Module 4b: Qualitative data collection, analysis and presentation







Six steps in the IR process



Presentation outline and Key concepts

Expected outcomes Key concepts

- 1. Qualitative data collection
- 2. Analysis of qualitative data
- 3. Presentation of qualitative data

Application of key concepts

Expected outcomes

Able to describe:

Appropriate sampling strategies, qualitative data collection techniques and tools

Data analysis processes in a qualitative study Various options for data presentation

Key concept 1: Data collection-Sampling

Sampling strategies

Purposive sampling – sample selected intentionally

Convenience sampling

Snowball sampling

Maximum variation

Outliers

Intensity sampling

Homogenous sampling

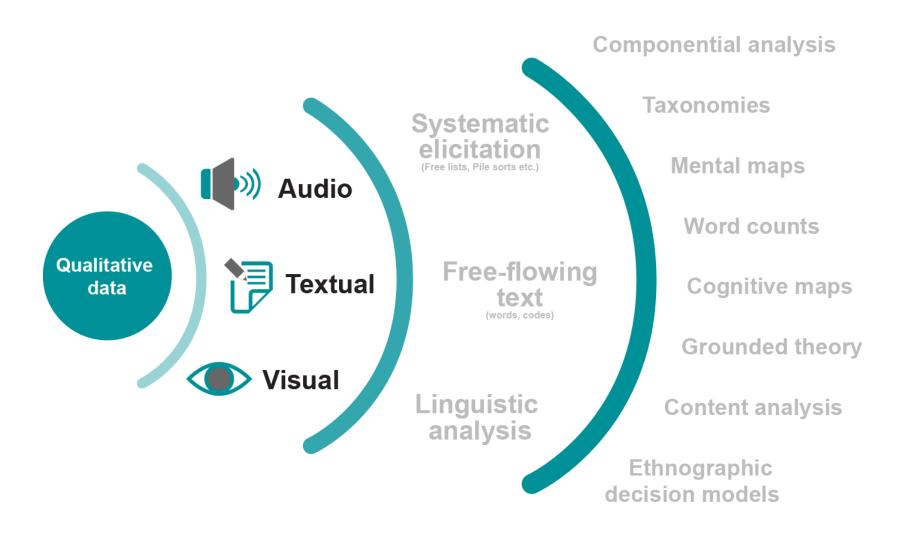
Key concept 1: Data collection

Method

Depends on:

research questions
study objectives
specific information you are interested in

Key concept 1: Data collection

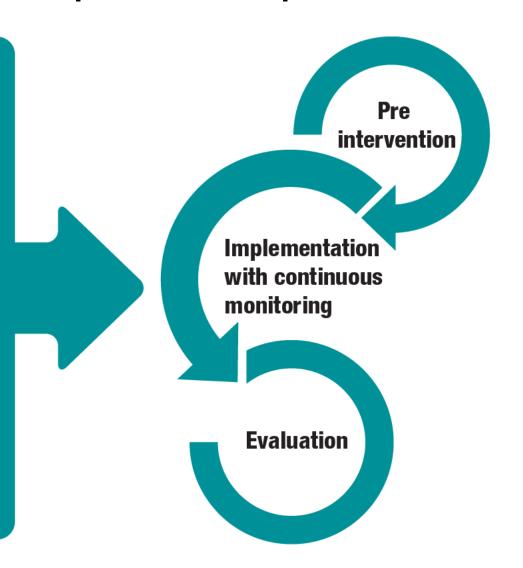


Key concept 1: Data collection

Qualitative techniques in the IR process

Interviews
Discussions
Observations

Vignette
Diagrams
Photo voice
Transect walk
Problem trees
Community map
Seasonal calendar
Ranking and scoring
Systematic data



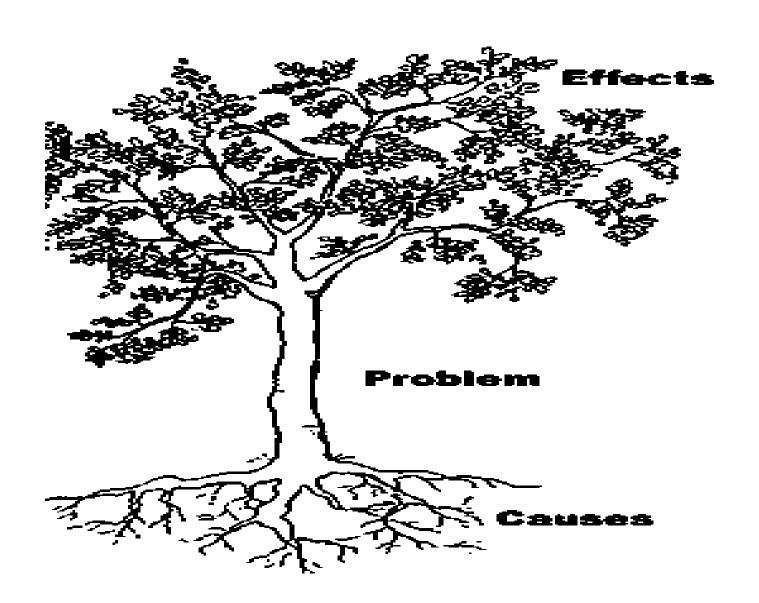
Key concept 1: Data collection IN-DEPTH INTERVIEW



Key concept 1: Data collection TRANSECT WALK

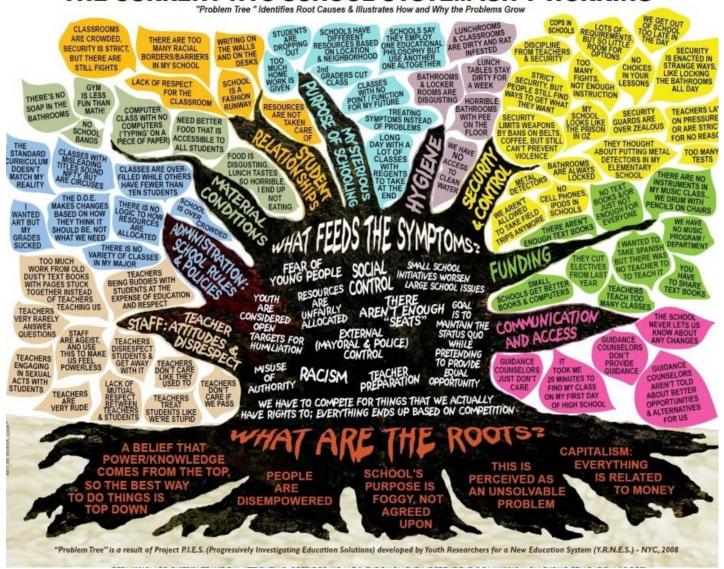


Key concept 1: Data collection PROBLEM TREE



Key concept 1: Data collection: PROBLEM TREE

THE CURRENT NYC SCHOOL SYSTEM ISN'T WORKING



Key concept 1: Data collection PROBLEM TREE / GROUP DISCUSSION



Key Concept 1: Data Collection VIGNETTE

Box 1. An example of a specific health state vignette

"A woman of about your age. Recently she was treated for breast cancer which involved surgery to remove her breast and underarm glands. She takes a daily tablet as continuing treatment. She now finds herself in physical health as good as before with the exception of occasional discomfort around her chest wall and stiffness in her shoulder as a result of the treatment. The nature of the surgery means that she must now take extra care with her appearance, especially with the clothes she can wear. Mentally, her state of health has also returned to its former level. She is not unduly anxious about her diagnosis of cancer."

Example presented by Ritu Sadana at the WHO informal consultation in January 2000 (17).

Key concept 1: data collection (FGD)

Before data collection

Have your data collection tool ready

Make appointments early

Ensure you adhere to selection criteria

Agree on an appropriate venue

e.g. easy to access, no distractions, neutral place

Key concept 1: Data collection FOCUS GROUP DISCUSSION



Key concept 1: Data collection Discussion guide

Topic guide for FGD with adult men and women about community attitudes and perceptions towards antimalarial combination treatments (ACT)

FGD IDNO:			
Audio IDNO:		AUD	
Date of interview:/_	/ (DD /MM/ YYYY	(Y)	
District:	Co	ommunity:	
Malaria Transmission Sea	ason (circle): High	ı / Low	
FGD type (circle): Adult m / Other		and / or pregnant women / Caret	akers
FGD No (circle): 1 2	3		
No of FGD participants: $lacksquare$			
Moderator:	No	ote-taker:	
Introduction:			
I am	from	(mode	erator
I am	from	(note-	taker
Introduce group using firs	t name		
Demographic details – usi	ng first name for discu	cussion	
General purpose of the stu problems in the communit		rticipants experiences with some he alth care they use	alth

Key concept 1: Data collection (FDG)

Ground rules

Only one person talks at a time

It is important for us to hear everyone's ideas and opinions

There are no right or wrong answers to questions

It is important for us to hear all sides of an issue – the positive and the negative

Turn cell phones off

Confidentiality is assured

Any questions?

Consent

Key concept 1: Data collection (FGD)

During data collection

Carefully record data, field notes, documents, tape recordings

Write out detailed notes immediately after data collection

Transcribe tapes systematically

Describe and document data collection process as rigorously as possible

Reflection activity

- 1. Detailed description of techniques and methods used to select respondents and generate data
- 2. Carefully specified analysis, with attention to issues of validity and reliability
- 3. Triangulation

Qualitative data analysis steps

Transcribing / Translating verbatim

Coding

Annotating (Comments)

Analysis of qualitative data

Manual data analysis

Software-assisted data analysis:

Atlas-ti

Nvivo

MaxQDA

Etc.

Analysis of textual material

The basic process for the analysis of text includes:

Identification of similar phrases, themes and relationships between themes

Identification of similarities and differences between population sub-groups

Initial attempts to generalize

Critical review and revision

Thematic analysis

There are four stages in theme analysis:

Identify main issues raised by the interviewees – the themes

Group more detailed topics within each of these themes to construct a taxonomy of sub-categories

Specify what was actually said, the components within each sub-category

Exploration of inter-relationships between the various themes

Thematic analysis

Theme identification

Index texts, identifying topics line-by-line

Collate these topics across all interviews to identify a preliminary list

Some will recur more frequently than others and some of the latter can be classified as sub-topics

Systematically combine related topics to develop a list of just a few fairly broad themes

Key concept 2 : Data analysis potential themes from a study exploring experiences at antenatal care

Themes

Sub-categories

Motivators

WHY ATTEND ANTENATAL CARE?

Health check [Fear of risks, positive reassurance]

Health promotion

Material gain [food, milk]

Insurance [sterilization, good birth]

Medical process

WHAT HAPPENS AT ANTENATAL CARE?

Take information Vaccinate

Give information Refer

Physical Examination Send for tests

Sterilization

Positive Negative

[EVALUATIONS]

DIMENSIONS OF USERS EVALUATIONS

Organization

Interpersonal behaviour

Technical practice

Information

Coding schemes

Following an initial analysis, many analysts apply a systematic coding procedure

Codes are assigned to specific occurrences of words or phrases within a document

Developing a code book

Codebook Version: 7 December 2010					
Name	Description				
01. Illness Narrative Interview (INI)	THIS CODE USED FOR INI ONLY to capture information specific to the most recent malaria or fever. Code information about quality of care, drug supply, etc. into the appropriate tree nodes for Drug shop (DS), Health Facilities (HF), Prayer Groups (PG), Self-Treatment (ST), or Traditional Healers (TH)				
INI 1st symptom	THIS CODE IS USED FOR INI ONLY to document symptoms of first symptoms of the most recent episode of malaria or fever				
INI 1st tx source-DS	THIS CODE IS USED FOR INI ONLY to capture the respondent's 1st choice of treatment for their recent fever episode when it was a drug shop like a pharmacy, chemical seller and drug peddlers.				
INI 1st tx source-HF	THIS CODE IS USED FOR INI ONLY to capture the respondent's 1st choice of treatment for their recent fever episode when the person sought for care at a HF such as a mission, private, public health facilities				

Key concept 2: Summary extract from manual analysis

	Focus group discussion				
	Village A Women	Village A men	Village B women	Village B men	
MALSIGN	Hot body	Bloody stool	Hot body	Hot body	
	Yellow eyes	Hot body	White lips	Yellow eyes	
	White lips	Yellow eyes	Yellow eyes	White lips	
			Bloody stool		
MALCAUSE	Mosquitoes	Mosquitoes	Mosquitoes	Fresh mangoes	
	Fresh mangoes	Standing in the heat	Standing in the heat	Mosquitoes	
		Fresh mangoes			

Extract from software (Nvivo)

Affordability

Speciments/Female FGDs/FGD With Female Group 215- § 4 references coded [2.72% Coverage]

Reference 1 - 1.20% Coverage

R14-You know, you are usually asked to swallow the two together, so if people are complaining, it is about the two medicines. Some time ago, the artesunate alone was given to people but now they have added amodiaquine to it for people to swallow. So the complain is about the two.

Reference 2 - 0.47% Coverage M-How much is the medicine?

R14-We have registered with National Health Insurance Scheme so I will not know.

Summary

Objectives

Transcribe

Use information from all the techniques

Incorporate all notes and observations

Code

Sub-themes

Matrix

Summary

Triangulation

Various topics/themes based on objectives of study Add quotes, proverbs, local sayings

Key concept 3: Presentation of data

Prose/text

Community recognition of drug side-effects

Generally, there was poor recognition of drug side-effects/adverse reactions. They were often associated with:

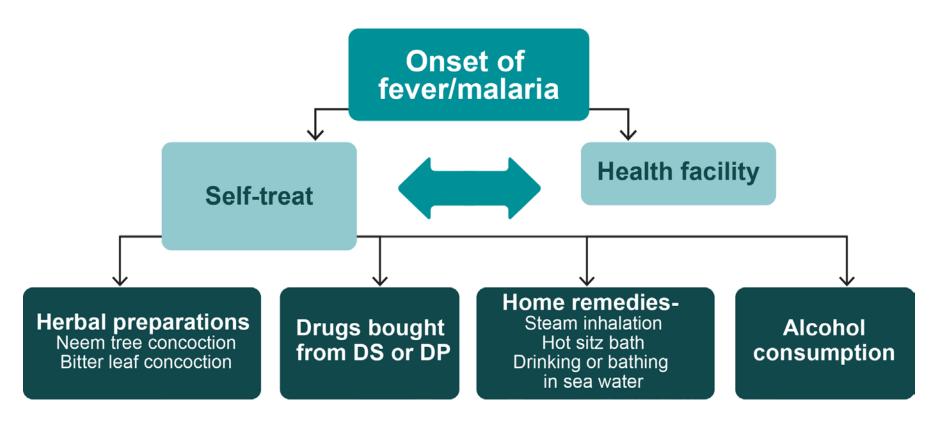
Drug not good person's blood

"When you immediately see that, it means that it is just not good for your blood, you must not take that drug anymore, and you must change it." (A 25 year old JHS graduate)

Drug not good for person's biological make up

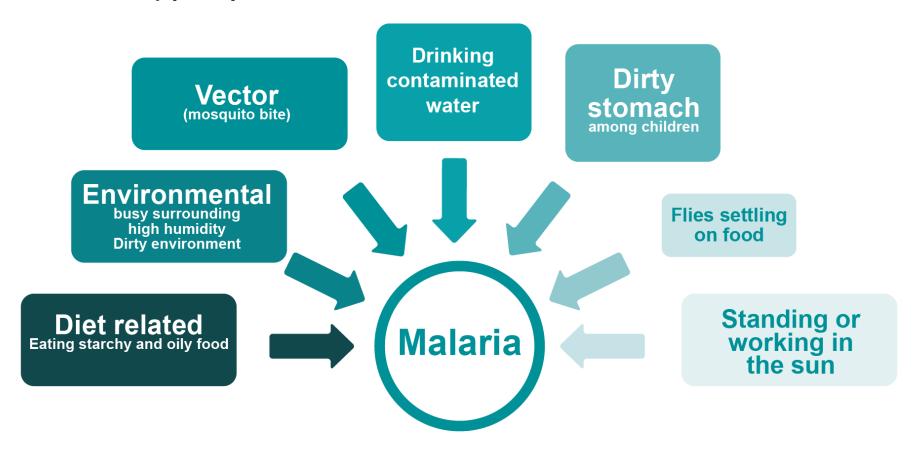
Solution Key concept 3: Presentation of data - graphic presentation

Treatment seeking for simple malaria



Key concept 3: Presentation of data

Community perception- Causes of malaria



Reflection activity

In your research team, discuss:

How you plan to analyse your qualitative data?

How will you ensure validity and reliability of your data?

What kind of analysis will you undertake?

Will you be using any software for your data analysis?

Discuss the reasons for your decision to use (or not use) software for your analysis.

How will you present your data?

Application of Key concepts

Example: Innovative Participatory Health Education [IPHE] in South Sudan

An educational inivative and solution for Improving the life of girls and women worldwide by the reproductive and child health research unit [RCRU]

http://www.rcru.org/j/index.php/rcruprojects/img-iphe