

And Then There Were Three: Self-Presentational Styles and the Presence of the Partner as a Third Person in the Interview

H. R. BOEIJE
Utrecht University

As a result of a third person's being present in an interview, the interviewee can be motivated to change his or her answer and try to present a certain impression to the interviewer and the third person. Drawing on a qualitative interview study conducted in the Netherlands and Belgium, the present study examines why partners want to be present in interviews and what self-presentational styles their spouses use when they are present. Seventeen interviews conducted with eight families were analyzed from a self-presentational framework. Some interviewees used a protective self-presentation when partners were around, only to shift to an offensive style when the partner had left. Assertive and defensive strategies were also used in joint interviews. Contrary to expectations, several couples did not adjust their opinions and made no attempt to convey the image of a harmonious marriage. It is concluded that interviewees are subject to motivation change in some cases, which can undermine the validity of the data as less information is collected.

Keywords: third persons; spouses; self-presentation; qualitative interviews; response effect

Qualitative interviews are widely used to learn about people's interior experiences (Weiss 1994). An interview is subject to ideas about the role of the interviewer, who primarily asks the questions, and about the interviewee, whose role is mostly restricted to giving answers. However, an interview is not a laboratory setting, and interviewers have problems with such things as controlling the presence of other persons than the interviewee (Blair 1979; Reuband 1992; Rubin and Rubin 1995). Previous studies show that there were third persons present at between 25% and 50% of survey interviews, even though the interviews were conducted by well-trained interviewers

I thank Cathelijne Crul for her help in interviewing and Ine Gremmen, Hans Landsheer, and Gerty Lensvelt for their valuable comments on an earlier version of this article.

Field Methods, Vol. 16, No. 1, February 2004 3-22
DOI: 10.1177/1525822X03259228
© 2004 Sage Publications

who had been instructed to avoid the presence of third persons (Hofhuis 1995; Welkenhuysen-Gybels and Billiet 2000; Zipp and Toth 2002).

When interviewees change their answers as a result of the interview situation, even if it is unintentional, it is called a response effect or response shift. Response effect is a threat to valid measurement. The presence of so-called third parties is a possible source of response effect (Hofhuis 1995). Different mechanisms are thought to be responsible for interviewees' changing their answers when a third person is present (Sudman and Bradburn 1982). One of these mechanisms is motivation change, based on the theory of impression management or self-presentational behavior (Goffman 1959; Jones and Pittman 1982; Schutz 1998). This theory assumes that social behavior is an attempt by one person, the actor, to affect the way he or she is perceived by another person, the target. In the interview context, interviewees sometimes manipulate the information they provide about themselves in an attempt to convey a certain impression to the third person.

A widely accepted taxonomy of self-presentational styles distinguishes between (1) assertive self-presentation (trying to look good by presenting a favorable image), (2) offensive self-presentation (trying to look good by making others look bad), (3) protective self-presentation (trying not to look bad by avoiding creating negative impressions), and (4) defensive self-presentation (trying not to look bad by defending against negative typification) (Jones and Pittman 1982; Tedeschi and Norman 1985; Schutz 1998). Individuals may try to convey a certain impression of themselves, but they may also try to manipulate what other people (i.e., third persons) say about them.

Each self-presentational style employs different strategies and tactics (for a list, see the appendix), some of which may be useful in the interview situation.

1. Assertive self-presentation includes behaviors such as ingratiation, exemplification, and self-promotion (Jones and Pittman 1982). Ingratiation means that the person wants to appear likable by complementing others, doing favors, or showing opinion conformity, among other things. In exemplification, the person refers to such things as helping others and neglecting their own interests, whereas with self-promotion, a person refers to their successes to show competence.
2. Two important strategies that are part of offensive self-presentation are derogating or attacking others and evaluating others critically to look better than them (Schutz 1998).
3. People engaging in protective self-presentation avoid situations that can be embarrassing or humiliating, for instance, giving a minimal and cautious self-description when they have to tell something about themselves (Tedeschi and Norman 1985).

4. Finally, a person may tend to defensive self-presentation when a valued self-identity has been threatened or damaged by a previous event. They can justify their behavior, use excuses, or depict themselves as helpless and incompetent, a behavior referred to as "supplication" (Jones and Pittman 1982).

There have been numerous studies on the effect of third persons on the validity of data. However, it is impossible to draw a conclusive judgment as these studies have not approached the issue in a consistent manner (Pollner and Adams 1997; Zipp and Toth 2002). For instance, Blair (1979) showed that parents were holding back with assertive self-presentation in the presence of their children, whereas Hofhuis (1995) demonstrated that unemployed persons presented a desired image although their attending partners could have toned down their descriptions (i.e., functioned as lie-detectors [assertive self-presentation]).

Several studies found evidence that family members interviewed in each other's presence gave more similar answers than when interviewed separately, using assertive self-presentation to convey a positive impression on the interviewer (t Hart 1974; Reuband 1992; Hofhuis 1995; Zipp and Toth 2002). Spouses gave cautious answers to questions pertaining to their partners and their relationships, whether their partners were present or not (Hofhuis 1995). Acknowledging a problematic relationship would create a less desirable image of the respondents as well, which explains the use of defensive self-presentation. Aquilino (1993) found that spouses gave a much more favorable picture of their marriage when their partners were present, whereas Smith (1997) and Pollner and Adams (1997) reported virtually no effect of spousal presence on responses to questions on marital issues.

In this article, I draw on experiences from a study of couples facing multiple sclerosis (MS) in the Netherlands and Belgium (Boeije et al. 2002). The aim of this study was to examine the perspectives of both partners on dealing with MS in the context of the marital relationship. A review of the literature indicated that response shift as a result of the spouse's being present in the interview was a probable threat to the validity of the qualitative interviews being conducted (Hertz 1995). Given that the questions were directly related to sensitive relationship issues and the partner's behavior, it seemed essential to interview both partners separately. The present article examines why partners want to be present in interviews with their spouses and the self-presentational styles their spouses use when their partners are present. I look at the third persons' motives for being present in the interview since this could provide clues as to whether and how interviewees change their answers. My aim is to contribute to the development of a theory on third-party presence in interviews from a self-presentational framework.

RESEARCH METHOD

Procedure

In this article, I draw on a study of couples coping with MS in the Netherlands and Belgium. MS is a severe neurological disease with an unpredictable course and numerous and variable symptoms for which there is no known cure (Zwanikken 1997). The spouse often supports the person with MS, providing personal assistance, sometimes for years. Caregiving has been shown to be a serious threat to the marital relationship (Thompson and Pitts 1992; Parker 1993).

In this study, interviews were conducted with twenty persons who had MS and with twenty partners who provided direct and ongoing personal care and assistance. Access to participants was gained through five home care organizations, as well as through references from the nine members of the advisory committee created at the start of the project. Twenty-three persons with MS agreed to be interviewed. Three were excluded from the study because they received care from a family member other than their spouse.

The project was introduced as a study of the experiences of persons with MS and their partners and how they managed as a couple at home. Potential participants were told to expect an interview in a conversational style because the researchers were interested in what they had to say. After agreeing to participate, the recruiter gave their telephone number to the researchers who called them to make an appointment. In this telephone call, it was explicitly stated that the interviewer wanted to talk to both partners separately, and in most cases, two appointments were made one after the other. In all but two cases, partners were interviewed on the same day.

Despite the uniform introduction emphasizing the desire to interview the partners one after the other, many different interview situations arose (see Table 1).

In most cases (thirty out of forty-one interviews), partners were willing to be interviewed separately. One couple was interviewed twice: once together (one interview) and once individually (two interviews), which resulted in a total of forty-one interviews covering twenty couples (see Table 1). Some spouses, generally the caregivers, were present only at the beginning or at the end of the interview, and sometimes they walked in and out of earshot. Two caregivers were present for the entire interview with the disabled persons they cared for, and two disabled persons were present for the entire interview with their caregivers. Only in one case were both partners interviewed in the other's presence. Men were more often present in the interview with their

TABLE 1
Interview Situations Regarding Presence of the Spouse

| Main Interviewee | Presence of the Spouse | Frequency (N = 41) ^a | Interviews Included in the Analysis ^b |
|---------------------|-----------------------------|---------------------------------|--|
| Person with illness | No | 13 | 2, 4, 9, 20 |
| | At the beginning | 2 | |
| | Walks in and out of earshot | 2 | 11, 13 |
| | All the time | 2 | 15, 17 |
| Caregiver | At the end | 1 | |
| | No | 17 | 2, 4, 11, 13, 17, 20 |
| | All the time | 2 | 9, 15 |
| Both spouses | At the end | 1 | |
| | | | 2 |

a. One couple (Family 2) was interviewed twice: once individually and once together, which resulted in forty-one interviews covering twenty couples.

b. The numbers are the family codes.

wives (five male caregivers and one male disabled person) than were women in the interview with their husbands (two female caregivers and two female disabled persons).

Of the eleven interviews in which the partner was present, four were not interesting for our study purposes. In these cases, the partners were present for only a very short time at the beginning or at the end of the interview for obvious reasons, for instance, to protect the bedridden spouse. (The Dutch Multiple Sclerosis Society had warned household members to be wary of persons pretending to do a study but who had less benign intentions.)

The other seven interviews in which the spouse was present were closely studied, and the interviews with their partners were included for analysis. Although the cases in which one of the partners was present in the interview with the spouse were believed to provide more insights than the separate interviews, it was decided to analyze two cases in which the spouses were interviewed separately (i.e., four interviews). These cases were strategically chosen: Family 4, in which the partners expressed convergent opinions about most subjects, spoke favorably about their relationship and mainly used an assertive self-presentational style, and Family 20, in which the partners conveyed very different opinions, were disappointed in the direction their relationship had developed over the years and used offensive self-presentation. A total of seventeen interviews were used for analysis pertaining to eight families.

Interview Sample and Data Collection

The eight participants with MS included in the analysis—four women and four men—ranged in age from forty-three to sixty-nine years, with an average age of fifty-five. They had been diagnosed with MS for a mean of fourteen years. They all used wheelchairs, except two people who could walk small distances in the house. None of them were employed outside the home except one who did voluntary work. Four persons had been forced to stop working because of MS.

The caregivers—four men and four women—ranged in age from forty-seven to seventy-five years, with a mean age of fifty-eight. They were all heavily involved caregivers who provided long hours of help and carried out a wide range of activities. At this stage, seven caregivers were unemployed and one was employed part time. Three of them had stopped working to give care at home. Four caregivers reported physical and/or psychological difficulties.

The couples had been married for a range of twenty-four to fifty years. They came from different socioeconomic backgrounds: Some of the partners had been manual workers and others professionals. All families received help from district nurses and six from housekeeping services.

The interviews were conducted by two female interviewers in their early thirties. One interviewer (HB), a sociologist, conducted interviews with the first five couples. The remaining three couples were interviewed by a research assistant who is a nurse and sociologist. She had read the earlier interviews and used the same list of topics as the sociologist, and both of them discussed each other's interviews to conduct the interviews in as similar a style as possible. This "socialized" the research assistant to conduct interviews in the same way, which resulted in few interobserver variations. All interviews took place at the participants' homes, and all were tape recorded and transcribed by a typist or the researchers themselves. On average, interviews took forty-five minutes (range = thirty minutes to an hour and a half).

Directly after the interview, a contact summary sheet was made (Miles and Huberman 1994), covering the most important themes in the interview, social and demographic data, reflections on the interviewer's roles, and some features of the interview situation. When the spouse entered or left the room during the interview or when there was some communication between the partners, it was mentioned either in the transcript or on the contact summary sheet. The interviews, which were transcribed by a typist, were all checked for accuracy by the researchers through comparison with the original tapes. The researchers added information about third persons from their notes, the contact summary sheets, and the tapes.

ANALYSIS

The self-presentation framework to analyze the cases focused attention on the third person's behavior and on the interviewees' reactions to their presence. The analysis consisted of two activities, namely, fragmenting and connecting (Dey 1993). The first activity, fragmenting, consisted of scrutinizing the involved partners' behavior during the interview: Was the partner present for the entire interview or only for a part? What was he or she doing? Did the interviewee say something about the spouse's presence? Who was talking to whom and about what? (Was there communication between the partners or was it directed toward the interviewer?) In general, was there agreement or disagreement between partners?

Fragmenting also consisted of separating out the component parts of each interview and labeling them with codes derived from the self-presentational styles (Strauss and Corbin 1998). The program Winmax was used to facilitate the process of code and retrieve (Kuckartz 1998). Expressions such as "I am a good organizer and I arranged home care services" and "I care for other people and I help them out" were seen as assertive self-presentation. "He just doesn't want to talk about the illness and this stops me finding solutions to our problems" was placed in the category offensive self-presentation. An expression such as "It's hard to put MS aside" is seen as protective self-presentation. "I sometimes underestimate how hard it is for my wife. I have to bother her so often but I can't help it" was placed in the category defensive self-presentation.

The second activity in the analysis process consisted of connecting, which meant that the focus shifted to how the person's self-presentational style in the interview was linked to the context, for instance, whether one had come to terms with MS, the intentions of the person, and the interactions with the partner. Therefore, I made an interpretive reading of the interviews, which involved thinking about what the data meant and what could be inferred from them. I also used the constant comparative method, and the first task consisted of a comparison of partners' responses to obtain a deeper understanding of the family as a whole, putting the pieces of each case together and trying to understand how the behavior of both partners was related (Boeije 2002). The second task consisted of a systematic comparison between couples to see whether there were similar types or regularities. The final analysis of the cases was discussed with colleagues from the Research Institute of Psychology and Health.

CASE DESCRIPTIONS

Family 9

In Family 9, the healthy partner, who had gone shopping, came back once the interviewer had finished interviewing his ill wife. She was lying in bed in the living room. The husband was interviewed at the dining table in the same room since that was the only convenient place due to the apartment's layout. His wife listened to the interview, but her role was restricted to an occasional confirmation of something he said. He was aware of her presence since he made remarks such as "You probably just heard from her . . ." and "She must have told you that. . . ." In this case, it seemed that the partners were very comfortable in each other's presence and already knew what the other was going to say.

In the interview, the husband (H) praised the wife (W) by saying that she coped wonderfully well, and she praised him by telling how pleased she was that he wanted to take care of her:

H: I have a part-time job now. When it's necessary for me to give up my work to care for her at home all day, I'll do that. As long as we can manage with family and friends and home care services, we'll do our best to avoid admission to a nursing home. When we can't cope anymore with me working, then I'll come home and be with her.

W: That's sweet, isn't it?

H: Well, she doesn't want to live in a nursing home. I wouldn't like that either. If I can help prevent that, I'll do what I can. She's easy to take care of. For some reason that I don't understand, she's accepted the fact that she's ill and she tries to make the best of it. I'd understand it if someone were depressed and grumpy all day. Fortunately, she's not.

In terms of self-presentation, the husband would like his wife to be perceived as a nice, amiable, and strong person. He also appears likable himself by describing that he does her a favor, by complementing her, and by showing opinion conformity. This can be classified as assertive self-presentation and, in particular, ingratiation (Jones and Pittman 1982). For her part, the disabled partner attempts to present a good impression of her husband by pointing out his humanity and integrity, which can be seen as exemplification. In the interview with the wife alone, she did this less explicitly, although she had shown gratitude toward family members helping her.

Families 11 and 13

In Family 13, the male caregiver walked in twice to offer coffee during the interview with his disabled partner. Mr. 13 left the room when his wife asked him to leave, arguing that it would be better for the study if he were not around. In this family, a secret was involved: The wife told the interviewer that her husband had had an affair, whereas he did not mention this subject. It seems likely that Mr. 13 was afraid that his wife would tell the interviewer about this, which he probably assumed to be undesirable behavior in the eyes of the interviewer. In other words, he tried to prevent her from conveying negative impressions of him (protective self-presentation). Beyond this, they talked about each other in rather positive terms, and they seemed to have overcome the most blatant marital problems.

In Family 11, the male caregiver walked in and out of earshot four times: once to get something he forgot to take with him, twice to offer coffee, and once to pick up the phone. With her husband around, Mrs. 11 lowered her voice and answered vaguely to the questions that were posed to her. This made the interviewer uncomfortable since it hampered the interviewing relationship, and the interviewer did not feel free to ask more personal questions. At one moment, the woman looked outside to see whether her husband had gone out into the garden, then she told the interviewer about his—in her eyes—troublesome behavior. She confided that her husband could not stand it that she had always been such a strong and enterprising woman. She went on to describe that he could not cope with her behavior and that he sometimes abused her by not helping her when she needed assistance. She clearly used offensive self-presentation: He could not cope because she was a strong and independent person.

By being present, Mr. 11 tried to keep his wife from conveying a negative impression of him (protective self-presentation). His judgment was right since she spoke out only when he was not around. In his interview, he said that his wife's criticism troubled him most and that what he did for her was never any good. Although he also gave a critical evaluation of his partner, his description seemed less connected to the impression he wanted to convey about himself. He mainly tried to make a good impression by pointing out his willingness to fulfill his sense of duty by taking care of her (exemplification, which is a type of assertive self-presentation). Neither partner seemed to mind describing problems in their marriage, even if this might convey a less desirable picture of them as individuals.

Family 17

In Family 17, the female caregiver brought coffee into the living room where the interview was being conducted with her husband. In the beginning, she was rather inquisitive, all attention, but she did not interact very often. Later on, she interrupted more often, in particular to emphasize her husband's total dependence on help and the many tasks she had to perform. When a visitor arrived for her husband, the interviewer asked the wife to come to the kitchen to conduct the interview with her. Then she started to criticize her husband and told how he ordered her about (offensive self-presentation). Again, this is an example in which the problems in the marriage were not spared in the interview. The following is a fragment of the interview conducted with her alone:

HB: How do you see your caregiving role?

W: It's very difficult, but that goes with old age, I'm sixty-two right now, it's not like when I was forty. And he weighs ninety kilos. Look, you're here now and he doesn't dare, then he doesn't say anything, but when there's no one else around: give me a cigarette, give me this, do that, get that for me. And sometimes I'm tired and I say to him just sit in your chair for a while, but then after ten minutes it starts all over again. "Do you have a biscuit? I want my medication," "I have to go to the toilet." He was always someone . . . and, yeah, he can't do anything anymore. He's rebellious and he takes it out on me.

HB: How do you deal with that?

W: Well, sometimes I talk to my sister-in-law. She visits regularly to have her hair done. She says to me, he hasn't even been up for two minutes and he needs his cigarettes, his coffee, his orange juice. And you can't leave him alone with his cigarette, that's dangerous because of his hands. She tells me, you don't even have five minutes for me.

It is unclear why Mrs. 17 did not want to leave the interview with her husband. It is possible that she wanted him to present a favorable image of her by mentioning her support and the help she provided. However, it is more probable that she wanted to be present to disagree with him had he used assertive self-presentation, for example, if he had presented a flattering image of his behavior. In the literature, this is described as functioning as a lie detector (Hoffhuis 1995). After all, if he had succeeded in conveying the image of a friendly man, all her efforts and her burden, which mostly had to do with their relationship, would have been ignored or even denied. We do not know whether the husband's answers were influenced by her presence.

Family 2

On arriving at the home of Family 2, the interviewer asked the couple whether she could first interview the husband who was ill. After a few minutes alone in the living room, Mrs. 2 came in with coffee, drew up a chair, and joined in the conversation. A few minutes after that, the casual conversation moved to the subject of interest and the tape recorder was switched on. Mrs. 2 then proceeded to take over the interview from her husband, and although the interviewer tried to give him as much attention as possible to encourage him to respond, the interviewer did not quite succeed in regaining control. Given that the respondent's wife was there, it seemed better to include her.

The following fragment illustrates the self-presentational strategies used in the joint interview with the husband (H) and wife (W):

H: I get tired from always talking about my illness. So I think, shut up and just let me be sick. There are so many people who know so much about me. It drives me mad.

W: Well, I don't agree, we never talk about it, because you don't want to. I need to talk about it. Maybe he doesn't. He just tells jokes. He likes that, he really likes that.

H: You see, like the GP. He visits once a month. We have a good relationship with him and I like him to come over.

W: He treats him like a friend. Then again, he doesn't talk about his illness.

H: Neither does he. Because there's nothing he can do in my case. I like him to talk about other things and not. . . . Or I say to him, "Do you have anabolic steroids with you?" And then we laugh and I say, "Why can't I have steroids? All athletes use them." Well, of course we're only having a laugh.

W: It can make me so angry. Sometimes, the GP asks, "How are you feeling today?" "Oh, I'm fine." And it's worse! And then I think, say what you feel for once.

H: I don't want to complain, I'm not the complaining kind.

This fragment shows that the wife, who is the third person in the interview, is actively trying to convey a good impression of herself to the interviewer by criticizing her husband (offensive self-presentation). She points to her husband's sense of humor and self-mockery, and she condemns his behavior as being inadequate because it prevents her from talking seriously about the illness and from producing solutions for their problems. At another point in the interview, she also accuses him of wanting to keep up with tasks he is no longer capable of, such as managing the finances, and preventing her from taking over as he does not consider it a woman's role.

The husband uses a wider range of self-presentational strategies. He uses defensive strategies to fight off the negative image given by his wife ("I'm not the complaining kind"). However, on the whole, the kind of give and take

illustrated above was scarce, and the wife dominated the interview when she was present; the husband mostly restricted himself to short answers, agreeing or disagreeing with what she said. This indicates protective self-presentation: He gives no more than a minimal self-disclosure, thereby avoiding conveying (more) negative impressions. In the interview, he occasionally uses his humor and makes jokes that make him appear as a nice person (assertive self-presentation).

This couple agreed to be interviewed again a year later by the second interviewer. In this way, the joint interview was followed up with individual interviews, which offered opportunity for comparison. As far as the stories they told, it did not seem to matter whether they were interviewed individually or together. They emphasized that their coping styles were very different and that their conversations often ended in disagreement. Their self-presentational strategies also remained more or less the same in both situations, Mrs. 2 using the same offensive strategies and Mr. 2 the same assertive and defensive strategies in the individual interview. It seems that Mr. 2 expected the interviewer to have negative images of MS patients and fought these off by referring to former valued images, such as "I was a good colleague," "I was the life of the party," and "I was the breadwinner." As in the joint interview, he kept his answers rather short to prevent even more negative impressions (protective self-presentation).

Family 15

While Mr. 15 was being interviewed about his life with MS, his wife sat in the same room but never interrupted the conversation in any way. In the interview, the man emphasized his helplessness and the incompetence caused by MS, for example, apologizing that his wife had to work in the garden, a thing that he as a man had done when he was healthy. This behavior can be designated as a defensive self-presentational strategy (in particular, supplication), an approach used to appeal to the social responsibility and sense of duty of the listener.

At the start of the interview with Mrs. 15, she told the interviewer that her husband had not spoken so openly for quite a while, and it appeared that she had used the interview as a way of learning more about his thoughts and feelings. The interview was conducted in the same room where her husband was, but she did not feel this was a problem, as he could not hear what was being discussed. She informed the interviewer that her husband sometimes was not aware of what was going on around him and she could clearly see that he was in a world of his own at that moment. ("Much of the time he becomes withdrawn, then he doesn't hear anything, he's doing it right now, and I can tell

just by looking at him.") This was surprising since the interviewer had just spoken with him for about an hour and had not noticed that he was tired or absentminded. Mr. 15 never intervened in the interview with his wife, and it is not clear whether or not he was indeed listening.

Mrs. 15's assertive self-presentation included descriptions of herself as a caring person who helps other people and who defends her husband when necessary (exemplification). She confirmed the image that Mr. 15 had given of himself but emphasized his shy nature and the fact that he could not be blamed for his behavior because of MS. In presenting herself as a caring person, she complemented her husband's self-presentation as someone in need of support. Both partners gave the impression of having a rather harmonious relationship. However, it cannot be said with certainty that no other perspectives would have been discussed had they not been present at each other's interviews.

Family 4

When the interviewer arrived at Family 4's house, they had just finished dinner. Only Mr. 4 and the interviewer stayed in the room, and his wife and two grown-up children left. Mr. 4 talked frankly about the onset of his illness, his coping style, and the effects his disability had on all the members of his family, in particular his wife. He described his wife as a loving and caring person who had a great deal of trouble coping with his illness and disability. He presented himself as the father and adviser, roles that were, according to him, accepted by all the family members.

Mr. 4 uses an assertive self-presentational style exclusively, for instance, mentioning his organizational capacity (self-promotion). He has arranged home care services to lighten his wife's burden. Thanks to family funds, he is able to pay his informal caregivers, which makes it easier for him to ask for help. He also presents himself as a thoughtful person who notices that he needs his family to help him and who is aware of the demands he places on them. He has arranged to stay at a day center two days a week to give his wife more space, although he does not like it there. He hereby presents himself as someone who neglects his own interests for the sake of others, which is called exemplification. All in all, he is proud of his family members and proud that he and his wife have become closer.

After the interview with Mr. 4, the interview with Mrs. 4 started. Although she also uses an assertive self-presentational style, she makes a very modest impression and says a lot about her problems dealing with her husband's illness. She describes both physical and mental problems and tells of receiving professional help to keep her on her feet. She says she makes the sacrifice for

the sake of love and marriage (exemplification). She presents a good impression of herself since she continues giving care, is needed by her husband, and has been capable of maintaining a strong marriage (self-promotion).

After finishing the interview with Mrs. 4, a conversation arose between the couple and the interviewer. This conversation went on for half an hour, and many of the partners' shared experiences were discussed, including the way they deal with people in shops and restaurants and their experiences with fellow sufferers.

Family 20

Mr. and Mrs. 20 had no trouble with being interviewed separately. Mrs. 20 told the interviewer that she regrets having lost her ability to go out, work, and do fun things. She told people around her that she had MS only when she could no longer hide it. When she is at home, she feels lonely and sad, but when she is with other people, she acts cheerful and tries not to bother them with her real feelings. She sacrifices her own happiness for the sake of other people (exemplification). According to her, her husband was raised in a harsh family in which illness and weakness had no place. He often tells her that she should not moan and points to his own ill health. She uses an offensive style, making clear that her husband does not understand her and is of no help.

Mr. 20 argued that his wife has never accepted her illness and that she is not capable of enjoying the things that are still within their reach. He said that when she is away from home, she is joyful, but when she is at home, she is not pleasant to be around. Whatever he does, it is never good enough for her, and she complains about everything. He accuses her of making his life miserable and has trouble accepting that she never shows any gratitude for his caregiving. He mainly uses an offensive self-presentational style, blackening his wife's behavior. He also uses the strategy of exemplification by pointing to his endurance in caregiving.

DISCUSSION

Despite the fact that participants were explicitly asked to be interviewed alone, in practice different situations occurred in which third persons were present. This conforms to the findings in other studies (Pollner and Adams 1997; Welkenhuysen-Gybels and Billiet 2000; Zipp and Toth 2002). In this study, it was worthwhile studying the third persons' behavior because their willingness to stay was occasionally related to their appraisal of what the

interviewees were going to say when they had left the room. The study's qualitative nature provided detailed and relevant information about the couple's personal situation that offered a background for interpreting the interviewee's behavior as well as that of the third person.

The first research question asks why the third person was present for the interview with the partner. It was found that control of self-image, in particular protective self-presentation, was an important motive for partners to be present in the interview. By staying around, they prevented the interviewee from making them look bad, for instance, by giving away secrets or denigrating them. In addition, they could function as a lie detector if the interviewee conveyed an overly flattering self-description that could damage the third person. Partners could also contribute to a favorable image of the interviewee by expressing their agreement (assertive self-presentation). Finally, partners could use offensive self-presentation by interrupting the conversation with the interviewee to actively present themselves at the expense of the interviewee. Compared with the separate interviews in the two contrast cases, Family 4 and Family 20, there is no indication that the self-presentational strategies of the partners who attempted to be present were any different than those of the others.

The second research question focused on the self-presentational style of the interviewees when the partners were present. In some cases in which the spouse was around, interviewees used a protective self-presentational style and avoided talking about themselves, the spouse, or relationship issues. After the spouses left, some of them used an offensive self-presentational style and spoke openly and critically about their partners. Two interviewees used an assertive self-presentation, clearly in the knowledge that the third persons would keep quiet or not tone down their descriptions. One interviewee used defensive strategies to fight off the negative typification given by the third person.

The real issue here is whether the presence of third persons has any effect on the data gathered. In other words, are interviewees subject to motivation change that undermines the validity of the data? The design of the study demands that conclusions be drawn cautiously since comparisons could be made only between a (partially) joint and a separate interview in two cases, whereas in the remainder, interviewees were either interviewed in the presence of the partner for the entire interview or were interviewed separately, thus ruling out any comparison.

The first and most important consequence of the presence of the partner is when interviewees avoided talking about sensitive issues and shifted to criticizing the partner immediately after they had left. The second consequence is that less information is gathered about the interviewee when an actively

involved third person is present (see also Hertz 1995). In these cases, interviewees are subject to motivation change that undermines the validity of the data because less or less complete information is collected. In the case of the couple who were first interviewed together and later separately, the self-presentational style of the interviewees did not change. Disagreeing and criticizing in each other's presence seem to occur when the relationship cannot be farther threatened by being frank and open about troubles and marital problems.

Based on the literature, it was expected that partners would give cautious or rosy answers to questions pertaining to their partners and would express the same opinions on relationship matters whether their partners were present or not ('t Hart 1974; Reuband 1992; Hofhuis 1995). In our sample, this turned out not to be true: Several couples did not adjust their opinions, and some even openly denigrated each other. Although this was generally out of earshot of the partner, in one case the partners even did this in each other's presence. From this, we can conclude that individual partners care about the impression they convey to the interviewer but feel less responsible for the impression they give their partner and do not feel the need to appear as a happy couple. This finding might be tied to our specific research subject of chronic illness and caregiving in the marital relationship. An explanation might be found in the challenge that a chronic illness such as MS poses on the marital relationship. Disabled persons and caregivers alike can be isolated and have a strong need to bring their opinions into the open. Caregivers were sometimes more intrusive since they felt their voices were heard even less than the patients'.

In survey interviewing, it is obvious that differences in the interview situation, for instance, the presence of another person, are considered a threat to a valid measurement and should therefore be avoided (Hartmann 1994; Smith 1997). For qualitative person-to-person interviews, the literature ranges from explicit advice to conduct interviews in isolation (Emans 1990; Baarda, Goede, and van der Meer-Middelburg 1996) to being less critical about including third persons (Weiss 1994; Rubin and Rubin 1995). The choice depends on the research subject and on the approach chosen within the qualitative paradigm. In the narrative approach (Miller 2000), for example, the interview in which a third person is present would be the sole subject of the researcher's reflection, while in the realist approach, a third person is considered to threaten validity since people may change the toning of their answers or accentuate different parts in their stories. In view of the research subject, the latter stance was taken in this article.

The self-presentational framework used to analyze the data proved useful since part of the interview situations could be explained by the impressions

interviewees and third parties wanted to create. Although it was helpful, it was not always clear how self-presentation manifested itself in the data, and as a consequence, the effect of a third party's presence sometimes remains uncertain. The taxonomy of self-presentational behavior is based on the level of activity or aggression involved, as well as the person's underlying intentions, which are often a closed book (is the person trying to convey positive impressions or trying to avoid negative typifications?) (Riessman 1990; Schutz 1998). An interesting focus for follow-up research would be to find out which demands in the interview situation have to be taken into consideration to understand self-presentational choices.

What can interviewers learn from the results presented here? The decision to exclude third persons from the interview should depend on whether the research subject is sensitive to response shift and on the approach adopted. Considering that effects on the data caused by third persons are difficult to appraise, in the case of vulnerable research subjects, it seems best for methodological reasons to interview without "strangers in our midst," as Rubin and Rubin (1995) put it. The researcher should inform participants at the first introduction that an individual interview is desired, and this target should be maintained and repeated, while at the same time explaining the reason.

To avoid the presence of a third person, scheduling is important, although each approach has its own advantages and disadvantages. Scheduling interviews on different days might prevent partners from hanging around and joining the interview with the spouse, but this would disrupt the daily routines twice.

Separate but simultaneous interviews conducted by a team of interviewers avoids the problem of changed presentational approaches but confronts the researcher with the problem of making sense of different versions of a story when those differences become evident only after the interviews have been conducted (Hertz 1995). Before starting the research, researchers should weigh the pros and cons of these different interview schedules and the consequences for their data and analysis.

APPENDIX

Four Styles of Self-Presentation and Associated Strategies

Assertive Self-Presentation (trying to look good by presenting a favorable image)

- Ingratiation
- Exemplification

- Self-promotion
- Power display
- Identification

Offensive Self-Presentation (trying to look good by making others look bad)

- Derogating others
- Critical evaluation of others
- Criticizing the questioner
- Attacking the source of criticism
- Determining the topic of discussion

Protective Self-Presentation (trying not to look bad by avoiding conveying negative impressions)

- Avoiding public attention
- Minimal self-disclosure
- Cautious self-description
- Minimizing social interaction
- Remaining silent
- Passive but friendly interaction

Defensive Self-Presentation (trying not to look bad by fighting off negative typification)

- Denial
- Reframing
- Dissociation
- Justification
- Excuses
- Concession, apologies, and remediation
- Supplication

SOURCE: From Jones and Pittman (1982) and Schutz (1998).

REFERENCES

- Aquilino, W. 1993. Effect of spouse presence during the interview on survey responses concerning marriage. *Public Opinion Quarterly* 57:358-76.
- Baarda, D. B., M. P. M. Goede, and A. G. E. van der Meer-Middelburg. 1996. *Basisboek open interviews*. Houten, the Netherlands: Stenfert Kroese.
- Blair, E. 1979. Interviewing in the presence of others. In *Improving interview method and questionnaire design*, edited by N. M. Bradburn and S. Sudman, 134-46. San Francisco: Jossey-Bass.
- Boeije, H. R. 2002. A purposeful approach to the constant comparative method in the analysis of qualitative interviews. *Quality & Quantity* 36:391-409.
- Boeije, H. R., M. S. H. Duijnste, M. H. F. Gryphonck, and A. Pool. 2002. Encountering the downward phase: Biographical work in people with multiple sclerosis living at home. *Social Science and Medicine* 55:881-93.
- Dey, I. 1993. *Qualitative data analysis: A user friendly guide for social scientists*. London: Routledge.
- Emans, B. 1990. *Interviewen. Theorie, techniek en training*. Groningen, the Netherlands: Wolters-Noordhoff.
- Goffman, E. 1959. *The presentation of self in everyday life*. New York: Doubleday.
- Hartmann, P. 1994. Interviewing when the spouse is present. *International Journal of Public Opinion Research* 6:298-306.
- Hertz, R. 1995. Separate but simultaneous interviewing of husbands and wives: Making sense of their stories. *Qualitative Inquiry* 1:429-52.
- Hofhuis, H. 1995. Invloed van derde aanwezigen bij interviews. Ph.D. diss., Utrecht University, the Netherlands.
- Jones, E. E., and T. S. Pittman. 1982. Toward a general theory of strategic self-presentation. In *Psychological perspectives on the self*, edited by J. Suls, 231-63. Hillsdale, NJ: Lawrence Erlbaum.
- Kuckartz, U. 1998. *WinMAX 97. Scientific text analysis for the social sciences*. Berlin: Büro für Softwareentwicklung und Sozialforschung.
- Miles, M. B., and A. M. Huberman. 1994. *Qualitative analysis: An expanded sourcebook*. 2nd ed. Thousand Oaks, CA: Sage.
- Miller, R. L. 2000. *Researching life stories and family histories*. London: Sage.
- Parker, G. 1993. *With this body: Caring and disability in marriage*. Buckingham, UK: Open University Press.
- Pollner, M., and R. E. Adams. 1997. The effect of spouse presence on appraisals of emotional support and household strain. *Public Opinion Quarterly* 61:615-26.
- Reuband, K. 1992. Research notes: On third persons in the interview situation and their impact on responses. *International Journal of Public Opinion Research* 4:269-74.
- Riessman, C. K. 1990. Strategic uses of narrative in the presentation of self and illness: A research note. *Social Science and Medicine* 30:1195-1200.
- Rubin, H. J., and I. S. Rubin. 1995. *Qualitative interviewing: The art of hearing data*. Thousand Oaks, CA: Sage.
- Schutz, A. 1998. Assertive, offensive, protective, and defensive styles of self-presentation: A taxonomy. *Journal of Psychology Interdisciplinary & Applied* 132:611-29.
- Smith, T. W. 1997. The impact of the presence of others on a respondent's answers to questions. *International Journal of Public Opinion Research* 9:33-47.
- Strauss, A. L., and J. Corbin. 1998. *Basics of qualitative research: Techniques and procedures for developing grounded theory*. London: Sage.
- Sudman, S., and N. M. Bradburn. 1982. *Asking questions: A practical guide to questionnaire design*. San Francisco: Jossey-Bass.
- Tedeschi, J. T., and N. Norman. 1985. Social power, self-presentation, and the self. In *The self and social life*, edited by B. R. Schlenker, 293-322. New York: McGraw-Hill.
- 't Hart, H. 1974. Selektie en zelf-selektie van informanten in enquêtes. Ph.D. diss., Amsterdam University.
- Thompson, S. C., and J. S. Pitts. 1992. In sickness and in health: Chronic illness, marriage, and spousal caregiving. In *Helping and being helped*, edited by S. Spacapan and S. Askamp, 115-51. Newbury Park, CA: Sage.

- Welkenhuysen-Gybels, J., and J. Billiet. 2000. On the interaction between interviewer and third party effects in survey interviews. Paper presented at the Fifth International Conference for Methodologists in Social Sciences in Cologne, Germany, October 3–6.
- Weiss, R. S. 1994. *Learning from strangers: The art and method of qualitative interview studies*. New York: Free Press.
- Zipp, J. F., and J. Toth. 2002. She said, he said, they said: The impact of spousal presence in survey research. *Public Opinion Quarterly* 66:177–208.
- Zwanikken, C. P. *Multiple sclerose: Epidemiologie en kwaliteit van leven*. PhD diss., University of Groningen, 1997.

H. R. BOEIJJE is an assistant professor in the Department of Methodology and Statistics of the Faculty of Social Sciences at Utrecht University. She specializes in research and education in qualitative methods. Recent publications include "Encountering the Downward Phase: Biographical Work in People with Multiple Sclerosis Living at Home" (with M. S. H. Duijnste, M. H. F. Grypdonck, and A. Pool, Social Science & Medicine, 2002); "A Purposeful Approach to the Constant Comparative Method in the Analysis of Qualitative Interviews" (Quality & Quantity, 2002); and "Continuation of Caregiving among Partners Who Give Total Care to Spouses with Multiple Sclerosis" (with M. S. H. Duijnste and M. H. F. Grypdonck, Health and Social Care in the Community, 2003).