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**Investigating Harms, Causing Harm:
Balancing the Ethical 'Pitfalls' to Doing Research on Sexual Violence
with Women in Conflict Settings**

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Ethics of Research on Sexual Violence with Women in Conflict Zones

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Research in conflict settings with survivors of sexual and gender-based violence (SGVAW) is a very difficult but highly necessary task. Although there is increasing attention and research being given to the issues of SGVAW during peace-time, there is indeed a very limited number of research studies investigating SGVAW during armed conflict. Many of the reasons for this lack of data relate to the difficulty of conducting any kind of activity in conflict settings. Yet, there remains a strong public health need to do this kind of research because humanitarian agencies currently lack the knowledge and tools to comprehensively address SGVAW in the populations they serve. However, there are a myriad of ethical and safety considerations that limit the willingness and ability of researchers to conduct ethically sound and scientifically valid research on SGVAW with displaced women.

Women in conflict settings are at risk of multiple forms of harm from simply participating in SGVAW research. Personal and collective security is already so precarious in such situations that this instability can be greatly exacerbated by the ignorance and/or carelessness of the SGVAW researcher. A major ‘pitfall’ to doing this kind of research will be the ethical imperative on the researcher to minimize the numerous potential harms to the women participating. Added to the physical, social, economic and psychological harms that might be caused by doing SGVAW research with women in conflict settings, there is also an ethical concern of needing to ‘do good’ by the research. All research can only be ethical if it has direct benefit to the women participants and has social value. Given this ethical imperative, another major ‘pitfall’ that must be acknowledge and accounted for is the ability of the researcher to carefully balance these needs against external factors such as donor demands on resources and time, research objectives and even personal career interests.

I will raise what I believe are some of the critical ethical issues specific to this type of research in the discussion that follows. I will also list some of the key ways that expert researchers have raised to avoid most of the ‘pitfalls.’ This list is based on useful and relevant strategies and guidelines that are provided by WHO on how to conduct SGVAW research in peace-time, and also by humanitarian agencies and individual experts on doing ‘conflict research,’ more generally.

It is impossible at present to talk about ‘best practices’ since SGVAW research with women in conflict settings is near non-existent. But I will suggest that there may be some ‘good practices’ that must be integrated as this type of research becomes more prominent. While I have no illusions that conducting this research will be easy and free of ethical dilemmas, I strongly believe that SGVAW research with displaced women must be participatory-based and must unquestionably follow a feminist method of research as the only way to ensure that ethical standards are maintained and that both the participants and the researcher remain free from harm.

Foreseeable Consequences and Hidden ‘Pitfalls’

1. Protecting Personal Security and Preventing Retaliation

Doing research on SGVAW with displaced women is personally endangering to the women participants especially, but also to the researcher(s). This physical danger exists at all stages of the research process in part because of the realities of armed conflict in the research settings. But the very process of research itself adds to this danger, beginning with the need to obtain ‘informed consent.’

To fulfill the ethical principle of respect for autonomy, many assume that one only needs to find participants who are willing to sign a consent form which gives detailed information about various aspects of the research, like the study’s purpose, risks and benefits. But, in reality, the very act of seeking informed consent can put women participants at risk of physical harm. It is known that when researchers contact women in peace-time to participate in SGVAW research, participants have experienced further violence by their abusers when the abusers become aware of the study purpose. The informed consent process can also unjustly violate the women’s privacy. It is likely that the scale of retaliation will be exponential for displaced women since their abusers may be either their intimate partners or local insurgents, or perhaps even both. In conflict settings, the ‘culture of silence’—imposed by warlords, or employed as a community strategy—can make ‘sensitive’ topics too risky to discuss openly, or directly, within the displaced community. So, even if the SGVAW under study is not related to the politics of war-making (i.e. rape used as a weapon in the current conflict), the personal safety of women participants can still be jeopardised.

This personal security risk is compounded by the problem of obtaining community support from ‘gatekeepers’ or ‘leaders,’ as advised by the WHO “Community Agreement Model.” Beyond the unnecessary stress that can be caused to vulnerable (stigmatized) groups should their names be recorded on consent forms, there are two problems with this WHO guideline. On a conceptual level, the identification of “gatekeepers” or “community leaders” can actually inhibit women’s capacities to develop and exercise self-determination because, as Yuval-Davis emphasises, women are routinely excluded from conceptions of communal good and from participation in the governing bodies of nations and tribes around the globe. In addition, the practical negotiation with such individuals is a highly sensitive political process because the very act of their identification can endanger such ‘gatekeepers.’ In conflict settings, local leadership may represent a threat to the power base of insurgents who then systematically target them for removal. Here again, there is the ‘pitfall’ of having to make informed decisions about security that heavily depend upon a nuanced understanding of who wields power in the local dynamics of conflict and in the community more generally.

Security risks are a constant concern in doing SGVAW research with displaced women because, at any point in the research, there may be breaches in confidentiality that will surely lead to different forms of harm; not least of which is physical retaliation to the individual women but can also include an escalation of collective violence or targeted violence against all women as a vulnerable group in the displaced community.

2. Respecting Privacy and Maintaining Confidentiality

Sensitive research on SGVAW in peace-time requires complete privacy and an unlimited guarantee of confidentiality because the disclosure of women participants' identities and personal information could cause them serious harm. To avoid alerting other individuals, including women who might communicate the nature of the study back to potential abusers, the WHO recommends that only one woman per household should be interviewed. But this seems unrealistic in conflict settings. Refugee or IDP camps are notoriously over-crowded making absolute privacy near impossible to guarantee. Even if there can be complete privacy during the interview itself, it is likely that most of the women in the area will learn about the study because of the scientific need to have a sufficient sample size for the study to be socially valuable. The risk of communication among women to the wider community seems an inevitable 'pitfall' here.

Protecting privacy and confidentiality must be mandatory especially if the research on SGVAW also requires interviewing men about violence. In this case, the implications of any 'pitfalls' on this ethical imperative will surely endanger the women participating. One must follow WHO's recommendation against interviewing men about violence in the same 'cluster' where women have been interviewed. In practice, this would likely mean that men should be sampled from a separate camp with no communication with the one where women will be interviewed.

The composition of the research team can also raise serious problems for protecting privacy and maintaining confidentiality. On the one hand, it is crucial to incorporate people from the local culture under study into the research team itself because this will increase reliability and validity of the data. On the other hand, response can be biased and harm may result because strategies to gain access to vulnerable people often focus on using members of the targeted group to recruit and retain participants. Confidentiality is broken when local researchers, especially if they are themselves refugees/IDPs, know the research participants. The use of 'insiders' in the research process can, in fact, be *more* harmful to the women participants because other differences—age, class, race, ethnicity, etc—*between* 'insiders' can be more important than whether they share the same cultural community. At the extreme, if the 'insider' researcher is affiliated with a group at odds with the displaced women respondents, then it is possible that their sensitive information will be used against a particular sub-group within the same community. In sum, cultural sensitivity can itself present a 'pitfall' to doing this type of research when the use of local researchers transgresses political, social or economic fault-lines unbeknownst to the 'outside' (foreign) researcher.

3. Problem of Perverse Outcomes: Sending the Wrong Message/Giving False Hope

There is always a risk that communities involved in research will have a false hope of receiving benefits unrelated to the research itself. This kind of 'perverse outcome' is especially great in conflict settings because, as one conflict researcher notes, there are very few external means of support as well as widespread distress from both collective violence and a lack of resources. This reality will exacerbate the association of the researcher with resources, monetary and other, unavailable to displaced persons and refugees.

It is not uncommon for refugees and displaced persons who participated in research to become the targets of further violence once the study ends and the researchers have departed. This occurs simply because of their perceived association with Western-based resources. There is an ethical imperative for the researcher to clearly and consistently explain the research purpose to the community members. But, the prevention of ‘false hope’ by disclosing information about the study must, of course, be done in such a way that it does not further endanger the women participants by causing retaliation. So the researcher must carefully balance the possible ‘perverse outcomes’ of further violence during and after the research process against the need to communicate with the community to circumvent any false hopes. Related to this dilemma, another ‘pitfall’ to doing this kind of research will be the conflicting risks that arise should the researcher lack a highly developed sense of political judgement.

A similar but slightly different ‘perverse outcome’ of the research process also exists when doing SGVAW research with displaced women. Whereas careful measures might control the ‘perverse outcome’ of conflict between giving false hope and participant safety, researchers could still inadvertently send the ‘wrong message.’ Even if research on SGVAW with displaced women is conducted by independent academics, the information gained will inevitably be tied to aid agencies already working on the ground because the only practical and safe way of gaining access to active war zones is through their support. The problem here is the fact that local humanitarian organisations operating in certain regions of armed conflict are too often necessarily close to particular insurgents. The process of negotiating access via warring parties confers legitimacy on them, raising the ethical concern that researchers will be perceived as ‘taking sides.’ And so, when research activities are conducted in an area controlled only by one side of the conflict, a ‘perverse outcome’ of SGVAW is the political capital to be gained from sending the wrong message.

As an ethical imperative, we have to recognise that SGVAW research in contemporary conflict settings will represent an ‘object of value’ to factions within the armed conflict, much like food and water are given high value. At one obvious extreme, SGVAW research with displaced women can be seen as military or strategic intelligence especially when the focus of SGVAW research is linked to the politics of war-making itself. Serious harm in the form of political repercussions can result if ‘sensitive’ research data is irresponsibly reported and/or misrepresented given the subsequent political opportunities to be gained. The reporting of information about SGVAW in a context where there is extreme poverty and little or no prospect of government support can also lead to economic harm. Monetary losses are a very real and serious harm to women participants who are often abandoned by their current or even prospective husbands when the prevalence of SGVAW is disclosed in the affected community. The likelihood of economic harm is a foreseeable consequence of the stigma of rape in many communities around the world. Both of these harms, political and economic, highlight another important ‘pitfall’ to doing this type of research: researcher(s) must never assume that they will be perceived by displaced communities as being ‘neutral’ in a conflict setting.

The ‘pitfall’ of presuming ‘neutrality’ and ‘impartiality’ is therefore a major ethical concern when doing ‘conflict research’ generally, but it is especially great when conducting SGVAW research with displaced women. The subsequent harms are potentially severe for

sexually abused women in conflict if unlimited confidentiality is not guaranteed and complete privacy not ensured.

4. Psychological Distress for Respondents and Researchers

Many of the ‘pitfalls’ already raised show how doing this type of research can put women respondents at risk for physical, social, political and even economic harm. But there is also the possibility that displaced women participating in SGVAW research could be harmed psychologically. Experts in both SGVAW and conflict settings caution researchers to take steps towards minimise participant distress, noting that the research is highly invasive, hugely personal, and very demanding. Powerful emotional responses are provoked in some participants and the interview may cause some women to re-live painful and frightening events. Both the sensitive content of questions and the timing of them can heighten the distress of already traumatised individuals in displaced groups. Fear of stigma further compounds this potential for distress if respondents believe that the community is aware of the study’s purpose. A major ‘pitfall’ to doing ‘sensitive’ research in general, and SGVAW with displaced women in particular, is the absence of awareness and an inability on the part of the research team to recognise and respond appropriately to participants’ distress.

In recent years, there is increasing recognition that ‘bearing witness’ to horrific and violent stories can be traumatising for the research team, especially for the interviewer(s); exposure from listening and analysing stories of SGVAW can evoke powerful emotions and cause distress. When this exposure is constant or recurs often over time, researchers may become desensitised to stories of SGVAW, or they may leave the study team altogether. Thus, a major ‘pitfall’ to doing SGVAW research with displaced women depends on whether the study includes built-in mechanisms to offer psycho-social support throughout the research process to all affected parties, both respondents and researchers.

5. Maximising Benefits: Building Trust and Building Capacity

There is a long history of abuse and exploitation in human subjects research and this is particularly true, but too often overlooked, where women are the research ‘subjects.’ Without going into the details of this history, I will stress that there is an unquestionable moral imperative that the information collected in SGVAW research must become a resource that empowers the displaced women respondents, enabling them to take greater control of their lives rather than enhance their vulnerabilities and risks.

The research must benefit the displaced women participants *directly* and this will likely be in the form of establishing interim services as an integral part of the study purpose. Ideally, these benefits should focus on building local capacity like training community health workers in psycho-social skills, for example. It is also understood within the bioethics community that women participants should obtain a financial benefit as a necessary remuneration for their time and effort in participating.

In light of the ‘pitfalls’ raised above about Northern- and/or Western-associated resources, maximising benefits is clearly a difficult task requiring advanced ‘non-academic’

socio-political skills on the part of the researcher. All researchers must be aware that women will never benefit from attempts to build capacity and trust if the researchers use interview materials *exclusively* for their purposes even if those purposes, like donor advocacy, are seemingly altruistic.

Strategies and Methods to Avoid Some of the ‘Pitfalls’

1. Make ‘first contacts’ as vague as possible (i.e. only participants should be aware of the exact study purpose), until women’s safety can be assured. Be aware, however, that women may feel betrayed by this ‘second-order’ consent process. This happened with Japanese women in the WHO Multi-Country Study on Domestic Violence. Understanding of and sensitivity to cultural context is critical.
2. Informed Consent must be oral (i.e. do not to leave a paper-trail) and comprehensive (in the participant’s local language and at their level of education).
3. Ensure privacy and maintain an unlimited guarantee of confidentiality: use ‘dummy’ questions, code words, or change the topic of conversation if a third party interrupts the interview. When complete privacy cannot be assured, self-response booklets may be used for highly sensitive questions. But, depending on context, the literacy level is likely to be insufficient for the use of such booklets.
4. Privacy means all responses must be anonymous (i.e. recorded on coded interview schedules). Any identifying information (i.e. name, age, location, etc.) must be recorded separately from the coded responses. All identifying information should be kept in a *locked safe* with extremely limited access (i.e. only the principal investigator, or team leader, should have the key) and in a secure location known only to the key-holder and away from the active research site.
5. Do not interview men in the same ‘cluster’ (e.g. IDP camp) as the women who will be interviewed. The samples need to be from separate locations without communication between them. Ideally, only one woman per household should be interviewed but this should be adapted to balance the need for a sufficient sample size of women respondents.
6. Devise a procedural plan for breaches in confidentiality. Do this *before* the research starts and in consultation with some of the participants.
7. Consult and collaborate with women participants at *all* stages of the research process to ensure a nuanced understanding of the local context.
8. Be aware of the mis-use and/or mis-representation of research data. Decide in advance and *in consultation with the respondents* what measures will be taken to responsibly report sensitive information: Where will the research be published? Who will have access to report? What form will the report take? How will ownership of the research data be shared? Many indigenous groups wish to be recognised openly for their contribution to the research and reject their anonymity in the research report. ‘Privacy’ concerns must be

balanced with concerns of data ownership: consult with the women participants at the start about how *they* wish to be represented in the reported information and their privacy respected.

9. Develop links with enduring institutions that are locally based so that available research information genuinely reaches those most affected.
10. Train interviewers to recognise and respond appropriately to the signs of respondents' distress. Training should include explicit exercises to aid field staff in examining their own beliefs and cultural attitudes regarding rape and other forms of sexual violence.
11. Include a qualified therapist (psychologist, or social worker) on the research team in order to provide adequate psycho-social support to women respondents who may experience distress as a result of the interview. If this is not possible, provide referrals to such services but beware that this information must be in a form that is easily hidden from potential abusers (i.e. small cards that can be put in a shoe).
12. Hold regular de-briefing sessions for data collectors and other research team members to address their own safety concerns and potential distress.
13. Honestly evaluate the unequal power relationship between researcher and participant—know when it is time to stop. If the women participants say 'enough is enough,' then respect their wishes and end the research.

Suggestions For 'Good Practice'

I have highlighted *some* of the major 'pitfalls' to doing SGVAW research with women in conflict settings. While the list of suggestions for avoiding the ethical problems is certainly not exhaustive, it gives a sense of the high level of care and consideration required before, during and after the study to ensure the dignity and safety of the women participants. Although there are many inherent tensions that cannot be discussed here, I argue that this type of research can be both ethical and scientifically sound if and only if, it follows a feminist participatory method.

As 'good practice,' a feminist participatory method would focus on genuine collaboration between the researcher and the women respondents in all aspects of the research process, including: design, theoretical framework, methods and dissemination/reporting. It is clear from the above that researchers must be cognizant of and actively work to avoid the multiple forms of harm—physical, psycho-social, political, and economic. These harms, both foreseeable consequences and hidden 'pitfalls,' can be most attributed to underlying imbalances of power—between the researcher(s) and participants, between different members of the community under study, and between the displaced group and the larger community in conflict, etc. A feminist participatory method is 'good practice' for this type of research specifically because it seeks to equalise the power imbalances in the research relationship, and does so by beginning with the acknowledgment of women respondents *as the experts on their own lives* such that the researcher stands to learn *from* the women participants.

As a political concern and a deeply ethical issue, the active re-balancing of power through a feminist participatory method of research provides the means by which capacity and trust can be (re-)built. To that end, researchers should bring the results back to the displaced women they study to ensure the researchers' interpretation of the data is accurate and the results will be disseminated responsibly. However, while the feminist imperative of full and equal participation would require that the women participants review and approve the final research report before its dissemination, the act of doing so at the final stage of the research process could also be too risky, causing unintended harms. The representation and public reporting of the research is an incredibly important ethical issue that must be addressed *at the outset* of the research as it may become impossible to return to the women participants with the research results. Dialogue is critical to the appropriate balancing of harms. Similarly, disagreement may develop among the women participants about whether and how to publicly report the research data. Again, *early* and *on-going* dialogue must include a consensus plan for resolving such potential personal conflict.

In practice, then, the feminist imperative of full and equal participation must serve to enhance the women participants' empowerment rather than enhance their vulnerabilities and risks of further harm. The implementation of a feminist participatory method will surely be varied and context-dependent with no prescribed solutions to ethical dilemmas. Nevertheless, a feminist participatory method demands, as a minimum, a strong commitment by all key actors to developing dialogic relations that will form the foundation for doing SGVAW research with women in conflict so that the research will be both ethical and scientifically sound.

To conclude, I will end with a warning. A feminist participatory method, while certainly 'good practice,' may be confronted with much resistance from different 'stakeholders,' particularly from foreign donors. Resistance is likely because such a method will inevitably increase the time and resources required to implement SGVAW research with women in conflict settings. Despite this, I maintain that any economic and logistical concerns are far outweighed by the myriad of foreseeable and unintended harms that this type of investigation can cause. Furthermore, such concerns are also far outweighed by the moral imperative to redress the historical harms of health research more generally—an institution that has proven to be highly exploitative of women and other disadvantaged groups.

Equalising the imbalances of power in the research relationship, both past and present, is a necessary condition for ethical research on SGVAW research with women in conflict in support of gender justice in research and in society at large. No social change is possible if researchers and other 'stakeholders' continue to ignore the lessons of history. Hence, because its core is power-focused, a feminist participatory method is the only 'good practice' that can ethically justify SGVAW research with displaced women in armed conflict.

Appendix I: Resources For More Information & Further Reading

General Research Ethics

Dickert N and Sugarman J. (2005). **Ethical Goals of Community Consultation in Research.** *American Journal of Public Health*, 95(7): 1123-7.

Purdy LM. **Good Bioethics Must Be Feminist Bioethics** in *Philosophical Perspectives on Bioethics* eds. LW Sumner and J Boyle. (Toronto: University of Toronto Press; 1996).

Sieber JE. **Ethics in Research with Human Participants** eds. BD Sales and S Folkman (2000: Washington, DC; American Psychiatric Association). Pp. 22-5.

Wyatt Seal D, Bloom FR, and Somlai AM. (2000). **Dilemmas in Conducting Qualitative Sex Research in Applied Field Settings**. *Health Education & Behavior*, 27(1): 10-23.

Cross-Cultural and Community-Based Research

Eckenwiler LA. **Realizing Justice in Health Research for Women: Reflections on Democratizing Decisionmaking** in *Globalizing Feminist Bioethics: Crosscultural Perspectives*, ed. by Rosemarie Tong with G Anderson and A Santos. (Boulder, Colorado: Westview Press; 2001).

Fontes L. (1998). **Ethics in Family Violence Research: Cross-Cultural Issues**. *Family Relations*, 41(1): 53-61.

Israel BA, Schulz AJ, Parker EA, Becker AB, Allen AJ and Guzman JR. **Critical Issues in Developing and Following Community Based Participatory Research Principles** in *Community Based Participatory Research for Health*. Meredith Minkler and Nina Wallerstein, eds. San Francisco: Jossey-Bass, 2003.

Luna F. **Globalization, Gender and Research** in *Globalizing Feminist Bioethics: Crosscultural Perspectives*, ed. by Rosemarie Tong with G Anderson and A Santos. (Boulder, Colorado: Westview Press; 2001).

Martin PM and Glesne C. (2002). From the Global Village to the Pluriverse?: 'Other' Ethics for Cross-Cultural Qualitative Research. *Ethics, Place and Environment*, 5(3): 205-221.

Minkler M. (2004). **Ethical Challenges for the "Outside" Researcher in Community-Based Participatory Research**. *Health Education & Behavior*, 31(6): 684-97.

Petchesky R and Judd K. eds. **Negotiating Reproductive Rights: Feminist Perspectives Across Countries and Cultures**. International Reproductive Rights Research Action Group. London and New York: Zed Books; 1998.

Schnarch B. **Ownership, Control, Access, and Possession (OCAP) or Self-Determination Applied to Research: A Critical Analysis of Contemporary First Nations Research and Some Options for First Nations Communities**. *Journal of Aboriginal Health*, 1(1): 80-95. (Ottawa: National Aboriginal Health Organization, January 2004).

Sensitive and VAW Research

Ellsberg M and Heise L. **Researching Violence Against Women: A Practical Guide To Researchers and Activists**. (Washington: World Health Organization, PATH; 2005).

Dobash RP and Dobash RE. (1995). **Reflections on Findings from the Violence Against Women Survey**. *Canadian Journal of Criminology*, 37(3): 457-71.

Kotch JB. (2000). **Ethical Issues in Longitudinal Child Maltreatment Research**. *Journal of Interpersonal Violence*, 15(7): 696-709.

Meth P and Malaza K. (2003). **Violent Research: the Ethics and Emotions of Doing Research with Women in South Africa**. *Ethics, Place and Environment*, 6(2): 143-59.

The Sexual Violence Research Initiative: <http://www.who.int/svri>.

Social Science Research Council. **Methods and Systems for the Assessment and Monitoring of Sexual Violence and Exploitation in Conflict Situations**. A Technical Consultation, 15-16 December 2005. New York: UNFPA, WHO. (Accessed on 19 September 2006 at http://www.ssrc.org/programs/HIV/publications/SVE_Report.pdf).

Sullivan CM and Cain D. (2004). **Ethical and Safety Considerations When Obtaining Information From or About Battered Women for Research Purposes**. *Journal of Interpersonal Violence*, 19(5): 603-18.

Wahab S and Sloan Lacey. **Ethical Dilemma's in Sex Work Research**. (See Ethics section on the Network of Sex Worker Projects' website at www.nswp.org)

Wiederman MW. "Institutional Review Boards" in *The Handbook for Conducting Research on Human Sexuality* eds. Wiederman MW and BE Whitley. (Mahwah, New Jersey; Lawrence Erlbaum Association, Publishers; 2002). Pp. 484-500.

World Health Organization. **Putting Women's Safety First: Ethical and Safety Recommendations for Research on Domestic Violence Against Women**. Report No. WHO/EIP/GPE/99.2 (Geneva: Global Programme on Evidence for Health Policy).

Data Collection in Humanitarian Response - Research with Vulnerable Populations

Black R. (2003). **Ethical Codes in Humanitarian Emergencies: From Practice to Research?** *Disasters*, 27(2): 95-108.

Flaskerud JH, and Winslow BJ. (1998). **Conceptualising Vulnerable Populations Health-Related Research**. *Nursing Research*, 47(2): 69-78.

Goodhand J. (August 2000). **Research In Conflict Zones: Ethics and Accountability**. *Forced Migration Review*, 8:12-15.

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