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Aspects on McCallin's paper: "Grappling with the literature in a grounded theory study"

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## **Aspects on McCallin's paper, "Grappling with the literature in a grounded theory study"**

*Helene Ekström, MD, Ph.D.*

I read Antoinette McCallin's paper with interest and I have learned that there are problems which I have foreseen perhaps because I am, as many medical doctors are, unaware of the many "theories" or different perspectives that one can choose in undertaking a study. Kirsti Malterud, Professor of General Practice in Bergen, Norway, used to say that we are theoretically ignorant and instead focus on the pragmatic issues of how to survive the day and help the "sick" in an appropriate way. However, even if I feel like a real novice, I have some remarks about literature and grounded theory studies.

A literature review as part of, for instance, a research proposal and one that is undertaken when actually performing a grounded theory study are two different issues in my opinion. When writing a research proposal or an application for research funding, the issue is (which I personally learned the hard way....) to follow the rules of the committees or funding agencies whether or not the review demanded is appropriate for what you plan to study. Here the discussion in the first part of McCallin's paper is appropriate because when you write a research proposal or the like perhaps (although not necessarily) a discussion is needed of the different "GT methods", their requirements, historical development, different opinions among researchers and so on as well as why you have chosen a particular approach.

On the other hand, when actually doing a grounded theory study I believe the issue is to follow the rules of the method you have chosen; that is, either classical (Glaserian) GT, the Strauss and Corbin version or any other versions. To read the appropriate method books over and over again while collecting and coding data is the most

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important part of literature reading. Reading other GT studies done using the same method as you have chosen can also help and is essential for increasing your understanding of “how to do it” as well as in sensitizing your knowledge of theoretical codes that may enable you to reach a high enough level of abstraction in your own analysis.

These issues of reading literature I miss completely in McCallin’s paper. In my own experience, just finding good grounded theories through the usual literature search databases is a challenge, certainly for those of us in the medical profession. It would have been helpful to have some guidance about this in the paper.

I also miss a clear explanation of the two main aspects of literature review when the theory has evolved; that is, how to search for literature about other research in the same area of interest as well as literature dealing with concepts and theories similar to what has emerged in your grounded theory. In my own doctoral study, this meant looking both for other papers about how women experienced menopause as well as papers about “status passages” as these were my emerging categories and main concern. In summary, I feel that McCallin’s paper could have been improved by offering an outline as to what purpose literature reading serves at different times during a GT study. The example used in the paper did not reveal this to me but had it done so would have been of great value to many researchers new to GT.

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