

QUALITATIVE DATA COLLECTION METHODS

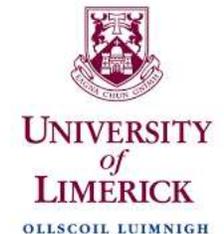
Training Course in Sexual and
Reproductive Health Research
Geneva workshop October 2016



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LEARNING OUTCOMES

By the end of the presentation you should be able to:

1. Describe different types of data collection techniques
2. Understand the practical communication skills for interviews to ask good questions, probe and follow up questions .
3. Able to prepare for interview
4. Understand the characteristics and uses of focus group discussions

OVERVIEW OF DATA COLLECTION TECHNIQUES

Data collection techniques allow us to systematically collect information about our objects of study (people, objects, phenomena) and about the settings in which they occur.

In the collection of data we have to be systematic. If data are collected haphazardly, it will be difficult to answer our research questions in a conclusive way.

DATA COLLECTION TECHNIQUES

- 1. Interviews (face-to-face)**
- 2. Focus group discussions**

INTER-VIEWS



INTERVIEW

An INTERVIEW is a data-collection (generation) technique that involves oral questioning of respondents.

Answers to the questions during the interview can be recorded by **writing** them down or by **tape-recording** the responses, or by a combination of both.

HIGH DEGREE OF FLEXIBILITY INTERVIEW:

This could be used for example when studying sensitive issues (teenage pregnancy and abortions), e.g.:

- How teenagers started sexual intercourse?
- The actions couples take in the event of unwanted pregnancies?

The investigator should have an additional list of topics ready when the respondent falls silent

- e.g., when asked about abortion methods used
- who made the decision and who paid

HIGH DEGREE OF FLEXIBILITY:

The sequence of topics should be determined by the flow of discussion.

It is often possible to come back to a topic discussed earlier in a later stage of the interview.

The unstructured or loosely structured method of asking questions can be used for interviewing individuals as well as groups of key informants (FGD).

LOW DEGREE OF FLEXIBILITY:

Less flexible methods of interviewing are useful when the researcher is relatively knowledgeable about expected answers or when the number of respondents being interviewed is relatively large.

Then **interview guide** may be used with a fixed list of questions in a standard sequence.

PRACTICAL COMMUNICATION SKILLS FOR INTERVIEWS

Good communication should lead to a shared understanding.

Be aware of nonverbal communication: body language and tone of voice

Giving constructive feedback during the interview.

1. Comment on positive things first
2. Be constructive
3. Be specific
4. Do not give direct or blaming criticism

ASK GOOD QUESTIONS

Start with what, how, who, when, say “please give an example of”.

Question starting with “**Why**” make people feel uncomfortable.

Don’t ask a biased and leading or direct questions.

The type of question asked must be adapted to the changing level of trust between interviewer and informant during the interview.

PROBING

PROBING is a good questioning skill

Examples

Does the child have fever? (Closed question)

- Probes How high is the fever?
- Since when has he had the fever?

Have you given the child medicine?

- Probes What kinds of medicines have you given?
- How much? For how long?

TYPE OF QUESTIONS

1. **Hypothetical question:** e.g. “Suppose you had more money, how would you spend that?”
2. **Provocative questions:** e.g. “Some say that HIV is the punishment of God, what do you think about that?”
3. **Ideal questions:** e.g. “Please describe to me what a good delivery would be like”
4. **Interpretative questions:** e.g. “You said earlier that you go to healers for diarrhoea, how this related ideas about hot-cold?”
5. **Experience questions:** e.g. “Could you tell me about your experience of caring for patients with cancer?”

TYPE OF QUESTIONS

6. **Feeling questions:** e.g. “How did you feel when the first patient in your care died?”
7. **Knowledge questions:** e.g. “What services are available for this group of patients?”
7. **Grand-tour questions:** e.g. “Can you describe a typical day in the community? (to a community midwife)”
8. **Mini-tour questions:** e.g. “Can you describe what goes on when a women die giving birth?”
9. **Example Questions** e.g. “Can you give me an example of a difficult delivery?”

STAGES OF QUESTIONS DURING THE INTERVIEW

Stage of the question	Purpose
1. Opening questions	To identify the characteristics that the participants have in common. Participants should be given an opportunity to introduce themselves.
2. Introductory questions	To introduce the general topic of the discussion, and to stimulate the conversation and improve interaction in the group
3. Transition questions	To move the participants into the focus of the discussion.
4. Key questions	Concern about the focus of the interview
5. Ending questions	Give the participants an opportunity to make final statement
7. Final questions	Ask the participants to add things they think have not been considered during the discussion

PREPARE FOR THE INTERVIEW

1. Recruit participants according to the recruitment strategy outlined in the work plan
2. Set up recording equipment and the physical space where interviews will take place.
3. Become knowledgeable about the research topic, including anticipating and being prepared to answer any questions participants may have about it.
4. Be reliable. To get participants to take the interview seriously, you need to demonstrate your own commitment. Arrive on time, equipped with the recording equipment, interview guide, and notebooks. Be both mentally and psychologically prepared to conduct the interview. Keep all promises you make to participants.

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5. Obtain informed consent from each participant before the interview.
 6. Address all questions or topics listed in the interview guide.
 7. Probe participants for elaboration of their responses, with the aim of learning all they can share about the research topic.
 8. Ask follow-up questions (some of which may be scripted in the interview guide) in order to elicit participants' complete knowledge and experience related to the research topic.

DOCUMENT THE INTERVIEW

Record the interview using an audio (and sometimes video) recorder.

Take backup notes

Observe and document participants' behaviors and contextual aspects of the interview as part of your field notes.

Expand your notes as soon as possible after each interview, preferably within 24 hours, while your memory is still fresh.

Example: Data collection in PEER approach

PEER

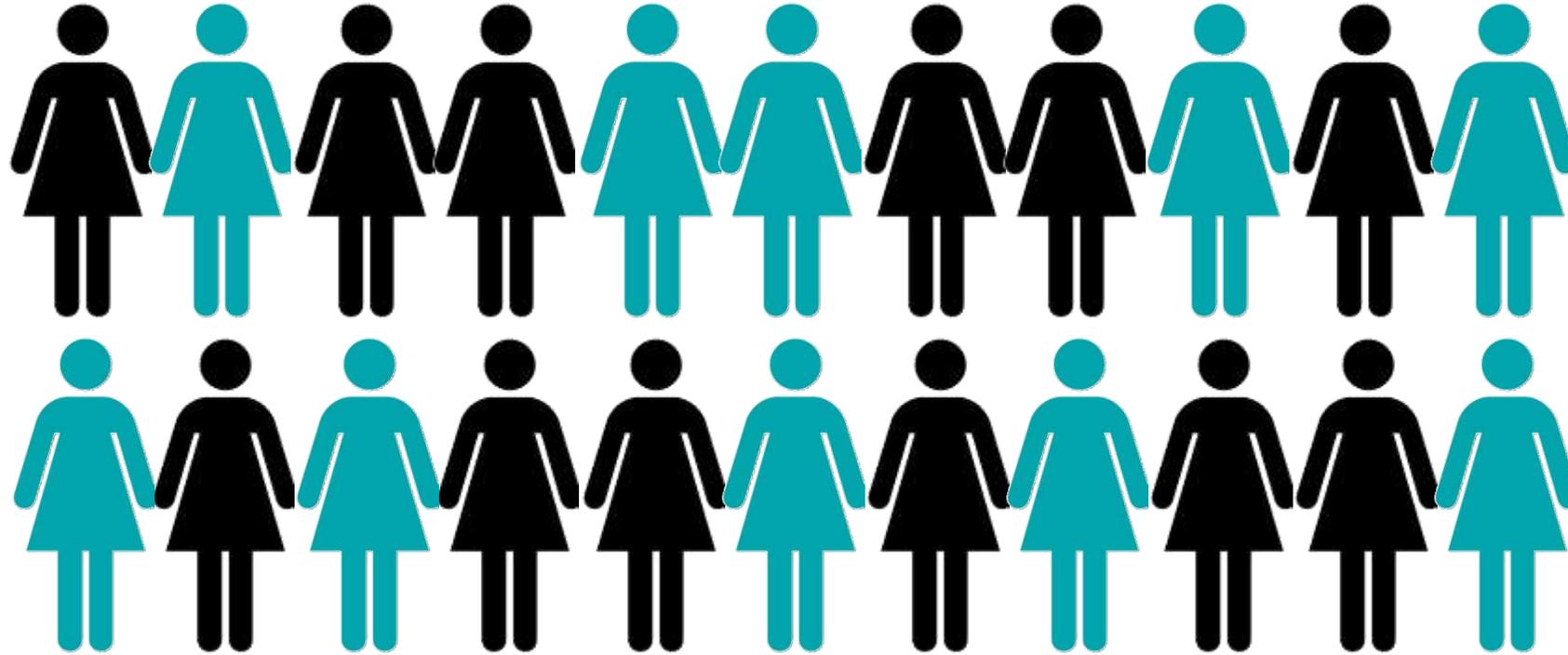
Participatory Ethnographic Evaluation & Research

Research & Empowerment

PEER is an innovative, rapid, participatory and qualitative research method involving ordinary members of the community to generate in-depth and contextual data

(Price and Hawkins 2002).

PEER training workshop

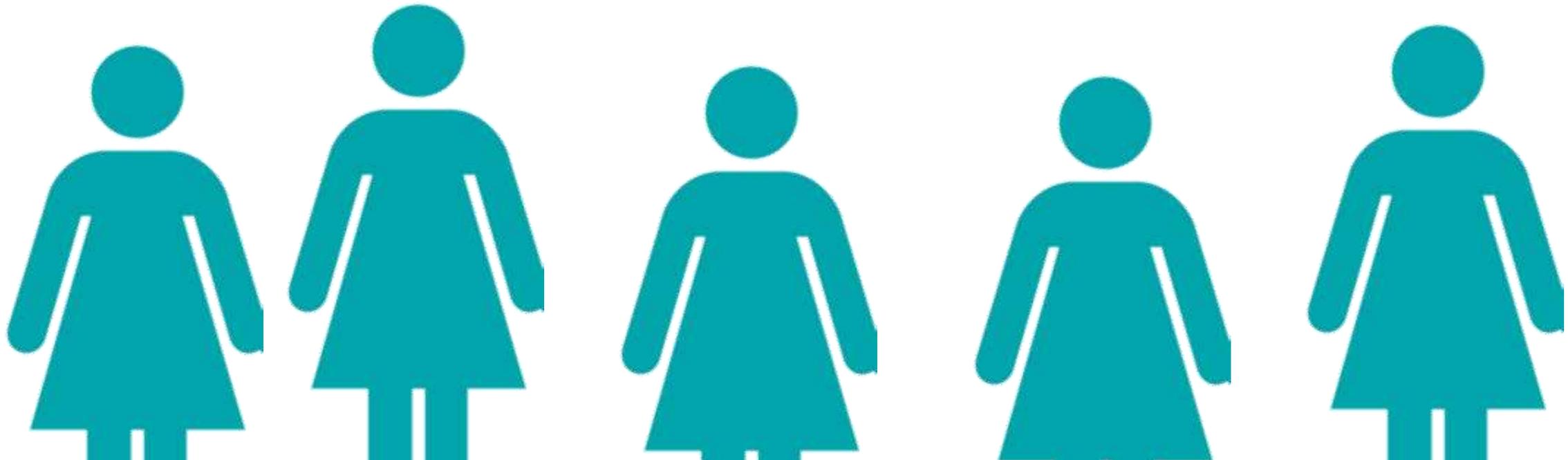


14 marginalized women with no formal education were recruited by village leaders

PEER training workshop

The women attended 4 days PEER training workshop to develop their skills to:

- Design research instruments
- Conduct interviews
- Collect narratives and stories
- Analyse the data



PEER training workshop

1

Discussed important maternal health issues in their community.

2

Identified key themes and questions for the qualitative research

3

Developed images to remind them with the questions.

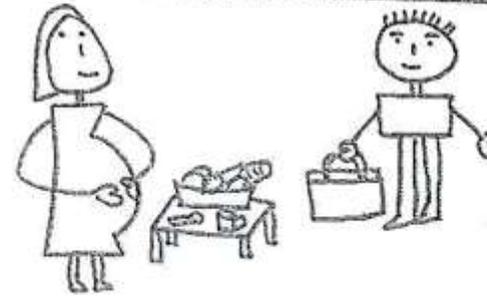
PEER training workshop

3

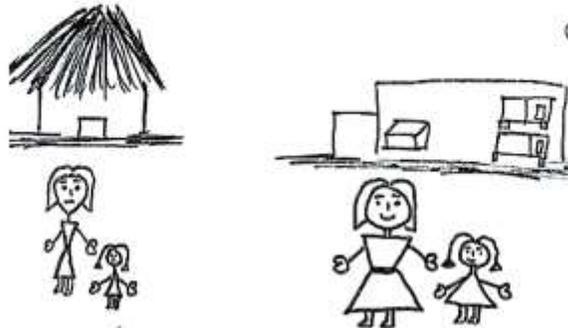
شغل بتاع بيت يتغير كيف
بعد المرأة تحمل؟



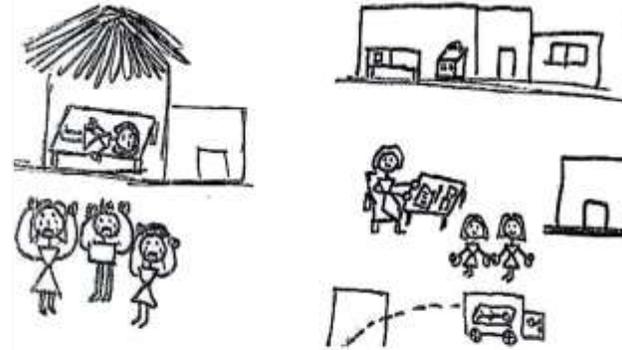
المرأة الحامل بتسوي شنو؟
عشان الحمل يكون كويس؟



الشي البخلي المرأة الحامل يجيب جنا
كويس ولا كعب شنو؟



الشي البخلي المرأة الحامل
تموت او تحيا في الولادة شنو؟

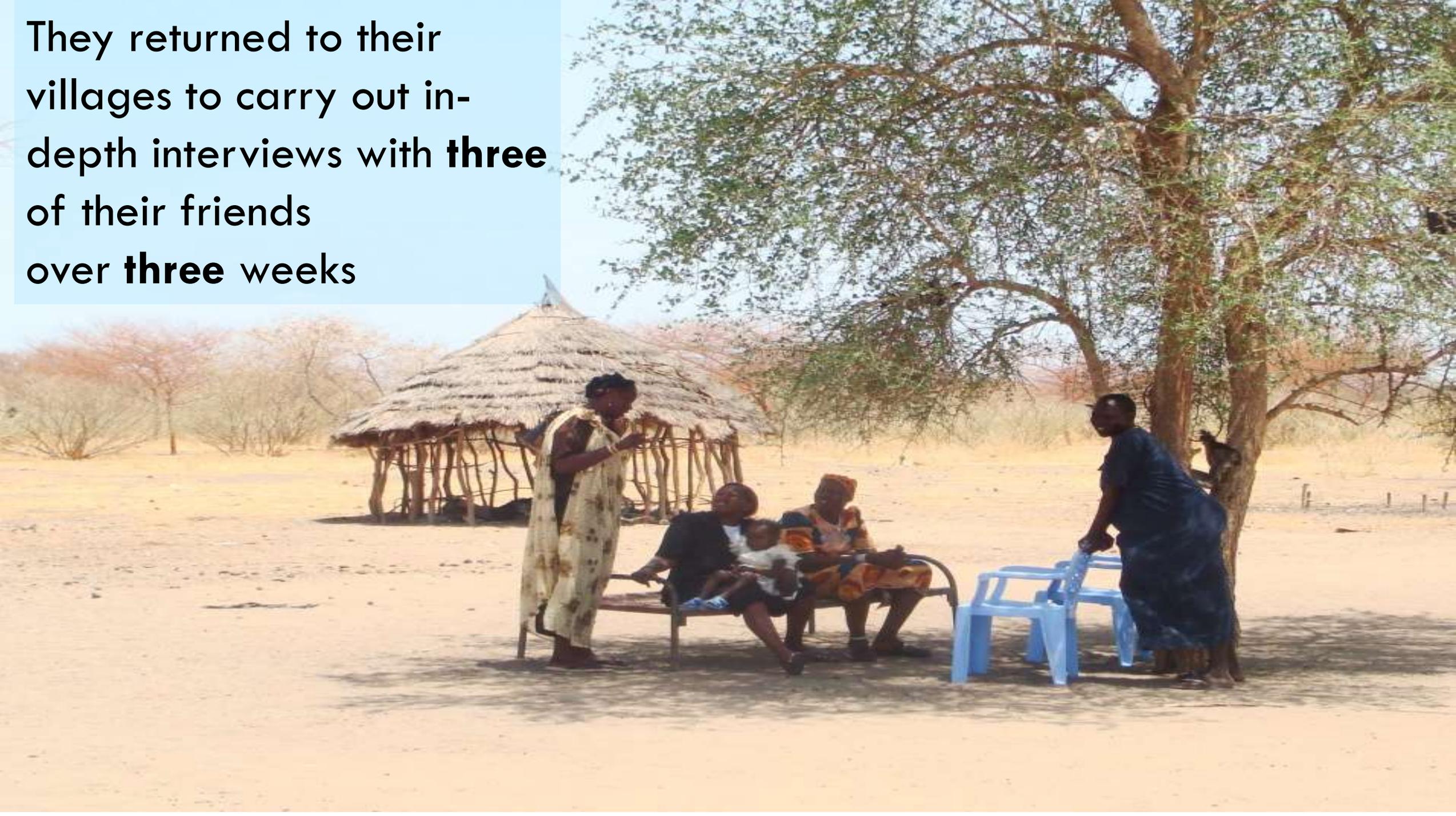


PEER training workshop



★ Qualitative
Researcher

They returned to their villages to carry out in-depth interviews with **three** of their friends over **three** weeks



De-briefing with PEER researchers



Research team visited them to collect their findings in a series of de-briefing sessions

PEER Analysis workshop

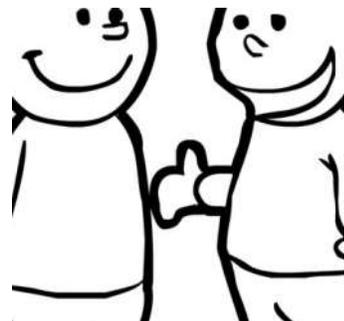
Discuss main themes from their interviews

Act out Dramas

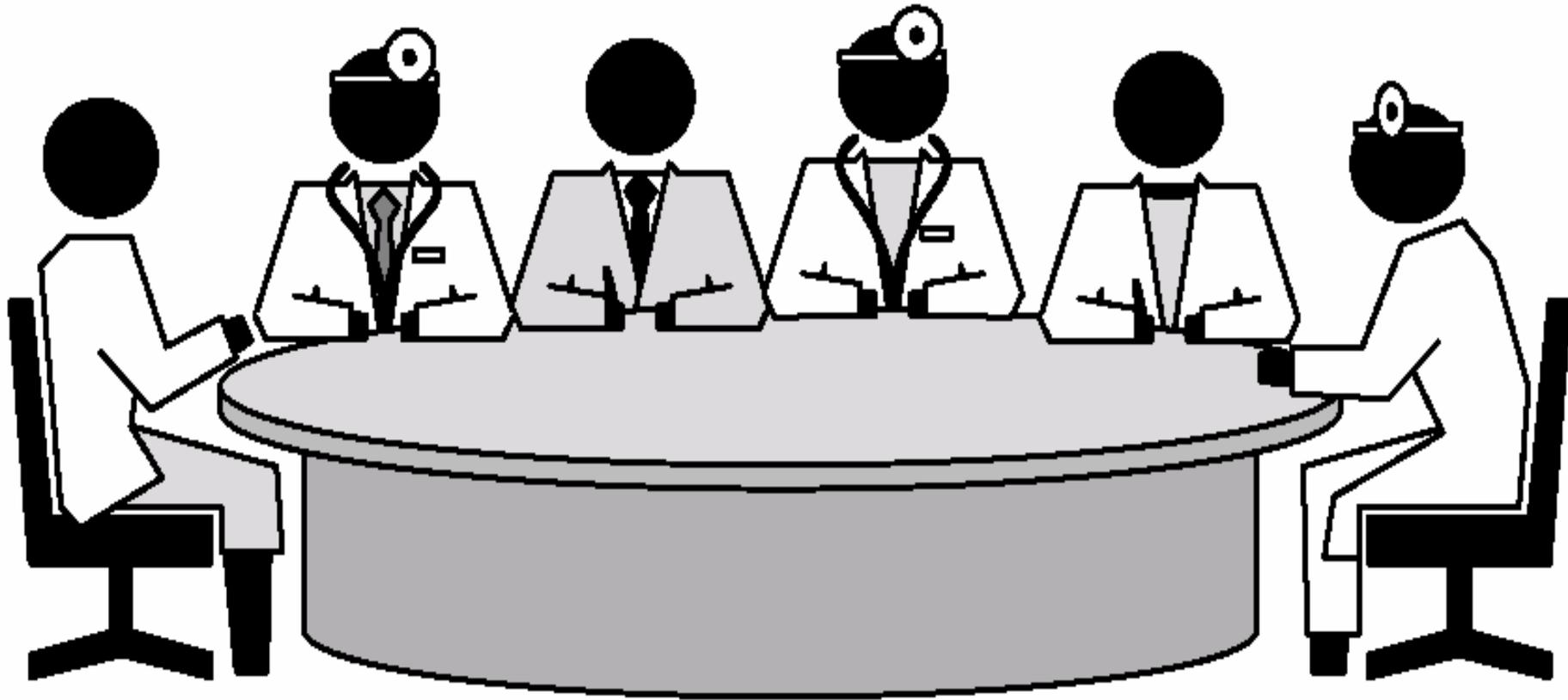
Develop profile stories

Advance analysis NVivo

Upon completion of the interviews with peers, the women came together with researchers, for analysis workshop



3. FOCUS GROUP DISCUSSIONS (FGD)



DIFFERENCES BETWEEN INTERVIEWS AND FGD

	Appropriate for	Strength of method
Interviews	<ul style="list-style-type: none">•Eliciting individual experiences, opinions, feelings•Addressing sensitive topics	<ul style="list-style-type: none">•Elicits in-depth responses, with differences and contradictions•Gets at interpretive perspective, i.e., the connections and relationships a person sees between particular events, phenomena, and beliefs
FGD	<ul style="list-style-type: none">•Identifying group norms•Eliciting opinions about group norms•Discovering variety within a population	<ul style="list-style-type: none">•Elicits information on a range of norms and opinions in a short time•Group dynamic stimulates conversation, reactions

FGD TECHNIQUES CAN BE USED TO:

1. **Develop relevant research hypotheses** by exploring in greater depth the problem to be investigated and its possible causes.
2. **Formulate appropriate questions** for more structured, larger scale surveys.
3. Help understand and solve unexpected problems in **interventions**.
4. Develop appropriate **messages for health education** programmes and later evaluate the messages for clarity.
5. Explore **controversial topics**.

STRENGTHS AND LIMITATIONS OF FGD

1. A well chosen group, in terms of composition and number, FGDs can be a **powerful research tool** which provides valuable spontaneous information in a short period of time and at relatively low cost.
2. FGD should *not* be used for **quantitative** purposes, such as the testing of hypotheses or the generalisation of findings for larger areas, which would require more elaborate surveys.
3. Depending on the topic, it may be **risky** to use FGDs as a **single tool**. In group discussions, people tend to centre their opinions on the most common ones, on **'social norms'**.

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4. In reality, opinions and behaviour may be more diverse. Therefore it is advisable to **combine** FGDs with at least some **key informant** and **in-depth interviews**.
 5. In case of very **sensitive topics**, such as sexual behaviour or coping with HIV/AIDS, FGDs may also have their limitations, as group members may hesitate to air their feelings and experiences freely.
 6. One possible remedy is the selection of participants who do not know each other (e.g., selection of children from different schools in FGDs about adolescent sexual behaviour), while assuring absolute confidentiality.



HOW TO CONDUCT A FGD

1. DETERMINE THE PURPOSE

A FGD can be regarded as a mini-study.

It therefore requires one or two clear objectives.

These objectives will guide the research team in the formulation of discussion questions.

2. SITUATION ANALYSIS

Any FGD requires good knowledge of local conditions. There are always differences between community members, for example in education, political power, gender, economic status and ethnic group. These differences will be reflected in their perceptions of the problems they suffer from and possible solutions. A researcher must be aware of these differences

The first task of the researchers will be to explore the area and **identify possible target groups.**

Interviews with some key informants and a rudimentary situation analysis are then indispensable.

3. RECRUITMENT OF PARTICIPANTS

Participants should be roughly of the **same socio-economic group** or have a similar background in relation to the issue under investigation.

The age and sexual composition of the group should facilitate **free discussion**.

If you are an outsider, you may have to rely on **your key informants** for the first selection of participants in FGDs.

The key informants may select persons similar to themselves so that you do not get an adequate variety of views in your discussion group.

So explain to them that you want a group of people that can express a *range* of views, to be able to have a proper discussion.

4. PREPARATION OF A DISCUSSION GUIDE:

There should be a **written** list of topics to be covered.

It can be formulated as a series of open-ended questions.

Guides for different groups gathered to discuss the same subject may vary slightly, depending on their knowledge or attitudes and how the subject should first be explored with them.

5. FUNCTIONS OF THE FACILITATOR

1. Introduce the session
2. Encourage discussion and involvement
3. Deal correctly with sensitive issues.
4. Observe non-verbal communication.
5. Avoid being placed in the role of expert
6. Control the rhythm of the meeting
7. Take time at the end of the meeting to summarise, check for agreement and thank the participants
8. Summarise the main issues brought up
9. Listen for additional comments and spontaneous discussions after the meeting has been closed.

7. FUNCTIONS OF THE RECORDER

The recorder should keep a record of the content of the discussion as well as emotional reactions and important aspects of group interaction. Assessment of the emotional tone of the meeting and the group process will enable you to judge the validity of the information collected during the FGD.

Items to be recorded include:

- Date, time, place
- Names and characteristics of participants
- General description of the group dynamics (level of participation, presence of a dominant participant, level of interest)
- Opinions of participants, recorded as much as possible in their own words
- Emotional aspects
- Vocabulary used – (to use it in developing questionnaires or health education materials)
- Spontaneous relevant discussions during breaks or after the meeting has been closed

8. DURATION OF SESSIONS

A focus group session typically lasts up to an hour and a half.

Generally the first session with a particular type of group is longer than the following ones because all of the information is new.

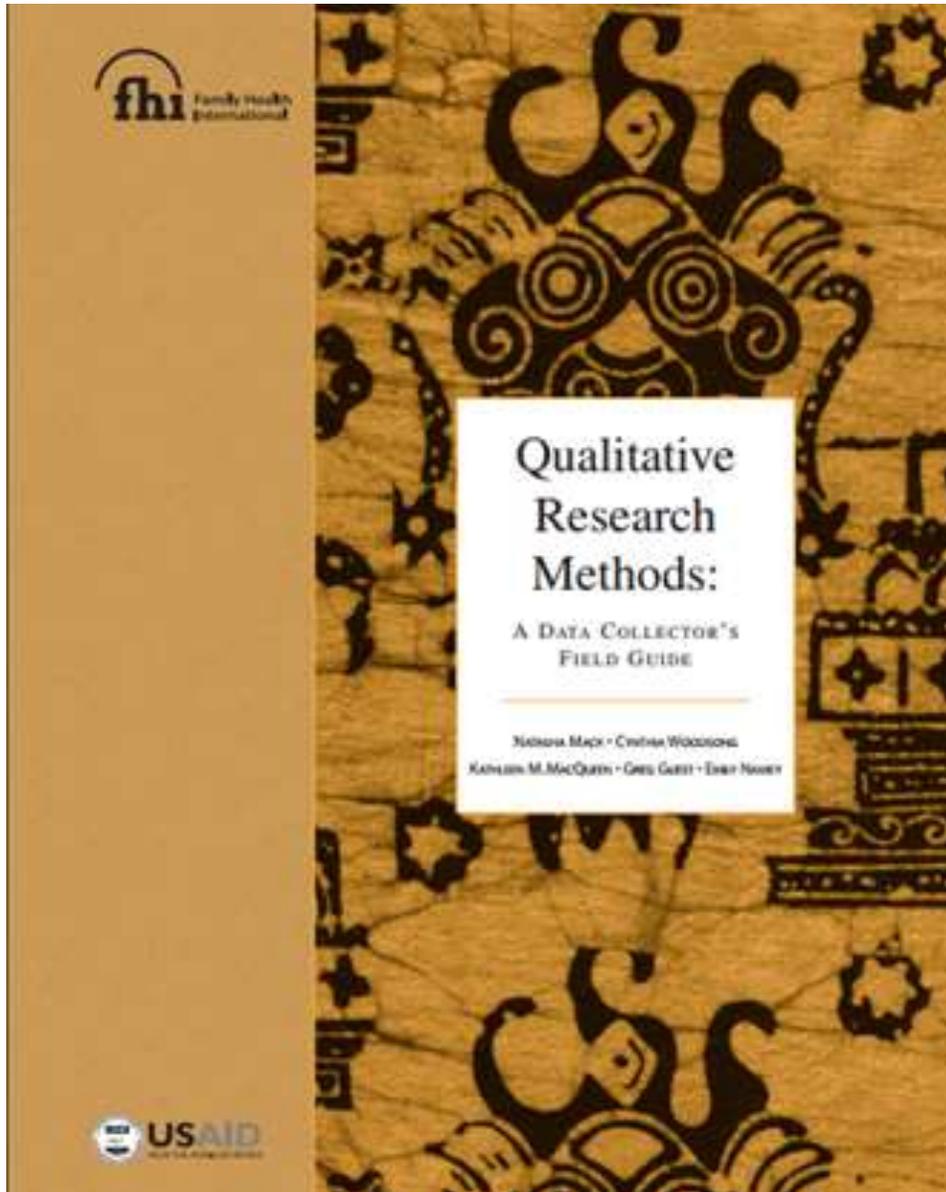
Thereafter, if it becomes clear that all the groups have a similar opinion on particular topics, the facilitator may be able to move the discussion along more quickly to other topics which still elicit new points of view.

9. NUMBER OF SESSIONS

It depends upon project needs, resources, and whether new information is still coming from the sessions (Saturation)

One should plan to conduct at least two FGDs for each sub-group (for example, two for males and two for females).

Otherwise you have no way of assessing whether the information you get from the first FGD is representative for that group.



READING MATERIALS



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