



# Some Thoughts about Research Methodology and Design

Community Empowered Research Training

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# Impetus for change

- ◆ Gains from 'traditional' research and funding
  - ❖ Extensive knowledge base; breakthroughs in diagnostics; health indices; effective therapies etc.
  - ❖ Significant impact on increased life expectancies
- ◆ No appreciable effect on health practice
- ◆ Health disparities remain even when access issues are taken into account
- ◆ Spending disparity: Poorer countries that spend less on health care are in better health than US

*Banks J, Marmot M, Oldfield Z, Smith J. Disease and disadvantage in the United States and England. JAMA. 2006;295:2037-2045.3.*  
*Siddiqui A, Herman C. Towards an epidemiological understanding of the effects of long-term institutional changes on population health: a case study of Canada vs..USA. Soc.Sci.Med.2007;64:589 -603.*

# *To know how to get to where you are going...*

## ◆ Kurt Lewin: 1940's

- ❖ 'action research': research not just to understand phenomena, but also to be able to shape it
- ❖ Address and redress social inequalities
- ❖ Challenged traditional concept of 'scientific objectivity'
- ❖ Rejected idea that researchers had to remove themselves from the community in order to study it

## ◆ Paolo Friere: 1960's

- ❖ Education is a dialogue a co-operative activity that involves respect and exchange.
- ❖ Praxis: action and making a change in the world. Not one person acting on another, but with another
- ❖ Conscientization - developing consciousness, that has the power to transform reality.
- ❖ Situating action in the lived experience of the individual

# How is this related to methodology?

- ◆ Fundamental assumptions about the correlation and causal relationships that under gird the issue under investigation IS what guides methodology.
- ◆ Fundamental shift in assumptions: centrality of role of community and communal factors
- ◆ Shift in context of understanding: social determinants of process
- ◆ Research shift: from “knowing” to combining knowledge with action to achieve social change

# Research paradigm: WITH vs. IN

- ◆ Recognizes community as a unit of identity
- ◆ Builds on strengths and resources within the community
- ◆ Facilitates collaborative partnerships in all phases of the research
- ◆ Integrates knowledge and action for mutual benefit of all partners
- ◆ Promotes a co-learning and empowering process that attends to social inequalities
- ◆ Involves a cyclical and iterative process
- ◆ Addresses health from both positive and ecological perspectives
- ◆ Disseminates findings and knowledge gained to all partners



# Community Engagement and Research Methodology

Community can be involved at every level: “it’s never too early, never too late”

- ◆ Select research question
- ◆ Develop proposal
- ◆ Financial responsibility
- ◆ Study design
- ◆ Recruiting and retaining subjects
- ◆ Participate in design of instruments and data collection
- ◆ Develop intervention
- ◆ Interpret and disseminate findings
- ◆ Apply findings: translate research —————> practice

# Effects on study design

- ◆ Knock quantitative methodology off its pedestal! We are studying people not particles
- ◆ The only choice is NOT a focus group!
- ◆ Triangulation of methodologies: each method reveals different aspects of the empirical world
- ◆ High priority on translation of basic, intervention, and applied research into changes in policy and practice.
- ◆ Change assessments need to be built into design of study

# The Five Commandments of Research Design

- ◆ WHAT do I want to know?
- ◆ WHY do I want to know this?
- ◆ WHO do I want to get this information from?
- ◆ HOW am I going to use this data?
- ◆ WHAT are my limitations?



# Research Designs: The usual suspects

- ◆ RCT
- ◆ Pre-post testing
- ◆ Single sample: baseline-change comparisons (longitudinal studies)
- ◆ Cross-sectional/cohort comparisons

# Research Designs: Focus Group Interviewing

- ◆ Clearly defined research objective and/or research problem
- ◆ The nature of the group
- ◆ Atmosphere/environment and rapport
- ◆ Role of Facilitator: key person!
  - ❖ Aware and listening facilitator
  - ❖ Well-organized and prepared facilitator
  - ❖ Structure, direction, and contribution to discussion
- ◆ Research assistance:
  - ❖ Who else should be there?
- ◆ Systematic analysis (recording and data crunching: we'll get to this later)

# Research Designs: Interviews

- ◆ Interviews: “a conversation with a purpose”
  - ❖ Dramaturgical perspective on interviews: ‘setting the stage’
  - ❖ Structured, unstructured, and partially structured
  - ❖ Interview schedule
- ◆ Questionnaires and surveys: not the same as interviews
  - ❖ Poor cousin of the interview...but more cost effective
  - ❖ “Quick read” of community issues



# Research Designs: Sociometric methods

- ◆ Sociometry: a means of measuring social distance and group structure
- ◆ Technique may inform researchers of *key individuals: those people* who may serve as guides or informants
- ◆ This may be of particular importance when there is an action agenda



# Research Designs: Human Traces

## ◆ Archival studies


- ❖ Public records: hospital admittances, motor vehicle registries
- ❖ Commercial media accounts

## ◆ Actuarial records

- ❖ Birth and death records

## ◆ Official documentary records: hospitals, social agencies, schools





# Research Designs: Historiography and oral Histories

- ◆ Basic assumption: you can learn about the present from the past
- ◆ Culture and cultural assumptions: imposition of personal cultural judgments on other cultures' meanings
- ◆ Window to understand symbols and symbolism in a current context
- ◆ Oral histories
- ◆ Case studies

# Now what? Data analysis techniques

## ◆ Content analysis

- ❖ Interviews, field notes, focus group transcriptions: all require further work
- ❖ Data needs to be condensed and made systematically comparable
- ❖ Nature and levels of analysis
- ❖ Coding frames
- ❖ Word crunching