



Qualitative Research in Nursing and Healthcare

FOURTH EDITION

Immy Holloway and Kathleen Galvin



WILEY Blackwell

**Qualitative
Research in
Nursing and
Healthcare**

Dedication

Kate dedicates this book to her daughters Olivia and Sorcha

Immy dedicates this book to her grandchildren Hazel, Dochas and Chian and her first great-grandchild Lilly

Qualitative Research in Nursing and Healthcare

Immy Holloway and Kathleen Galvin

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This edition first published 2017 © 2017 John Wiley & Sons, Ltd.

First and second editions © 1996, 2002 by Blackwell Publishing Ltd.

Third edition © 2010 by Immy Holloway and Stephanie Wheeler

Registered office: John Wiley & Sons, Ltd, The Atrium, Southern Gate, Chichester, West Sussex,
PO19 8SQ, UK

Editorial offices: 9600 Garsington Road, Oxford, OX4 2DQ, UK
1606 Golden Aspen Drive, Suites 103 and 104, Ames, Iowa 50010, USA

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Library of Congress Cataloging-in-Publication Data

Names: Holloway, Immy, author. | Galvin, Kathleen, author.

Title: Qualitative research in nursing and healthcare / Immy Holloway and Kathleen Galvin.

Description: 4th edition. | Chichester, West Sussex, UK ; Ames, Iowa : John Wiley & Sons Inc., 2017. | Includes bibliographical references and index.

Identifiers: LCCN 2016026161 | ISBN 9781118874493 (cloth) | ISBN 9781118874479 (adobe PDF) | ISBN 9781118874486 (epub)

Subjects: | MESH: Nursing Research--methods | Qualitative Research | Health Services Research--methods

Classification: LCC RT81.5 | NLM WY 20.5 | DDC 610.73072--dc23 LC record available at <https://lcn.loc.gov/2016026161>

A catalogue record for this book is available from the British Library.

Wiley also publishes its books in a variety of electronic formats. Some content that appears in print may not be available in electronic books.

Set in 9.5/13pt MeridienLTStd-Roman by Thomson Digital, Noida, India

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Preface

The readership of this book will be those who intend to carry out qualitative research in clinical, academic or educational settings, specifically in the healthcare arena. It aims to introduce third-year undergraduates to qualitative research and to assist postgraduate students in their study of qualitative approaches before they move on to more sophisticated and specialised texts.

This fourth edition of the book is an update of earlier versions of the text by Holloway and Wheeler. Approaches in qualitative research are constantly evolving, and this is shown in the new edition. The fundamental principles of qualitative research, of course, stay the same, reflecting the firm epistemological ground on which this research approach stands; hence, there are not many drastic changes; the formula of writing and extending individual approaches with integrating updated examples from healthcare research has been retained.

We would like to thank Stephanie Wheeler for her input in earlier editions.

Immy Holloway and Kathleen Galvin

About the Authors

Immy Holloway is Professor Emerita at Bournemouth University in the Faculty of Health and Social Sciences. She has extensively taught, supervised, researched and examined qualitative research. As the co-founder of the Centre for Qualitative Research at Bournemouth, she is still one of its members. Her activities include supervising and teaching postgraduate students in the area of nursing and healthcare. Her special interest lies in developing understanding and skills of students in using a variety of approaches to qualitative research. She has written several books in the field of qualitative inquiry and also published book chapters and articles in this area.

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Acknowledgements

Thanks are due to the people who supported us at Wiley as well as our many colleagues and research students who have helped us improve this text and often provided examples.

We are grateful to all of them.

Part One

**Introduction to
Qualitative Research:
Starting Out**

Chapter 1

The Main Features and Uses of Qualitative Research

What is qualitative research?

Qualitative research is a form of social inquiry that focuses on the way people make sense of their experiences and the world in which they live. A number of different approaches exist within the wider framework of this type of research, and many of these share the same aim – to understand, describe and interpret social phenomena as perceived by individuals, groups and cultures. Researchers use qualitative approaches to explore the behaviour, feelings and experiences of people and what lies at the core of their lives. For example, ethnographers focus on culture and customs; grounded theorists investigate social processes and interaction, while phenomenologists consider and illuminate a phenomenon and describe the ‘life world’ or *Lebenswelt*. Qualitative approaches are useful in the exploration of change or conflict. The basis of qualitative research lies in the interpretive approach to social reality and in the description of the lived experience of human beings.

The characteristics of qualitative research

Different types of qualitative research share common characteristics and use similar procedures though differences in data collection and analysis do exist.

The following elements are part of most qualitative approaches:

- The data have primacy (priority); the theoretical framework is not predetermined but derives directly from the data.
- Qualitative research is context-bound, and researchers must be context sensitive.
- Researchers immerse themselves in the natural setting of the people whose situations, behaviour and thoughts they wish to explore.
- Qualitative researchers focus on the ‘emic’ perspective, the ‘inside view’ of the people involved in the research and their perceptions, meanings and interpretations.

Qualitative Research in Nursing and Healthcare, Fourth Edition.

Immy Holloway and Kathleen Galvin.

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- Qualitative researchers use ‘thick description’: they describe, analyse and interpret but also go beyond the reports, descriptions and constructions of the participants.
- The relationship between the researcher and the researched is close and based on a position of immersion in the field and equality as human beings.
- Reflexivity in the research makes explicit the stance of the researcher, who is the main research tool.

The primacy of data

Researchers usually approach people with the aim of finding out about their concerns; they go to the participants to collect the rich and in-depth data that can then become the basis for theorising. The interaction between the researcher and the participants leads to an understanding of experience and the generation of concepts. The data themselves have primacy, generate new theoretical ideas, and they help modify already existing theories or uncover the essence of phenomena. It means that the research design cannot be predefined before the start of the research. In other types of research, assumptions and ideas lead to hypotheses which are tested (though this is not true for all quantitative research); sampling frames are imposed; in qualitative research, however, the data have priority. The theoretical framework of the research project is not predetermined but based on the incoming data. Although the researchers do have knowledge of some of the theories involved, the incoming data might confirm or contradict existing assumptions and theory.

This approach to social science is, initially at least, inductive. Researchers move from the specific to the general, from the data to theory or analytic description. They do not impose ideas or follow up assumptions but give accounts of reality as seen by the participants. Researchers must be open-minded, though they cannot help having some ‘hunches’ about what they may find, especially if they are familiar with the setting and some of the literature on the topic.

While some qualitative inquiry is concerned with the generation of theory such as grounded theory, many researchers do not achieve this; others, such as phenomenologists, focus on a particular phenomenon to delineate and illuminate it. All approaches usually provide descriptions or interpretation of participants’ experiences and the phenomenon to be studied but go to a more abstract and theoretical level in their written work, especially when they carry out post-graduate research. Qualitative inquiry is not static but developmental and dynamic in character; the focus is on process as well as outcomes.

Contextualisation

Researchers must be sensitive to the context of the research and immerse themselves in the setting and situation. Both personal and social contexts are important. Patients might have particular religious or cultural beliefs, for instance, or personal perspectives on blood or pain, and that would affect their behaviour.

The context of participants' lives or work affects their behaviour, and therefore researchers have to realise that the participants are grounded in their history and temporality. Researchers take into account the total context of people's lives – including their own – and the broader political and social framework of the culture in which it takes place. The conditions in which they gather the data, the locality, time and history are all involved. Events and actions are studied as they occur in everyday 'real-life settings'. Koro-Ljungberg (2008) states that participants not only have personal values and beliefs but are also connected with their environment, and this influences their interactions with the researcher. It is important to respect the context and culture in which the study takes place. If researchers understand the context, they can locate the actions and perceptions of individuals and grasp the meanings that they communicate. The interest in context and contextualisation goes beyond that which influences the research; it also affects its outcomes and applications in the clinical situation. Scott *et al.* (2008) add that organisational context, group membership and other factors are also important in the applications and use of the research in healthcare settings. An example of contextualisation would be the description of the effects of a specific hospital on the actions and language of health professionals.

Immersion in the setting

Qualitative researchers use the strategies of observing, questioning and listening, immersing themselves in the 'real' world of the participants. Observing, listening and asking questions will lead to rich data. Involvement in the setting also assists in focusing on the interactions between people and the way they construct or change rules and situations. Qualitative inquiry can trace progress and development over time, as perceived by the participants.

For the understanding of participants' experiences, it is necessary to become familiar with their world. When professionals do research, they are often part of the setting they investigate and know it intimately. This might mean that they could miss important issues or considerations. To be able to better examine the world of the participant, researchers must not take this world for granted but should question their own assumptions and act like strangers to the setting or as 'naïve' observers. They 'make the familiar strange' (Delamont and Atkinson, 1995). Immersion might mean attending meetings with or about informants, becoming familiar with other similar situations, reading documents or observing interaction in the setting. This can even start before the formal data collection phase.

Most qualitative inquiry investigates patterns of interaction, seeks knowledge about a group or a culture or explores the life world of individuals. In clinical, social care or educational settings, this may be interaction between professionals and clients or relatives, or interaction with colleagues. It also means listening to people and attempting to see the world from their point of view. The research can be a macro or micro study – for instance, it may take place in a hospital ward, a

classroom, a residential home, a reception area or indeed the community. Immersion in the culture of a hospital or hospital ward, for instance, does not just mean getting to know the physical environment but also the particular ideologies, values and ways of thinking of its members. Researchers need sensitivity to describe or interpret what they observe and hear. Human beings are influenced by their experiences; therefore, qualitative methods encompass processes and changes over time in the culture or subculture under study.

The 'emic' perspective

Qualitative approaches are linked to the subjective nature of social reality; they provide insights from the perspective of participants, enabling researchers to see events as their informants do; they explore 'the insiders' view'. Anthropologists and linguists call this the *emic perspective* (Harris, 1976). The term was initially coined by the linguist Pike in 1954. It means that researchers attempt to examine the experiences, feelings and perceptions of the people they study, rather than immediately imposing a framework of their own that might distort the ideas of the participants. They 'uncover' the meaning people give to their experiences and the way in which they interpret them, although meanings should not be reduced to purely subjective accounts of the participants as researchers search for patterns in process and interaction, or the invariant constituents of the phenomenon they study. The term has gained wider use in qualitative research.

Qualitative research is based on the premise that individuals are best placed to describe situations and feelings in their own words. Of course, these meanings may be unclear or ambiguous and they are not fixed; the social world is not frozen in a particular moment or situation but dynamic and changing. By observing people and listening to their accounts, researchers seek to understand the process by which participants make sense of their own behaviour and the rules that govern their actions. Taking into account their informants' intentions and motives, researchers gain access to their social reality. Of course, the report individuals give are *their* explanations of an event or action, but as the researcher wishes to find people's own definition of reality, these reports are valid data. Researchers cannot always rely on the participants' accounts but are able to take their words and actions as reflections of underlying meanings. The qualitative approach requires 'empathetic understanding', that is the investigators must try to examine the situations, events and actions from the participants' – the social actors' – point of view and not impose their own perspective. The meanings of participants are interpreted or a phenomenon identified and described. Researchers have access to the participants' world through experience and observation. This type of research is thought to empower participants, because they do not merely react to the questions of the researchers but have a voice and guide the study. For this reason, the people studied are generally called *participants* or *informants* rather than subjects. It is necessary that the relationship between researcher and informant is one of trust; this close relationship and the

researcher's in-depth knowledge of the informant's situation make deceit unlikely (though not impossible).

Of course, researchers theorise or infer from observed behaviour or participants' words. The researcher's view, the analytical and more abstract interpretation and description, is the *etic perspective* – the outsider's view (Harris, 1976). Researchers move back and forth between the emic perspective of the participants and their own etic view. These ideas correspond directly to those of Denzin (1989) who speaks of first- and second-order constructs. First-order constructs are those used in the common sense perspective on everyday life, while second-order constructs are more abstract and imposed by the researcher. For instance, individuals often mention the term 'learning the job' which could be called a first-order concept recognised by people in everyday life. A social scientist would call the same concept 'occupational socialisation', a second-order concept. The two terms show the difference between 'lay language' and 'academic language'. It must be kept in mind, however, that the emic view cannot be simply translated into an etic perspective but demands analysis and reflection from the researcher.

Thick description

Immersion in the setting will help researchers use *thick description* (Geertz, 1973; first used by the philosopher Gilbert Ryle). It involves detailed portrayals of the participants' experiences, going beyond a report of surface phenomena to their interpretations, uncovering feelings and the meanings of their actions. This also means that researchers create and produce another layer constructed from that of the participants. Thick description develops from the data and the context. The task involves describing the location and the people within it, giving visual pictures of setting, events and situations as well as verbatim narratives of individuals' accounts of their perceptions and ideas in context.

The description of the situation or discussion should be thorough; this means that writers describe everything in vivid detail. Indeed Denzin (1989: 83) defines thick description as 'deep, dense, detailed accounts of problematic experiences . . . It presents detail, context, emotion and the webs of social relationship that join persons to one another.' Thick description is not merely factual, but also includes theoretical and analytic description.

Thick description helps readers of a research study to develop an active role in the research because the researchers share their knowledge of the participants' perspective with the readers of the study. Through clear description of the culture, the context and the process of the research, the reader can follow the path of the researcher and share some understanding of the phenomenon or the culture under study. Thick description not only shows readers of the story what they themselves would experience were they in the same situation as the participants, but it also generates theoretical and abstract ideas which the researcher has developed.

Ponterotto (2006) develops the concept of 'thick description', traces its evolution and stresses the importance of context. He states that the discussion of a qualitative research report 'successfully merges the participants' lived experiences with the interpretations of these experiences . . .' (p. 547)

The research relationship

In order to gain access to the true thoughts and feelings of the participants, researchers adopt a non-judgemental stance towards the thoughts and words of the participants. The relationship should be built on mutual trust. This is particularly important in interviews and observations. The listener becomes the learner in this situation, while the informant is the teacher who is also encouraged to be reflective. Rapport does not automatically imply an intimate relationship or deep friendship (Spradley, 1979), but it does lead to negotiation and sharing of ideas, although each relationship is unique in the context of time and place. Rapport and trust make the research more interesting for the participants because they feel able to ask questions. Negotiation is not a once and for all event but a continuous process, indeed Boulton (2007: 2191) speaks of social science relationships as 'more enduring, negotiated and equal'. In qualitative inquiry the participants have more power because they can guide the researcher to issues that are of concern for them. Miller and Boulton (2007: 2200) state that the relationship between participants is one of continuously shifting boundaries between the professional and the personal.

The researcher should answer questions about the nature of the project as honestly and openly as possible without creating bias in the study.

Insider/outsider research

Closely connected to this topic is the issue of insider/outsider perspectives. The insider perspective is one when the researcher is part of the specific subculture that he or she is studying; a health visitor might study the role of other health visitors, a clinical psychologist the perception of others in the profession, a surgeon the experience of other surgeons. Their own experience becomes a resource and source of knowledge for these researchers. This position has both advantages and disadvantages. On the one hand, it can give greater insights as the group is already known to the researcher and some of its obvious rules and roles are familiar and need not be explained by the participants, who might disclose more to a colleague. On the other hand, the researchers might have preconceptions and close their minds to the meaning of others in their subculture and are not able to take the necessary distance from the research which might prevent the generation of new knowledge. Blythe *et al.* (2013) describe some of the issues in the insider perspective. They declare the main challenges as assumed understanding, ensuring analytic objectivity and the problem of managing the participants' expectations.

Even as an insider, the researcher might take the stance of a 'person from Mars' to fully explore the ideas of the participants and not take the way they make sense

of the situation as a given. In any case, many insider researchers differ from participants in some characteristics such as age, gender, ethnic group or belief. Tinker and Armstrong (2008: 55) ask how many similarities the researcher might share with the participant. They state that it would not be possible to share all characteristics. Thus, the researcher's position is always located on a continuum between outsider and insider.

Reflexivity

Reflexivity is critical reflection on what has been thought and done in a qualitative research project. It locates the researcher in the research project. Finlay (2002a: 531) names reflexivity as the process 'where researchers engage in explicit, self-aware analysis of their own role'. It is a conscious attempt by researchers to acknowledge their own involvement in the study – a form of self-monitoring in relation to the research that is being carried out. It also includes awareness of the interaction between the researcher, the participants and the research itself and it takes into account how the process of the research affects findings and eventual outcomes.

'Critical subjectivity', as Etherington (2004) calls it, means adopting a critical stance to oneself as researcher. Personal response and thoughts about the research and research participants are taken into account, and researchers are aware and take stock of their own social location and how this affects the study. Bott (2010) stresses the importance for researchers to 'constantly locating and relocating themselves in their work' (p.160). This is of major importance in health research where researchers often have been socialised into professional ways of thinking. Although they do not take centre stage in the research, they have a significant place in its process during collection and interpretation of data as well as in the relationship they have to participants and to the readers of their research. The researchers' own standpoint and values shape the research, and this needs to be made explicit in qualitative inquiry. Researchers should be aware of and present their own preconceptions and assumptions while attempting to understand the effect they have on the data and be conscious of both structural and subjective elements in their research. The researcher is part of the research but also the conditions and problems which are encountered and the context in which it occurs; all these become a focus for reflexivity. In other words, reflexivity is not only critical reflection on the researcher's place in the inquiry but also on the process of knowledge generation and the factors which have influenced it (Guillemin and Gillam, 2004). Thus, the concept of reflexivity is concerned with the awareness of socially located and constituted knowledge.

Finlay (2002b) discusses five types of reflexivity:

- 1 *Introspection*: This is an exploration of one's own experience and meaning to further insights and interpretations in the research.
- 2 *Intersubjective Reflection*: This type of reflexivity focuses on the relationship between the researcher and the participants. The researcher has to be aware of the way in which the relationship affects the research.

- 3 *Mutual Collaboration*: The participants are part of the research and their own reflection on it influences the context of the relationships, and this in turn affects the process of the research. The account is an outcome of collaboration between the partners, the researcher and the participant. Researchers must be aware of this.
- 4 *Social Critique*: Reflexivity as social critique is linked to the power relationship and the social position of researcher and participant which have an impact on the research and which the researcher must acknowledge.
- 5 *Discursive Deconstruction*: This type of reflexivity is linked to language and the variety of meanings inherent in it. Researchers concede in their writing that the findings can have multiple meanings and focus on the construction of the text.

The concept of reflexivity fits into a wider discussion on ontology and epistemology (Berger, 2015). It examines the role of the self in the generation and construction of knowledge. The researchers need examine their own location in the research, their assumptions and presuppositions – especially when carrying out insider research. Reflexivity assists in acting ethically and sensitively, without bias. ‘Outsider’ researchers become more aware of the differences between them and the participants by realising the importance of their own beliefs and values, and how they might affect the research process and the participants. Day (2012) develops these ideas further by examining three dilemmas: the assumption about knowledge generation, the legitimacy of the knowledge produced, and the techniques of achieving reflexivity. She also states that it cannot be considered ‘a magic cure’ for problems in qualitative research.

There are dangers inherent in reflexivity even on the simplest level: the researchers might take self-reference too far, and some qualitative writers are prone to this (in popular language it is often called navel gazing) by constantly focusing on their own feelings rather than those of ‘the other’. The voice of the participants and the illumination of the phenomenon under study should have priority. Nevertheless, *the researcher is the main research instrument*; he or she decides what constitutes data and where the focus should be located; researchers analyse the data and determine how to illuminate the phenomenon under study. They also write the research report and choose what to include and exclude. (The term ‘researcher as main tool’ in qualitative research has been criticized by some such as Philip Darbyshire (personal communication) who suggests when discussing qualitative research that the researcher is not just a research tool but also a participant in the research.

Some of the differences between qualitative and quantitative inquiry are listed in Table 1.1.

The place of theory in qualitative research

What place has theory in qualitative research? Theory is a framework or set of statements about concepts that are related to each other and useful for understanding the phenomena under study. Silverman (2015: 53) states that ‘theory

Table 1.1 Some differences between qualitative and quantitative research.

	Qualitative	Quantitative
Aim	Exploration, understanding and description of participants' experiences and life world Discovery Generation of theory from data	Search for causal explanations and precise prediction Testing hypothesis, prediction, control, findings stated with a degree of statistical certainty
Approach	Initially broadly focused Process oriented Context-bound, mostly natural setting Getting close up to the topic under investigation and immersion in data	Narrow focus Outcome oriented Context-stripped, extraneous variables controlled or removed altogether Context-free, often in laboratory settings
Sampling	Participants, informants Purposive and theoretical sampling Flexible sampling that can develop during the research as led by the data	Respondents, participants (the term 'subjects' is now discouraged in the social sciences) Population defined in advance Controlled sampling methods Randomised sampling Sample frame fixed before the research starts
Data collection	In-depth non-standardised interviews Semi-structured interviews Participant observation/fieldwork Discovery-oriented immersion Documents, diaries, photographs, videos	Scales, close-ended questionnaires, standardised interviews, outcome measures Highly structured observation using predeveloped tools Non-participant observation Secondary data and documents Randomised controlled trials Surveys
Analysis	Thematic or constant comparative analysis, latent content analysis ethnographic, narrative analysis, phenomenological meaning units etc.	Descriptive and inferential statistical analysis
Outcome	A description, story, ethnography, a theory	Measurable and testable results with prediction
Relationships	Direct involvement of researcher Researcher relationship: close	Limited involvement of researcher with participant Researcher relationship: distant (controlled standardised conditions)
Rigour	Trustworthiness, authenticity Also validity Typicality and transferability Validity	Internal/external validity, reliability Generalisability Replicability

These differences are not absolute; they are mainly at the end of a continuum. For instance, some approaches seek causal factors or explanations such as grounded theory. The term validity is often used in qualitative research – although it has an alternative meaning; quantitative research is not always context-free, nor completely objective. The researcher can have a relationship with participants in quantitative research, and qualitative inquiry might seek generalisability (these aspects are discussed later in the book).

provides a framework for critically understanding phenomena'. Novice researchers sometimes believe that they do not need theories in the beginning of their research because qualitative inquiry is inductive, that is, it goes from the specific and unique cases to the general and hence develops theory or theories. Indeed, many qualitative approaches explicitly develop theory, such as grounded theory, and theorising prior to the study is not encouraged. However, the inductive nature and the lack of a hypothesis in the beginning of research do not mean that no existing theories are needed or used in the research. For instance, a colleague might research ethnic differences in professional education. Her or his data from interviews have primacy. This means that the theories of culture, ethnicity and social interaction are part of the framework of the research, regardless of the data obtained and the theory developed. In chronic illness, theories of identity or gender might be important. Existing theory illuminates the findings (Reeves *et al.*, 2008) and might even be modified through these. Researchers also need some knowledge about the related literature on major theoretical concepts which could be important for the research. Health researchers sometimes present a-theoretical studies, although the empirical content is useful and valuable. In a piece of research for practical purpose, this might be acceptable but not in an academic project.

Creswell (2014) ascribes a place to theory and calls it a general 'orientating lens' through which the research can be seen. It helps researchers to formulate the research question and – eventually – locate their own research inside or outside an existing framework. In addition to the theories already mentioned, there are many pre-existing social theories, such as feminist theory, critical theory, symbolic interactionism and so on, and any of these might explain the standpoint of the researcher. Too much theory in the beginning of the research, however, might generate preconceptions and assumptions rather than leaving the researchers with an open mind and free to develop their own theoretical ideas.

The use of qualitative research in healthcare

Qualitative researchers adopt a person-centred and holistic perspective. The approach helps develop an understanding of human experiences, which is important for health professionals who focus on caring, communication and interaction. Through this perspective, nurses and other health researchers gain knowledge and insight about human beings – be they patients, colleagues or other professionals. Researchers generate in-depth accounts that present a lively picture of the participants' reality. They focus on human beings within their social and cultural context, not just on specific clinical conditions or professional and educational tasks. Qualitative health research is in tune with the nature of the phenomena examined; emotions, perceptions and actions are qualitative experiences.