that had done so had imposed (more or less explicitly) the condition that they must first meet the researcher and discuss the form that his presence in the organization would take. I therefore contacted all the service heads personally: those who had replied in order to fix an appointment so that we could get to know each other, and those who had not replied in order to remind them of the letter sent by the regional administration. The following section provides an account of what happened with one of them.

NEGOTIATING ACCESS IN RESEARCH ON ACCESS INEQUALITIES: THE CASE OF COUS-COUS

Cous-Cous was founded in 1992 as an association of volunteer doctors providing basic healthcare for illegal immigrants. It currently has a staff of 30 people, divided between doctors and administrators.

The director had not replied to the letter from the regional administration, but it only took a telephone call from me to fix an interview and establish the ground rules for my observation. The meeting took place in the office that the director also used as a surgery, and on conclusion of the interview, he raised no objection to my observing the service's day-to-day work. He said that he would inform the personnel and only asked me to go to the centre on the same day and present myself to one of his colleagues, responsible for scheduling shifts for the personnel.

ENTERING COUS-COUS

When I arrive at 16:50 (the center opens at 17:00), there are already a large number of people (around twenty) waiting in the corridor, some of them sitting on a row of seats outside the surgery. I take in the scene: a marked mix of ethnic groups (mainly East Europeans and North Africans) and ages, and a wide variety of languages being spoken. However, the atmosphere is subdued: people are talking in undertones and the only strident sound is the ringing of cell phones.

Stuck to the surgery door is a sheet of paper on which people write their names. I knock on the surgery door. It is opened by what appears

to be a youth (a doctor, in fact, but he looks like a youth to me³), who is immediately welcoming when he hears my name: «Of course, I got the email⁴, come in!».

Never before have I begun ethnographic observation with such a welcome, but the surprise is not long in coming: Giuseppe (for this is the doctor's name) wants me to work! He explains that he is on his own (the secretary is absent and the other doctor is late), so if I can help with the administrative part, he can get started with the medical examinations. I am pleased to lend a hand, but I do not want to be a hindrance. However, Giuseppe's tone indicates that he is ordering rather than asking me to help. In fact, as I look around in some bewilderment, he has already taken the registration forms for new patients and is telling me how to compile them.

I take off my jacket and ask whether I should don a white coat. He answers: «No no, I mean, if you want to, there's one over there [indicating a coat hanging behind the door]... I never wear one... You know, here the atmosphere's a bit informal... and anyway, wearing a white coat all day, what a pain!».

INSTRUCTING A NEWCOMER

«Right, it's really easy: you put a cross here on "issue" or "renewal"; then you write the name, surname, date of birth, nationality, country of origin, marital status, children...; here you write the number and type of document, they usually have passports; here you put residence, I mean, residence... they usually have a domicile; here you write when they arrived in Italy, more or less, the precise date doesn't interest us... Here you should put whether they're unemployed, if they're working, if they're studying... but since they're illegal most of them are unemployed. Here, against "Notes" you write "issue (or renewal) of STP⁵ card", which you never know... Then you turn [the form] over, tick 1, 2 and 4, get them to sign here and here, and stamp it here... or somewhere else, wherever you want, it's the stamp that matters. Number 4 is the "declaration of indigence", so that they can get free treatment and medicine. Actually, you should ask them whether they're indigent, but, I mean... I tick it anyway, automatically... I mean, these people are already illegal; they're lucky if they're doing black work, and all they need is for us to make them pay for health care! Then another signature goes here, but it has to be my signature. With this form they can go downstairs and are issued with a STP... you know what that is? [I nod], but before you give it to them, you have to copy all the information onto this other form, which we keep and put in the medical record folder. The folders are here [a number of folders containing the two forms are already on the desk], you write their name and surname on the front, and you do the same on this card [which is put in an alphabetical file so that the folder can be retrieved if the STP does not state the folder number]. Use the list stuck on the door to call them in... use it, because otherwise they start slugging each other! [Giuseppe's tone is ironic, but he then tells me that there have indeed been mini-riots over who has precedence]. Come, I'll show you...»

3. I presume that I gave the same impression to the doctor.

4. An email message was sent by the chief surgery doctor to notify the personnel of my presence following our agreement.

5. The STP (Stranieri Temporaneamente Presenti) card is a special health card introduced by the regional administration so that immigrants without stay permits can access health services. It is nominal, is valid for six months, and is renewable.

We go to the door, and as soon as Giuseppe opens it, four people push forward. Giuseppe shuts them up before they can speak: «Right, who here ONLY has to get the card, ONLY THE CARD?» There is a buzz of voices in the corridor, and Giuseppe begins with the first name on the list; but the person is not here. He passes to the next person, but he is waiting for a medical examination, and so are the next two people. The fifth person needs a card. Giuseppe tells her to come into the office and then turns to me: «Right, while you're doing her form, I'll start with the examinations. You've understood what you've got to do, right? It's easy, and anyway you can always ask me, I'm over there [in one of the two surgeries]».

Giuseppe calls out the name of the first person on the list needing a medical examination (who is not there, so he calls the second name), and abandons me to my fate.

REGISTERING THE PATIENTS: AN ACTION TAKEN FOR GRANTED

I am unfamiliar with the form; even less do I understand the situation. What language should I speak; should I use informal "tu" or formal "lei"? While I am completing the form, should/can I engage in conversation? How long should I take to fill out the form? These are details of no little importance: some people obviously do not understand my questions but they make every effort to reply, always in Italian; others do not understand what/who I am talking about if I use the formal third person singular to address them; compiling the form is laborious and a silence ensues which I find irksome; as I slowly complete the form, I gain the impression that some users are growing impatient. In other words, I do not know what they expect from the service, and consequently I do not know how to behave.

Moreover, as was perhaps predictable, the second form (the one that stays in the medical records folder) has items which do not appear on the first form: place of arrival in Italy; presence (or otherwise) of family members; type of dwelling (private home, reception centre, dormitory); type of work in Italy (if the person works); type of work in the home country (if the person worked); religion. Compiling this second form further increases the time separating the immigrants from possession of a card which in some way ensures their access to health care, and which at the same time attests to their existence as individuals in a particular space and time.

As soon as I begin to fill out the forms, I encounter exceptions: someone wants to renew a STP card on behalf of someone else; the name of the birthplace on the Ukrainian documents is indecipherable because it is written in Cyrillic (and they do not know how to write in Italian); some cannot remember (or do not want to disclose) their date of arrival in Italy; Moroccan passports give only the year of birth, not the date; the immigrants sometimes have photocopies of documents but not the originals; the less educated are not always able to say how many years of school they have attended; some want to renew STP cards before they expire; at a certain point, there are no more index cards for the medical records. In all these situations, I ask Giuseppe

what to do, and his answer is always: «Yes, yes, there's no problem». I gain the impression that what matters is completing the form (in one way or another). As to exact consistency between the items and what is written, this appears to be less important.

After I have been in the office for around an hour, however, the situation seems to be under control: I am in the patient registration area filling out forms while Giuseppe is in one of the two surgeries examining patients. As I grow accustomed to the work, I am able to detach myself and look at the situation from outside. When I go out of the door to call someone, I am besieged by those waiting. And there is always someone (often the same person) who wants to check their situation and asks what number on the list has been reached. Moreover, because the immigrants have written their names on the waiting list in their own handwriting, it is not always possible to decipher them and/or pronounce them properly, so that it is better to call the name out twice with a slight variation of pronunciation. If the person does not respond, someone else may tell them that their name has been called, or inform the attendant (me) where the person is sitting.

RECOUNTING AND RECOUNTING ONESELF

I am struck in my interaction with the users by their desire (regardless of their linguistic competence) to express themselves and to talk about themselves. When asked about children, none of them answer just "yes" or "no", but they all tell me how many children they have; when asked about their date of arrival in Italy, they also tell me how they arrived; when asked about work, many of them specify what their occupation is/should be. As a paradigmatic example, while I am compiling the STP forms, a Moldovan woman fishes photographs out of her handbag and begins to show them to me: they are of her two daughters (both students in Moldavia), and the woman tells me all their vicissitudes, so that I am obliged to leaf through almost the entire album.

Finally, there are the micro-stories that develop between me and the immigrants. A young Tunisian who has to have a blood test (because his wife is pregnant) wants to be reassured that hashish and marijuana markers will not appear («because I smoke a lot, always... and if they discover it...»). A Moroccan man wants to know if the people working for the service are all "real" doctors, because he fears he will not be treated properly in a facility for illegal immigrants. Another Moroccan wants to know if any of the doctors speak French, because he cannot speak Italian. He is accompanied by a young boy (Moroccan, but he could be Italian from his appearance and his language ability, whose relationship with the older man I cannot ascertain), who acts as an interpreter.

«WE AT COUS-COUS»

Time passes quickly, and although at least forty people came during the afternoon, the corridor is now empty. Giuseppe thanks me warmly

6. I observe later that at 19:30 the cleaning women usually knock on the Cous-Cous door and (vigorously) invite all those present to leave so that they can finish their work. It may also happen that someone arriving late walks across the floor that had just been mopped and is still damp, understandably annoying the cleaners.

and says that only rarely do they finish on time. «According to the schedule, the service should close at 19:00, but when you've got ten people who've been waiting for two hours, what are you supposed to do? Tell them to come back tomorrow?» This prolongation of the service does not help relations with the neighbourhood (i.e., the rest of the building): «The cleaning women want to go home at a certain time (quite rightly) and so every so often... they switch the electricity off!⁶» Although Giuseppe laughs at this as an exceptional case, I have the distinct impression that Cous-Cous's relations with its neighbours are not particularly good. For example, on entering the building the presence of Cous-Cous is almost invisible, and I myself had to ask for information the first time I went. When I reached the first floor, I could not understand whether the office adjoined the surgeries, so I (mistakenly) knocked on the door of the health centre director. I asked for Dr. Picciatello, but the person who answered the door said that there was no Dr. Picciatello there. When I added «Cous-Cous», her reaction was: «Ah... it's that we don't know the names of our colleagues.»

But another reason why Cous-Cous stands out is that the doctors describe themselves as a community with practices alternative to those of ordinary hospital facilities. When Giuseppe talks about Cous-Cous he does so in terms of "us"; when he describes its structure, he distinguishes between a group of more expert doctors ("the founders") and one of apprentices ("the youngsters"). He asks me about my curiosity in Cous-Cous, and when I have explained, he exclaims with pleasure «So we at Cous-Cous are famous then!» Before locking the door, he takes a last look round to make sure that everything is in place (the new folders, the desk, the chairs, the windows), rather as one does before leaving home.

As we go out, Giuseppe removes the waiting list stuck to the door, and complains (through clenched teeth) about the rapidity with which he has had to examine the patients. Given the large number of them, and the fact that for large part of the afternoon he has been the only doctor present, he has not been able to devote enough time to each patient. «To do a proper examination, you have to palpate and listen, then you have to explain, try to make yourself understood, but when you've got the corridor full of people, what can you do?! Today I've listened, I've got them to describe their symptoms, I've prescribed medicines... but I haven't had time to put them on the examination couch and touch them one by one.»

According to Giuseppe, the main reason why people resort to Cous-Cous is their unlawful situation, which precludes any other access to health care. Moreover, Giuseppe continues, «the people who come here have already been creamed off. In the sense that they come here because they've been told to by a friend, relative, or at any rate someone they trust.» This reminds me that many of the people that I registered were accompanied by someone already in possession of a STP card, and that all of them seemed very well informed about the service provided, even if it was the first time they had used it.

Two people are waiting for Giuseppe outside the building. They have not been able to enter because they arrived too late (the main doors to

the health board building are closed at 18:00), but Giuseppe has told them (by telephone) to come this afternoon, so they have been waiting for him. «You've done exactly right!», says Giuseppe, as he leans on a car and begins to write prescriptions.

NEGOTIATING ACCESS: FROM THE PROFESSIONAL STRANGER TO THE SECRET APPRENTICE

The observation of Cous-Cous raises numerous issues concerning organization, the routine management of differences and inequalities, and the trajectory of access to the organization for the clients. I have sought to account for them using a deliberately impressionistic narrative (Van Maanen, 1988), but the aim of this paper is not to offer an organizational analysis of what is described.

The story that I have offered is rather an attempt to frame negotiation and access to the field as both a research process and an organizational process: that is to say, as a dynamic that not only permits reflection on how the researcher gains access to the organization, but also an occasion to begin observation and focus on understanding significant organizational processes.

NEGOTIATING ACCESS: PRESENTING ONESELF AND "PASSING"

Ethnographers well know that entering a research context requires the researcher to undergo a distinctive process of re-socialization (Emerson, Fretz and Shaw, 1995), as well as to learn (but not necessarily share) the values, norms and behavioral precepts of the host community (Spradley 1980: 3).

The negotiation of access has in fact generated discussion on two main issues in the literature: 1/The role that organizational actors ("gatekeepers") may and actually do perform in facilitating the researcher's access (Hammersley and Atkinson, 1995; Silverman, 2000); 2/The reversal of status between observer and observed, whereby the observer becomes the object of observation by the natives, who seek to determine if, and to what extent, they can trust him/her (Cardano, 2003; Bruni, Gherardi and Poggio, 2004).

The two issues are obviously connected. They highlight that when access to an organizational context is being negotiated, the actors are much more interested in the researcher as a person than in the theoretical assumptions of the research. This is something that is by now taken for granted in ethnographic work (Denzin and Lincoln, 1994). It is all the more true of organizations, where the presence of a researcher may interfere with both immediate productive activity (the work performed by people) and the broader organizational setting (the inter-relations among actors). Often, moreover, organizations have rules concerning the non-disclosure of information and the privacy of the subjects involved. Their concern is therefore to maintain control over the processes taking place internally.

Thus, what the literature suggests (e.g., Silverman, 2000) is to pay attention to the organization's characteristics (type and size); not to assume that the actors encountered will be acquainted with organizational ethnography; to persuade the gatekeepers (actors who either spontaneously or because of their institutional role protect the organization against intrusion by undesirables) that neither the presence of an ethnographer, nor his/her research will cause damage and/or disruption to the organization; to guarantee anonymity, respect for privacy, and minimum intrusiveness by the researcher. Silverman (2000) notes the importance of showing the organization that the analysis will be of interest to the organization itself, and specifying that observing does not mean spying. But the crucial factor (which the literature often overlooks) is the researcher's image.

We know from Goffman (1959; 1967) that correct role interpretation is important in social interactions, and that our physical appearance is inevitably one of the first features perceived when we encounter others, and may consequently influence the situation. The majority of authors therefore insist that the ethnographer should present him/herself as a professional and convey an image which does not clash with the organizational context and thereby heighten the sensation of intrusion and disruption that the actors will anyway feel. Silverman (2000), for example, recounts an episode when he was negotiating access to an organization with a doctor (dressed in very traditional manner) and was rebuffed because (according to the doctor) the leather jacket that Silverman was wearing showed scant respect towards the patients.

However, although image is of fundamental importance, I myself have encountered situations where an image clashing with the context and/or the actors' expectations has proved more a resource than an impediment (Bruni et al., 2004; Bruni, 2006), my impression being that access to the field was granted amongst other things because the interlocutors were intrigued by my physical appearance. They were curious to see how other members of the organization would react, what sort of research I would conduct, and how I would get myself accepted. Note that a certain amount of ambiguity may even be advantageous: in my experience, for example, people sometimes grant access to their organizations because they have not exactly understood what the research involves and their curiosity has been aroused (Bruni et al., 2004).

In this sense, access strategies are also the contingent product of the researcher's creativity and ability to improvise. This was particularly explicit in reference to *Cous-Cous*, where I introduced himself by enacting my "character" in terms of both similarity and difference: what was important was to play along, showing awareness of one's image and an ability to handle it regardless of whether or not it matched that of the interlocutor. Hence negotiating access to the field can be termed a "passing" activity. Garfinkel (1967) uses this term with reference to the inventiveness and tenacity required to give persuasive reasons for one's actions. Moreover, the term has an intrinsic polysemy: it carries the sense of passing a test but also that of passing oneself off as

something which one is not, the ability to position oneself within a discourse and to act as an insider. As in the ethnographic experience of entering Cous-Cous, the tipping point in the negotiation often comes when the researcher manages to show that s/he belongs to the same world as the actors, and therefore passes by playing the game, getting involved, and privileging elements which give the researcher empathetic closeness to the context. For that matter, ethnographers increasingly maintain that it is illusory to believe that researchers can base their requests to witness and participate in everyday interaction on their analytical distance, putting themselves forward as entirely extraneous and disinterested actors (Lerum, 2001).

Thus, the crux of the negotiation in the case of Cous-Cous seemingly lay in my ability to present myself as a participant just like the actors, and therefore in "passing myself off" as a participant, as involved, as privileging (probably) elements arising from my empathy with the environment. It is ideological to believe that a request to observe and participate in everyday action can be based on the analytical distance of a «professional stranger» (Agar, 1980), or on the claim that one is entirely extraneous and disinterested. On the contrary, in order to find my bearings, I adopted a behavior that resembled that of Garfinkel's (1967: 146) «secret apprentice»:

- noting situations in which I felt that the others shared particular assumptions;
- learning these assumptions during the interaction (without realizing that I was doing so);
- taking part in situations in which the others presumed that the principles being learned were already shared.

At the same time, it is important to note that amid the interactions among gatekeepers, intermediaries, guarantors and ethnographer, actors begin reciprocally to construct their identities. Already in this first phase, therefore, ethnographers are able to collect information about the place they are seeking to enter.

Thus, let us return to Cous-Cous and explore what can be learned in ethnographical and organizational terms as access is negotiated.

NEGOTIATING ACCESS: AN OPPORTUNITY FOR ETHNOGRAPHIC AND ORGANIZATIONAL OBSERVATION

In relation to the ethnographic account, one of the first things to be noted was the enthusiastic welcome and the informality with which the organization related to an external observer. This inclusiveness was such that even an outsider (myself) was immediately co-opted and allowed unrestricted access to the workings of the organization. Whilst the instructions given me can be interpreted as technical information about registering users and issuing a STP card, they also communicated what constituted competent forms of action within this organization. Competence at Cous-Cous was an ability to handle the bureaucratic aspects of everyday work in the same way as I was asked to cope with a form entirely unfamiliar to me, and whose main characteristic was (as the doctor put it) «it's got a

stamp». From the way in which I was instructed, it seems that the logic was that of adapting the bureaucracy to the users: not coincidentally, the doctor followed every instruction on how to compile the form with an alternative possible action, according to the actual case at hand. This logic manifested the value commitment required of the organization's members and mirrored the actors' inclusive attitude towards the extraneous: *Cous-Cous* is a voluntary association set up to affirm the universality of a right (to health in this case) and which therefore seeks to translate a political doctrine into its organizational practices (as the doctor said with reference to the declaration of indigence: «These people are already illegal; they're lucky if they're doing black work, all they need is for us to make them pay for health care!»). For this same reason, it was somehow impossible for a researcher to pretend to be there without engaging with everyday activities.

The characteristics of organizational action (suspension of the taken-for-granted; the ambiguous boundary between the interior and the exterior; the organization's fiduciary dimension) were the same elements that I had to deal with in order to enter the organization; and the destructured, unpredictable and improvised nature of action that I experienced was probably little different from that experienced every day by the center's personnel. Moreover, the way in which I gained access to the field mirrored the same feeling of being out of place that immigrants experience when entering a public service for the first time: not knowing what to do, how to talk, what to refer to, how to interpret practices and meanings encountered for the first time.

From an even broader perspective, one may argue that the processes inducing actors to accept the presence of a researcher do not relate to a logic other than that which operates in everyday organizational practices. As in the *Cous-Cous* episode, just as the researcher is concerned to make a good impression (the purpose being to gain access to the field), so the organizational actors want to furnish a positive image of themselves and to express their opinions about the place where they work. Thus, the way in which the researcher passes characterizes also the organization and can be a useful benchmark for observation and interpretation of future events.

For the sake of expository economy (researchers are accustomed to writing), organizational ethnographies omit detailed treatment of entry negotiation processes, at most recounting their first encounters in confessional tales (Van Maanen, 1988; Kunda, 1992). Hence there are no substantial reasons for assuming that negotiation of access to the field takes place in a dimension unconnected with the actors' everyday logics and practices of action. In particular, if the focus is on organizational practices, negotiating access is a significant moment of interaction at which to begin observing and noting the practical action of the actors. It is an activity that takes place in a dimension which relates both to the subjects' patterns of everyday action and to the assumptions which inform the research. It is therefore *stricto sensu* an element to be taken into account and analyzed.

NEGOTIATING ACCESS: THE SHADING OF OVERT AND COVERT PARTICIPATION

Juxtaposing the image of the professional stranger with that of the secret apprentice, one can also dissolve the usual distinction between overt and covert participation. There has been much debate on which position enables the researcher to observe “real” organizational life. But focusing on the process of access, in fact, one can note two points.

First, the role of the researcher (overt/covert) does not have a substantial influence on the kind of data that s/he will be able to collect. In both cases the observation will be temporally limited and dependent on the situations that s/he will have the opportunity to witness and the ability to account for. Thus, every fieldwork experience will be intrinsically partial and will not be exhaustive. At the same time, the truth of a fieldwork experience (as well as the role of the researcher) will be situated in the way(s) that the trajectory of access constructs actors, researcher and the organization observed.

Second, organizational life consists of interactive processes and everyday work practices. Real organizational life is dynamic. Consequently, the ability of ethnographers should be mainly an interpretative ability to account for the variety of processes observed and reassemble organizational and work practices in a meaningful world. The idea of a «meaningful world» (Schutz, 1967: 9) reminds us that reality (organizational, but not only) is interactively constructed, does not exist per se, and that its order is precarious, capricious and subject to constant discussion. As in the Cous-Cous case, where the researcher immediately has to confront organizational practices (and contingent work), the negotiation of access probably marks the beginning of the debate between researcher and organization and can be an occasion to observe how the organization faces ambiguous events, such as that of an extraneous other who is trying to enter it.

Third, there is an ethical dimension in doing research and accessing the field (Adler and Adler, 1994). Entering an organization pretending not to discuss and arrange with the people involved how the observation will take place reproduces the behavior of those anthropologists who pretend to study natives by assuming that the latter were sufficiently developed to understand the reason for the research. Silverman (2000: 199) advises researchers not to fall in the trap of «divine orthodoxy»: the ethnographer who pretends to understand organizational action better than the people actually involved in it will be easily perceived as presumptuous and will have restricted access to the field. In fact, as in the case we have seen, negotiating access is also a way to problematize the role of the researcher, who has the opportunity to reflect on the ethical implications of his/her presence and research activity.

CONCLUSIONS: ACCESS AS TRAJECTORY

As noted by other authors (e.g., Gobo, 2001, forthcoming), a handbook of methodology cannot include the whole plethora of strategies

that ethnographers can deploy in accessing the field. These depend on the characteristics of the organization, on its dimensions and on the aims of the research. Strategies of access, therefore, are also the contingent result of researcher's creativity and of his/her encounter with organizational actors.

But even if contingent, these dynamics do not relate to a logic other than that which operates in everyday organizational practices; on the contrary, the way(s) in which the researcher passes characterizes further individual cases, and it may be a useful benchmark for observation and interpretation. I do not want to say that researchers should jump to conclusions or abstractions referring only to what happened to them on entering the organization, nor that they should assume a-problematically that what they witness at the beginning is absolutely typical of the organization they are going to observe. The argument is a different one and it points up two major interrelated issues.

First, in organizational ethnography, accessing the field is a never-ending process; or, better, is a process that one should never assume has been accomplished once and for all. This is due to the fact that ethnographers usually negotiate access with actors (be these intermediaries, guarantors or gatekeepers) who are not the same people (or, at least, not the only people) that they will meet in the field. Accessing the field thus requires considerable flexibility in terms of presence and image management, as regards emotional aspects, and because of the intrusiveness connected with any type of ethnographic inquiry. Accessing the field constantly obliges the ethnographer to adapt to the organization's times and spaces, immediately to learn the knowledge underpinning basic activities, and to devise ad hoc techniques with which to enter into contact with actors and collect information.

Second, accessing the field can be framed as a trajectory which leads in multiple (and different) directions depending on the ethnographer's ability to follow organizational processes and to demonstrate an ability to take part in them. In some situations (like the one I have presented) this immediately leads to active participation, but in others it may require the ethnographer to sit quietly and not intervene in the work flow (as has happened to me in other organizational settings). It depends on the kind of organization, on the process that the ethnographer is trying to observe, and on the rapport that s/he is able to establish with organizational actors. But it also depends on how the organization relates to people who do not belong to it, and on the path that must be followed to gain the members' trust.

Finally, negotiating access to the field is a significant moment of interaction when observing and noting the actors' practical action can begin. As noted, there are no substantial reasons for assuming that negotiation of access to the field takes place in a dimension different from the actors' everyday logics and practices of action; nor that what the ethnographer is doing while accessing the field is different from what s/he will do while fieldworking.

In conclusion, access is a trajectory, and it is consequently important that the researcher interrogate him/herself on how that trajectory should be constructed, and on how it intersects (or otherwise) with

other trajectories of organizational life. As a trajectory, access may have various ramifications: according to the actors and situations that they encounter, ethnographers must be able to adjust their interactive modes and (ideally) learn something new about the organization observed whenever they meet an unknown person/situation. Indeed, from the beginning of an ethnography, the researcher is directly involved in the reality observed, while his or her image as a privileged observer is re-located in contexts of action and takes part in the production of meanings as the natives participate in the observer's entry and involve him/her in their everyday lives.

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