

Introduction to qualitative research methods – Part I

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Abstract

Qualitative research methods are widely used in the social sciences and the humanities, but they can also complement quantitative approaches used in clinical research. In this article, we discuss the key features and contributions of qualitative research methods.

Keywords: Qualitative research, social sciences, sociology

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INTRODUCTION

Qualitative research methods refer to techniques of investigation that rely on nonstatistical and nonnumerical methods of data collection, analysis, and evidence production. Qualitative research techniques provide a lens for learning about nonquantifiable phenomena such as people’s experiences, languages, histories, and cultures. In this article, we describe the strengths and role of qualitative research methods and how these can be employed in clinical research.

Although frequently employed in the social sciences and humanities, qualitative research methods can complement clinical research. These techniques can contribute to a better understanding of the social, cultural, political, and economic dimensions of health and illness. Social scientists and scholars in the humanities rely on a wide range of methods, including interviews, surveys, participant observation, focus groups, oral history, and archival research to examine both structural conditions and lived experience [Figure 1]. Such research can not only

provide robust and reliable data but can also humanize and add richness to our understanding of the ways in which people in different parts of the world perceive and experience illness and how they interact with medical institutions, systems, and therapeutics.

Qualitative research methods should not be seen as tools that can be applied independently of theory. It is important for these tools to be based on more than just method. In their research, social scientists and scholars in the humanities emphasize social theory. Departing from a reductionist psychological model of individual behavior that often blames people for their illness, social theory focuses on relations – disease happens not simply in people but between people. This type of theoretically informed and empirically grounded research thus examines not just patients but interactions between a wide range of actors (e.g., patients, family members, friends, neighbors, local politicians, medical practitioners at all levels, and from many systems of medicine, researchers, policymakers) to give voice to the lived experiences, motivations, and constraints of all those who are touched by disease.

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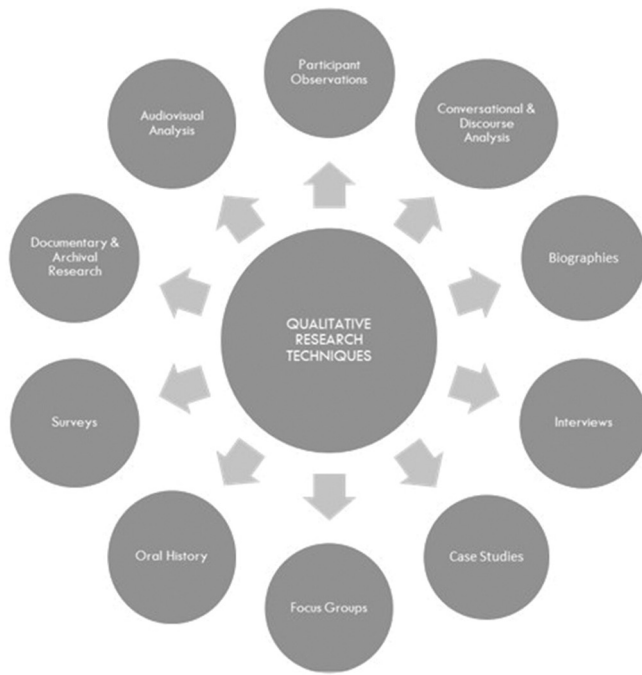


Figure 1: Examples of qualitative research techniques

PHILOSOPHICAL FOUNDATIONS OF QUALITATIVE RESEARCH METHODS

In identifying the factors that contribute to the occurrence and persistence of a phenomenon, it is paramount that we begin by asking the question: what do we know about this reality? How have we come to know this reality? These two processes, which we can refer to as the “what” question and the “how” question, are the two that all scientists (natural and social) grapple with in their research. We refer to these as the ontological and epistemological questions a research study must address. Together, they help us create a suitable methodology for any research study^[1] [Figure 2]. Therefore, as with quantitative methods, there must be a justifiable and logical method for understanding the world even for qualitative methods. By engaging with these two dimensions, the ontological and the epistemological, we open a path for learning that moves away from commonsensical understandings of the world, and the perpetuation of stereotypes and toward robust scientific knowledge production.

Every discipline has a distinct research philosophy and way of viewing the world and conducting research. Philosophers and historians of science have extensively studied how these divisions and specializations have emerged over centuries.^[1-3] The most important distinction between quantitative and qualitative research techniques lies in the nature of the data they study and analyze. While the former focus on statistical, numerical, and quantitative aspects

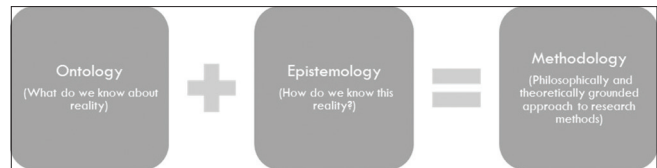


Figure 2: Developing a research methodology

of phenomena and employ the same in data collection and analysis, qualitative techniques focus on humanistic, descriptive, and qualitative aspects of phenomena.^[4]

For the findings of any research study to be reliable, they must employ the appropriate research techniques that are uniquely tailored to the phenomena under investigation. To do so, researchers must choose techniques based on their specific research questions and understand the strengths and limitations of the different tools available to them. Since clinical work lies at the intersection of both natural and social phenomena, it means that it must study both: biological and physiological phenomena (natural, quantitative, and objective phenomena) and behavioral and cultural phenomena (social, qualitative, and subjective phenomena). Therefore, clinical researchers can gain from both sets of techniques in their efforts to produce medical knowledge and bring forth scientifically informed change.

KEY FEATURES AND CONTRIBUTIONS OF QUALITATIVE RESEARCH METHODS

In this section, we discuss the key features and contributions of qualitative research methods [Figure 3]. We describe the specific strengths and limitations of these techniques and discuss how they can be deployed in scientific investigations.

One of the most important contributions of qualitative research methods is that they provide rigorous, theoretically sound, and rational techniques for the analysis of subjective, nebulous, and difficult-to-pin-down phenomena. We are aware, for example, of the role that social factors play in health care but find it hard to qualify and quantify these in our research studies. Often, we find researchers basing their arguments on “common sense,” developing research studies based on assumptions about the people that are studied. Such commonsensical assumptions are perhaps among the greatest impediments to knowledge production. For example, in trying to understand stigma, surveys often make assumptions about its reasons and frequently associate it with vague and general common sense notions of “fear” and “lack of information.” While these may be at work, to make such assumptions based on commonsensical understandings, and without conducting research inhibit us

<p>Qualitative Data</p> <ul style="list-style-type: none"> • Non-numerical data • Understanding relationships, experiences, nebulous and difficult to pin down phenomena • Subjective, Humanistic, Descriptive 	<p>Studying Nebulous, Subjective Phenomena</p> <ul style="list-style-type: none"> • Not "common-sense" • Rigorous research techniques • Based on scientific principles and social theory • Open-Ended Research • Unbiased Techniques • Exploratory
<p>Studying Complex Phenomena</p> <ul style="list-style-type: none"> • Inductive, ground-up • Empirical • Understand Object in dispersion, from multiple vantage points • Used in study of cultures, histories, societies, politics, individual and collective patterns 	<p>Studying Irrational, Illogical and Emotional Phenomena</p> <ul style="list-style-type: none"> • Shift focus away from Individual to Structural conditions (Social, Cultural, Economic, Political) • Foreground stories, myths, fears and desires • Bring analytical precision • Based on long term, empirical, in-depth research conducted among people, societies and cultures

Figure 3: Key features of qualitative research methods

from exploring the multiple social factors that are at work under the guise of stigma.

In unpacking commonsensical understandings and researching experiences, relationships, and other phenomena, qualitative researchers are assisted by their methodological commitment to open-ended research. By open-ended research, we mean that these techniques take on an unbiased and exploratory approach in which learnings from the field and from research participants, are recorded and analyzed to learn about the world.^[5] This orientation is made possible by qualitative research techniques that are particularly effective in learning about specific social, cultural, economic, and political milieus.

Second, qualitative research methods equip us in studying complex phenomena. Qualitative research methods provide scientific tools for exploring and identifying the numerous contributing factors to an occurrence. Rather than establishing one or the other factor as more important, qualitative methods are open-ended, inductive (ground-up), and empirical. They allow us to understand the object of our analysis from multiple vantage points and in its dispersion and caution against predetermined notions of the object of inquiry. They encourage researchers instead to discover a reality that is not yet given, fixed, and predetermined by the methods that are used and the hypotheses that underlie the study.

Once the multiple factors at work in a phenomenon have been identified, we can employ quantitative techniques and embark on processes of measurement, establish patterns and regularities, and analyze the causal and correlated factors at work through statistical techniques. For example, a doctor may observe that there is a high patient drop-out in treatment. Before carrying out a study which relies on quantitative techniques, qualitative research methods such as conversation analysis, interviews, surveys, or even focus group discussions may prove more effective in learning about all the factors that are contributing to

patient default. After identifying the multiple, intersecting factors, quantitative techniques can be deployed to measure each of these factors through techniques such as correlational or regression analyses. Here, the use of quantitative techniques without identifying the diverse factors influencing patient decisions would be premature. Qualitative techniques thus have a key role to play in investigations of complex realities and in conducting rich exploratory studies while embracing rigorous and philosophically grounded methodologies.

Third, apart from subjective, nebulous, and complex phenomena, qualitative research techniques are also effective in making sense of irrational, illogical, and emotional phenomena. These play an important role in understanding logics at work among patients, their families, and societies. Qualitative research techniques are aided by their ability to shift focus away from the individual as a unit of analysis to the larger social, cultural, political, economic, and structural forces at work in health. As health-care practitioners and researchers focused on biological, physiological, disease and therapeutic processes, sociocultural, political, and economic conditions are often peripheral or ignored in day-to-day clinical work. However, it is within these latter processes that both health-care practices and patient lives are entrenched. Qualitative researchers are particularly adept at identifying the structural conditions such as the social, cultural, political, local, and economic conditions which contribute to health care and experiences of disease and illness.

For example, the decision to delay treatment by a patient may be understood as an irrational choice impacting his/her chances of survival, but the same may be a result of the patient treating their child's education as a financial priority over his/her own health. While this appears as an "emotional" choice, qualitative researchers try to understand the social and cultural factors that structure, inform, and justify such choices. Rather than assuming that it is an irrational choice, qualitative researchers try to understand the norms and logical grounds on which the patient is making this decision. By foregrounding such logics, stories, fears, and desires, qualitative research expands our analytic precision in learning about complex social worlds, recognizing reasons for medical successes and failures, and interrogating our assumptions about human behavior. These in turn can prove useful in arriving at conclusive, actionable findings which can inform institutional and public health policies and have a very important role to play in any change and transformation we may wish to bring to the societies in which we work.

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Conflicts of interest

There are no conflicts of interest.

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