Qualitative research to capture patients’ views


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**Introduction**

Over the last decade there has been a growing emphasis on the importance of incorporating the views and perceptions of patients or, more generally, service users in health and social care. Qualitative methods often feature as a useful approach to measuring such views. The journal of *J Fam Plann Reprod Health Care* is of course not a novice to qualitative approaches, since it has published a series of introductory articles on qualitative methods. [1-5] This paper reviews three very recent publications in the *Brit Med J*; each paper focusing on slightly different aspects of qualitative methods to measure patients’ views. [6-8]

Serial qualitative interviews

The first paper highlights that although face-to-face interviews may provide us with a large amount of in-depth information it can be very much a snapshot of a patient’s experiences. [6] The authors from the University of Edinburgh argue that interviewing a patient at different points during their illness can help to (a) build rapport and develop trust between the interviewer and the interviewee and hence bring out more personal and sensitive issues; and (b) capture patients’ changing experiences of the disease, their condition and service use. Murray *et al.* discuss a number of potential issues in serial interviewing, such as when to recruit and when and where to conduct the initial and subsequent interviews, as well as the drop out of interviewees over time and ethical considerations.

The second methods paper by the same research team outlines multi-perspective qualitative
interviews, whereby two or more people are interviewed as a set or case study. [7] This approach attempts to capture complementary as well as contradictory perspectives in people who are in some sort of a relationship with the central interviewee (often the patient). For example, the pivotal interviewee in a study of IVF failure would be the women undergoing treatment, but interviewing so-called significant others such as her partner and the IVF treatment midwife may offer greater insight into the woman’s perspective. As Kendall and colleagues suggest, multi-perspective interviews can help us understand the relationships and dynamics among patients, their families, carers and service providers, and the different perspectives of each of these interviewees on the situation. Some readers may know the multi-perspective interviewing approach by its subset of couple interviewing.

The last paper, appraises qualitative research methods as used alongside randomised trials of complex health care interventions. [9] Lewin et al. found that only 30 out of 100 trials had a qualitative element, but in two-thirds of these trials there was no attempt to integrate the qualitative and quantitative findings, neither in the analysis nor the overall interpretation. The authors conclude that qualitative studies alongside randomised controlled trials are still fairly uncommon. The trials which used qualitative methods used these prior to the trial or during the trials, but very few studies used qualitative methods to help explain trial results.

Conclusion
The first two papers highlighted specific useful ways of applying qualitative methods when eliciting patients’ views and perspectives. The authors outline the methods’ strengths and, to a lesser extent, their weaknesses for both serial interviewing and multi-perspective interviewing. [6-7] Both papers show what health care researchers can learn from the social and behavioural sciences where qualitative approaches are much more widely used. The third paper offers a more global view on qualitative methods, namely when used alongside randomised trials of complex health-care interventions. This paper concludes that qualitative methods are making only slow inroads into the more traditional research methods designed to test and generate evidence-based health care interventions. [9] It is obvious that there is still a long way to go before we make the best possible use of qualitative research methods in health and health care research.

References

