QUALITATIVE DATA COLLECTION INTERVIEWS

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OUTLINE

- Overview and purpose of interviews
- Types of interviews
- Interview design
- Interview conduct
- Data analysis
- Special considerations



OVERVIEW OF INTERVIEWS

- Scientific research process
- Personal encounter: open, direct, verbal questions used to elicit detailed narratives and stories
- Purpose of:
 - Testing a priori hypotheses
 - Exploring meaning and perceptions
 - To gain better understanding of participant life experiences
 - To generate hypotheses
- Interviewee is a participant in "meaning making"



OVERVIEW OF INTERVIEWS

- Not a clinical interview!
- Qualitative interview
 - Aim is to discover the interviewee's <u>own</u> framework of meanings
 - Research task is to <u>avoid</u> imposing the researcher's structures and assumptions
 - Concepts and variables that emerge may be different from those predicted at outset by researcher

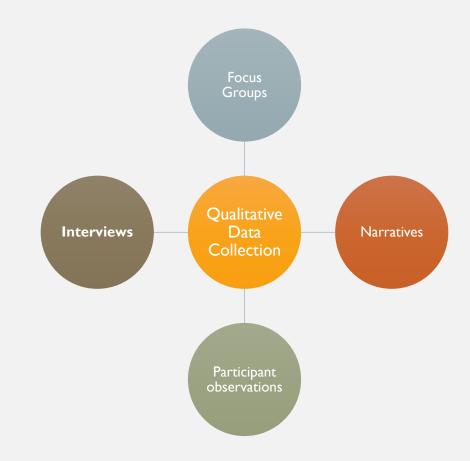


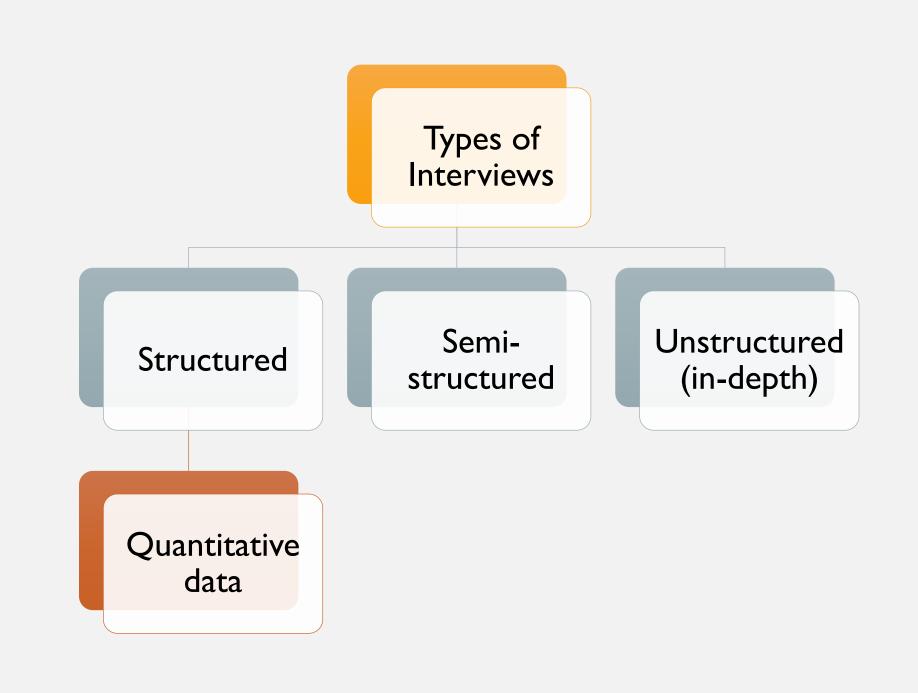
OVERVIEW OF INTERVIEWS

ADVANTAGES	DISADVANTAGES
Opportunity for feedback	 Cost Geographic proximity Length and complexity Number of non-respondents, callbacks
Opportunity for clarifications	Lack of anonymity
Probing of complex answers	Personal interviewer style
Personal connection, rapport	Cultural considerations

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STRUCTURED INTERVIEWS

- Best used when
 - Relevant literature is highly developed with established understanding of topic
 - Following observational/less structured interviewing approaches
- Structured questionnaires with relevant and meaningful response categories
- Interviewers trained to ask questions (with fixed choices) in standardized manner
 - Example: "Is your health excellent, good, fair, or poor?"
- Benefits:
 - Efficient with no rapport establishment required
 - Consistent data that can be compared across number of respondents



UNSTRUCTURED INTERVIEWS

- "Relatively unstructured" -- guided conversations
- No specific predetermined questions
- May be conducted in conjunction with collection of observational data
 - Participant observation from sidelines and/or joining in on the activities being studied
 - "Key informants" identified
 - Meaning of observed behaviors, interactions, artefacts and rituals
- Example: "This research study is about how people think about their own health. Can you tell me about your own experiences?
- Questions emerge over time as investigator learns about the setting

SEMI-STRUCTURED INTERVIEWS

- Often the sole data source for a qualitative research project
- · Generally organized around set of predetermined, open-ended questions
- Other questions emerge from dialogue between interviewer and interviewee
- Example: "What do you think good health is?", "how do you consider your own health"

Individual

- Wide range of research questions
- Social/personal info

Group

- Wide range of experiences
- Less personal info
- Group dynamics and interactions

SEMI-STRUCTURED INTERVIEWS

Sample interview guide:

Topic 1: Personal story

Tell us something about yourself (your work, family, hobbies)

What were your symptoms at diagnosis? What were you feeling?

Where did you learn to take care of your diabetes? What kinds of things did you learn?

What are some of your motivations for wanting to control your diabetes?

Topic II: Best practices in diabetes self-management

Walk me through a typical day. What time do you wake up? Eat your meals? Check your blood sugar?

Please tell me what you ate yesterday for each of your meals and snacks.

Did you always take care of your diabetes? Tell me about that.

Topic III: Barriers and factors for success in diabetes self-management

What is your biggest struggle that you have in managing your diabetes?

What keeps you on track? What happens when you get off-track?

	STRUCTURED	SEMI-STRUCTURED	UNSTRUCTURED
Questions asked	Same for all participants	Guided by participants' responses but with interview guide	Guided by participants' responses but with no interview guide
Pre-determined questions	Yes (often with limited set of responses)	Some	No (but pre-determined goal & focus for interview in place)
Open-ended questions	No	Yes	Yes
Question wording	Standardized	Flexible	Flexible
Typical Use	Well-developed understanding of topic with clear focus	One chance to interview participantsData collection "out in field"	-Researcher's understanding still evolving -Ideally, multiple chances to interview participants possible
Data recording	-Paper-based (mail or face-to-face) & self-report-Web-based & self-report-Telephone interviews	-Best to record interviews & analyze afterwards -Consider note-taker if recording not an option	-Best to record interviews & analyze afterwards-Consider note-taker if recording not an option
Benefits	-Efficient -No rapport required -Responses can be compared across respondents	-Participants allowed freedom to express their views -Provide reliable, comparable qualitative data	-Useful if understanding of area not yet established -Important preliminary step towards more structured interviews/surveys

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INTERVIEWEE SELECTION

- Sampling strategies determined by the purpose of the research question
 - Statistical representativeness not usually sought
 - Relatively homogeneous group will have shared experiences about the topic
 - Sample of interviewees should share critical similarities related to the research question.
- Purposeful (not random!) sampling
 - Iterative process that seeks to maximize the depth and richness of data to address research question
 - Identification of information-rich cases related to phenomenon of interest
- Sample sizes determined by
 - Depth and duration of interview
 - What is feasible for a single interviewer



QUESTION DESIGN

- First question is a focused research question
- 5-10 more specific questions developed to investigate different aspects of research issue
 - Iterative process!
 - Ineffective questions may be removed and new questions added
 - Interviewer may digress from planned itinerary
 - May be very productive to follow interviewee's interest and knowledge.
- Order of questions and probing questions may vary
- Wording of questions difficult to standardize
 - Interviewer uses person's own vocabulary when framing supplementary questions



TYPES OF QUESTIONS

Background or demographic

Behaviors or experiences

Opinions or beliefs

("Think")

Feelings

Knowledge (Facts)

Sensory experiences

TYPES OF QUESTIONS

OPEN-ENDED	CLOSED-ENDED
In-Depth interviews	Standardized interviews
Example:"What is it like to have X""Describe an average/good/bad day living with X"	Example:"Do you have X""How would you rate your pain on a scale of 0-100?"
Allow for responding in one's own words	All persons answer the same questions allowing for comparisons
Do not suggest answers	Less variable answers
No a priori framework	Allows for quantification
Necessary to develop closed questions for probe	
May help understand deviant answers to closed questions – "tell me more about that"	

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PRIOR CONSIDERATIONS

Who

- Age group
- Gender
- Special needs



What

- Unstructured
- Semistructured
- Structured



How

- Face to face
- Telephone
- Video
- Group

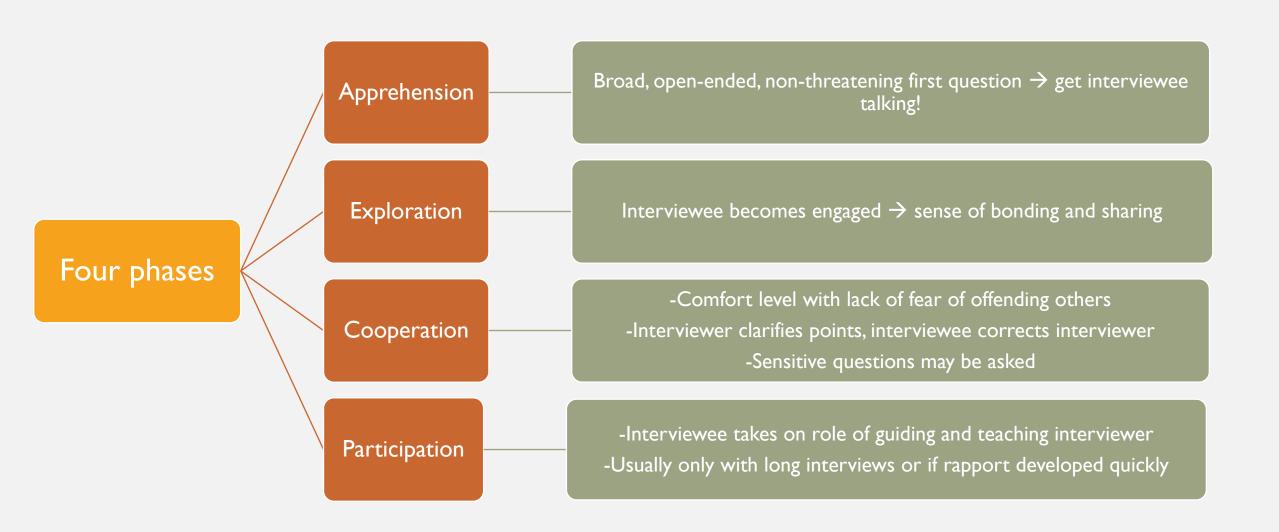
Where

- Convenient
- Controlled
- Relaxed





ESTABLISHING RAPPORT



SEQUENCE OF QUESTIONS

First

- Involve participants
- Facts
- Present status
- Easy/ close ended questions
- Relevant issues

Later

- Probing questions
- Opinions
- Past/future
- Open ended
- Less relevant issues

- Natural timeline: Intersperse fact-based questions
- Concluding questions about additional information/ interview impressions

PLEASE DO

- Familiarize yourself with interview schedule (stage fright)
- Start on time
- Introduce yourself/research focus/ interview format
- Pay full attention
- Watch own body language
- Have backup plan
- Provide transition between topics
- Thank participant and follow up



PLEASE DON'T

- Overload participant/ interrupt
- Offer own opinions/stories
- Mislead participant expectations
- Stray from script/improvise/ interpret
- Lose control of the interview
- Forget coffee!



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QUALITATIVE DATA ANALYSIS PROCESS

Identifying, coding, categorizing themes

Thematic analysis

Discourse analysis

Codes qualitative information
Process of identifying themes
Identify why specific
categories chosen

Eg. What is the meaning of the lived experience of this phenomenon?

No preconceived framework or hypotheses
Data provides abstract concepts
Researcher builds 'theory'
Theoretical saturation

Eg. How does the basic social process of X occur in the context of Y?

Data coding software (Atlas.Ti and NVivo)

Language beyond sentences
What and how people
communicate
Visual communication

Eg. How do discourses shape identities/ activities?

feelings When you move into your own home, you're alone. There is no bustle of people around the house. I miss having someone to chat to when I get home. I put the TV or some LIVING music so there's some background noise, the silence makes alone me feel so alone. Sometimes I will be sat watching trash TV and thinking I should be out doing something rather than watching this rubbish, I read a lot but sometimes I am too tired and just want to veg out. But it's been good to move New relationship out of mum and dads as it's not healthy to rely on them as with parents they won't last forever. I become independent and made my own decisions. It's good they still there when I need them. - Independence It's good to have some distance as when I was at home I was arguing a lot with my dad and that was made me Old relationship decide it was time to go.

I) Read

2) Label

Word

Why?

How?

Use

Lots c

pinions



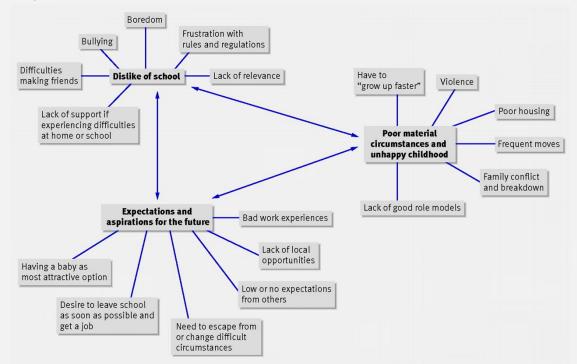
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20000 Smoking Experience ("What is it like to be a smoker?")
                20100 Occasions and Events of Smoking
                  20101 Amount/quantity smoked (including length of time smoked)
                  20102 Patterns of smoking experience (social/situation: how/when)
                  20103 Type of cigarette (e.g., brand, strength, description)
                   20104 Cigarette smoking as a symbol or metaphor ("Mr. Cigarette," "friend," per-
                          sonification)
                   20105 Perceptions of others' smoking
                 20200 Rationalizations for Smoking (Justification for or making sense of smoking)
                 20300 Perceptions of Bodily States
                20400 Perceptions of Affective Experiences of Smoking
                   20401 Perception of risk
                   20402 Valued/disvalued experiences of smoking
                 20500 Explanatory Models of Smoking Experience (or implied EM's)
              30000 Quitting
                 30100 Rationalization (Contemplation of Quitting)
3) Dec
                   30101 Why do I want to quit/not smoke?
                   30102 What will the change mean?
                   30103 What is the change meaning? (What has the change meant?)
                   30104 Why should I be able/unable to quit now/this time?
                   30105 Why am I able/unable to quit now/this time? (Why was I . . .)
                   30106 Experiences of quitting
                   30107 Time
                   30108 Perception of other's quitting
                 30200 Personal Strategies for Quitting
                   30201 How might I do this?
                   30202 How am I doing this? (How did I?)
                   30203 Reflections/evaluations of what this will involve
                   30204 Reflections/evaluations of what this is involving
                   30205 "Other Programs" ("Smokenders," acupuncture, etc.)
   Desc
                   30206 EM's of Smoking Cessation (Explanation/logic of quitting)
                 30300 Social Environment (Support or lack of support from . . .)
                   30301 Family
                   30302 Work
                 30400 Doctor (Clinical, professional mediation, and participant's perception of media-
                        tion)
                   30401 Doctor's view of health, disease, and illness
                   30402 Doctor's view of smoking and risk
                   30403 Doctor's actual intervention
                   30404 Participant's perception of doctor
                   30405 Participant's questions for the doctor
                   30406 Participant's perceptions of the doctor's intervention/effectiveness
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esults



STEPS FOR DATA ANALYSIS

- 5) Decide if hierarchy/connections exist
 - Draw figures



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SPECIAL CONSIDERATIONS

- Age group
 - <u>Children</u>: simple, precise questions; use of age-appropriate language; use play or drawings to facilitate expression or breakup interview with fun activities
 - Adolescents: acknowledge autonomy; may want to shock interviewer with responses
 - Elderly: avoid stereotypes; may have difficulty recalling certain events, may tire easily, etc.
- Gender
- Special needs
- Cultural background
- Language



ETHICAL CONSIDERATIONS

- Reducing the risk of unanticipated harm
 - Interviewers provide psychological support if interviews create undue stress or raise psychological complications
- Protecting the interviewee's information anonymity
- Effectively informing interviewees about the nature of the study intent
- Reducing the risk of exploitation not for personal gain



ADDITIONAL RESOURCES

- http://www.public.asu.edu/~kroel/www500/Interview%20Fri.pdf
- http://www.jhsph.edu/research/centers-and-institutes/center-for-refugee-and-disaster-response/publications_tools/publications/_pdf/pr_section_3.PDF
- http://compositionawebb.pbworks.com/f/conducting+in+depth+interviews.pdf
- http://www.qsrinternational.com/product
- http://atlasti.com/

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