they viewed as being less “humanising”. They felt the current service was important, because it treated them “like a human”. Patients believed there was a human side to the service for a number of reasons: all said they had a close relationship with the CCNPs, and saw them as accessible and flexible. The nurses were regarded as being never too busy to meet patients’ needs, and patients also felt the nurses communicated well with them. Theme 3 Interaction between “practical” and “human” aspects of services One of the most striking themes was the interaction between the “human” and “practical” aspects of the service. Participants believed they were treated as humans and that the CCNPs were knowledgeable, providing practical support. They saw this combination as a vital safety net for them.

Not only did participants have someone to confide in, but they also had someone who they could trust to give them appropriate practical support where necessary. The CCNPs treated their patients with dignity and respect, and were knowledgeable about service issues. This meant patients often felt the CCNPs were aligned with them, and would fight for their needs. Theme 4 Emotional impact on the patient Participants believed the service had a positive impact on them, both on an emotional and practical level. The interaction between the practical and human sides of the service reduced pressure on patients. There was also a sense that the service empowered patients and gave them a sense of control.

Analysis
When we looked at the results, the theme descriptions varied widely, but this was to be expected given the researchers’ varied backgrounds and the subjective nature of the research methodology. However, the majority of themes revealed by the traditional research method were comparable with those derived from mind mapping.

If the research from the individual methodologies were taken to their conclusion, the service improvements and recommendations would be very similar. For example, if we take method 2 – the most simplistic of the analyses – the theme of “support” can be seen in the “psychological support” and “education and advice” themes of method 1, as well as in the themes of positive “practical aspects of the service”, “human side of the service” and “emotional impact on the client” from method 2. Although these comparisons are again subjective, we can be confident that all themes have been captured by all three researchers (see Table 1).

All these themes can be linked with others from different methodologies apart from the theme of “confusion over role definition” from method 1.

One of the benefits of mind mapping is its speed. The estimated time spent on methods 1 and 2 in familiarising ourselves with the data and the subsequent mapping process was 3–4 hours. However, the traditional IPA method took up to an estimated 16.5 hours, which included 10 hours transcribing, 3–4 on familiarisation and 1.5 on clustering and organising themes.

Discussion
Assuming the methodology is of good quality, a huge benefit of mind mapping is the reduction in time spent on the transcribing and analysis aspects of qualitative research. With the simple research aim: “Patient and carer perspectives of a new CCNP service within the community setting” we covered a variety of themes by using mind mapping compared with traditional analysis. We have therefore shown mind mapping has potential, at least in simple qualitative research.

The benefit of mind mapping may well be in the analysis of bigger pieces of work where hours of audio recordings are produced. Conversely, the main advantage may be that it offers a “quality check” for traditional researchers, to ensure all themes have been considered – although, ironically this creates a longer analysis period. We therefore need more research into these areas.

The novice researcher found one theme that others did not – “confusion over role definition”. This may be due to the subjective nature of the research. However, only one participant mentioned this, so it may be that the researcher drew on personal experiences, resulting in this disparity in the results. This contradicts the theory that mind mapping can “clear the mind of previous assumptions” (Buzan, 2003).

Table 1. Researchers’ findings – main themes

<table>
<thead>
<tr>
<th>Method 1</th>
<th>Method 2</th>
<th>Method 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Psychological support</td>
<td>Support</td>
<td>Positive “practical” aspects of the service</td>
</tr>
<tr>
<td>Education/advice</td>
<td>Human side of the service</td>
<td>Human side of the service</td>
</tr>
<tr>
<td>Access/advocacy</td>
<td>Liaison</td>
<td>Positive practical aspects of the service</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Human side of the service</td>
</tr>
<tr>
<td>Clinical skills</td>
<td>Contact</td>
<td>Interaction between practical and human</td>
</tr>
<tr>
<td>Patient dependency</td>
<td></td>
<td>aspects of the service</td>
</tr>
<tr>
<td>Confusion over role definition</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

With the exception of “confusion over role definition”, all themes were captured by all three methods.

Qualitative research is a subjective process so it is crucial that the process followed by researchers can be described for others to follow and learn from (Cormac, 2000; Parahoo, 1997). However, mind mapping may reduce the availability of the “audit trail” in qualitative research, not only because of the subjective nature of the data, but also of the methodology.

Conclusion
The themes emerging from this study initially appeared to be rather disparate. However, given that the ultimate goal for any research is to improve services, all methodologies seemed to bring out useful information in terms of understanding this patient group’s perspective, but in a shorter time when mind mapping was used.

The implications for future research on the use of mind mapping are about identifying how it can best serve qualitative researchers by answering such questions as:

» Is there a type of study best suited to the use of mind mapping?
» Is mind mapping ideal as an adjunct to traditional analysis, ensuring all themes are identified?
» Is it methodologically sound for researchers who have conducted study interviews to use mind mapping and/or those with a purely analytical role?

References