Understanding the value of qualitative research in nursing

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Qualitative research methods have become increasingly popular in healthcare in recent years. However, there are issues about the quality of the data produced and how this can be improved. This article places qualitative research in a historical context and explores issues of methodological rigour and validity. This is a summary: the full article and reference list can be accessed at nursingtimes.net.

HISTORICAL PERSPECTIVE

Qualitative research has its roots in philosophy and human sciences. Max Weber, regarded as one of the founders of sociology, played a key role in developing ethnographic research methods (the study of human behaviour within a culture) and was an advocate for the qualitative approach. The majority of early qualitative research was dominated by ethnographic and participant observation studies. These were often longitudinal and were largely considered unsystematic and unscientific (Holloway and Wheeler, 2002).

Polit et al (2001) described the strong research tradition that emerged from the grounded theory developed by sociologists, the purpose of which is ‘to generate comprehensive explanations of phenomena that are grounded in reality’.

From the mid-1960s qualitative research has been characterised by diverse approaches and continuing debate. Particular attention has been paid to the role of the researcher and the rigour of data collection. Following this there has been a growth in qualitative research, and numerous textbooks detailing different qualitative methodologies are now available.

BACKGROUND

- Researchers have fiercely debated the relative merits of quantitative versus qualitative methods of research (Holloway and Wheeler, 2002).
- Some authors recommend mixing the two research approaches in certain situations (Gillies, 2002) to generate quantifiable data while probing deeper with a qualitative approach to make sense of the possible reasons behind the data. For example, a quantitative study could be carried out to quantify the number of times a nurse prescriber writes a prescription and a qualitative element could be included in order to try and identify the reasons for those decisions.
- Some problems with research are concerned with the use of language, terminology and definitions. Terms used to describe qualitative research include interpretive, naturalistic, emancipatory, case study approaches (Holloway and Wheeler, 2002) and ethnography (Hammersley and Atkinson, 1995). These definitions can be confusing and may mean healthcare professionals fail to engage in the research.
- There is general agreement that it is the themes and characteristics that emerge from qualitative research that are important, and it is these, rather than any complex terminology, that define the research (Holloway and Wheeler, 2002; Polit et al, 2001).

QUALITATIVE RESEARCH IN NURSING

Comparisons have been made between the philosophies underpinning nursing and qualitative research. Nursing comprises elements such as commitment and patience, understanding and trust, flexibility and openness (Holloway and Wheeler, 2002). Qualitative researchers argue these could be applied to their research approach.

Qualitative research is able to capture and communicate the client perspective of healthcare. As a result, the growing body of research in this area is used to influence health policy at a local and national level.

Qualitative approaches are necessary in primary healthcare when researchers want to ask questions about behaviour and to focus on participants’ experiences (Bowling, 2002; Greenhalgh and Taylor, 1997). For example, quantitative research can measure patient concordance. However, measuring concordance does not in itself improve it. Qualitative research explores causes and may generate ideas to help solve problems.

The emergence of qualitative research in primary healthcare has been gradual, with authors working to educate the medical profession in particular, about the values of such research methods (Mays and Pope, 2000). As a result, qualitative research has come under intense scrutiny and has been harshly criticised. In a letter to the British Medical Journal, Isbister (2000) suggested that ‘quality in qualitative research is a mystery to many health service researchers’.

In order to convince medical and nursing researchers and funding organisations of the value of this research, criticisms have had to be addressed.

RIGOUR IN QUALITATIVE RESEARCH

Barbour (2001) argued that ‘the question is no longer whether qualitative methods are valuable but how rigour can be assured or enhanced’.

Some criticisms of qualitative research, and in particular of grounded theory, are concerned with the ‘iterative’ approach that involves adapting research methods as the
Much has been done to improve the rigour of qualitative methodology but there is still a considerable amount of disagreement about how this can be achieved. This can add to the confusion many people experience when they try to understand the process of qualitative research. A lack of understanding of qualitative research may lead to poor quality studies in nursing and medical literature. Carrying out this very valuable research in a manner that is taken seriously by the scientific community may help to improve patient care. A wealth of knowledge can be gained from the rich data provided by qualitative research and it is vital for nurses to persevere in understanding the approach.

Triangulation

Triangulation is one way of promoting rigour in qualitative research. The term refers to the use of more than one method of data collection and can involve triangulation of data, investigators and theories.

Some authors feel that researchers should stay within one paradigm and that qualitative and quantitative methodologies come from different philosophical backgrounds and should remain separate. Indeed the argument is not only confined to mixing research methods across paradigms but also to different data collection methods in the same paradigm. However, most nurses and doctors tend to take a pragmatic view and carry out research across paradigms.

Multiple coding

Multiple coding is another way in which researchers try to improve rigour in qualitative research. This involves independent researchers cross-checking coding, and aims to reduce subjectivity in data analysis. Software packages are now available to help process the analysis once coding has taken place.

Respondent validation is popular with qualitative researchers. This involves cross-checking findings with respondents, and can help to refine explanations. However, researchers claim this leads to discrepancies as researchers provide overviews of what respondents have said, whereas individual respondents have individual concerns.

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