

MENTAL HEALTH RESEARCH

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with CHILDREN
and ADOLESCENTS

A Guide to Qualitative Methods





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CHAPTER 1

THEORY AND UTILITY OF **QUALITATIVE RESEARCH**

Learning outcomes

- Distinguish between audit, service evaluation and research.
- Differentiate between quantitative and qualitative research with children.
- Recognise and appreciate the position of different theories in research.
- Appreciate the differences between methodologies and methods.

Introduction

This chapter opens by distinguishing research projects from audits and service evaluations. These distinctions are important as they have implications for ethics and practical decisions regarding the purpose of the study. This is followed by an introduction to the distinctions between methodological approaches. To enable informed decisions about how to proceed with your







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research we start by explaining the differences between quantitative and qualitative research with children. Research aims to generate new knowledge or test something that is already known. We explore different theories about how knowledge is generated and how adherence to different theoretical perspectives will impact on the choices you make when planning your project. Discussions of theory and the terminology around these concepts may feel quite daunting to the new researcher. In this chapter we take a step-by-step approach to explain what these terms mean and why they are important.

Audit, service evaluation and research

Before you start your child mental health project you need to be certain that you are planning to do research, not an audit or service evaluation. See Table 1.1.

Table 1.1 Audit, service evaluation and research

Туре	Description
Audit	Refers to a process of measuring current practices against a predefined set of standards. It compares practice with best practice (Closs & Cheater, 1996).
Service evaluation	Refers to the evaluation of service provision with a view to setting objectives for improvement. It seeks to assess the effectiveness of interventions to determine whether they met their objectives (Nolan & Grant, 1993).
Research	Refers to a process of establishing knowledge which forms an evidence-base for good practice. It tends to be driven by theory and should relate to broader populations/settings (Black, 1992).

The main difference between these is their purpose. Service evaluations and audits tend to be concerned with monitoring and assessing whether predefined standards are being met and setting service goals. Research is concerned with generating knowledge and understanding phenomena.



If you have established your project as research not audit, it is important you conform to the standards required.

Differentiating qualitative and quantitative research with children

Although the focus of this book is specifically qualitative research it is useful to understand some of its differences from quantitative approaches. In simple terms quantitative research is concerned with measuring 'quantity' and qualitative research is concerned with the 'quality' of individual experiences.









Quantitative research with children

The aim of quantitative research is to generate large-scale numerical data to predict trends. Typically quantitative research takes a 'scientific' approach to ensure a replicable and robust piece of research, often testing cause and effect or the relationships between variables. Quantitative approaches start with hypotheses, which are predictions of what is expected to happen; these are then tested to see if those predictions are correct and if so whether generalisations can be made.

Example

A researcher may predict (hypothesise) that clinically obese children experience lower self-esteem than other children. A quantitative research project might be designed to measure self-esteem in this cohort and compare that with children within a healthy BMI range. The results may be expected to be the same (generalisable) in the wider child population.

Qualitative research with children

The aim of qualitative research is to explore the individual experiences, beliefs and perceptions of children. Usually qualitative research is conducted with smaller numbers and is concerned with examining depth rather than breadth. Qualitative research starts with an open question, such as 'what', 'how', 'why', or 'when' to investigate what an issue means to children. The process in qualitative designs is as important as the outcomes.

Example

A qualitative researcher is interested in the relationship between obesity and self-esteem in children and designs a study to explore children's experiences of their weight and their self-esteem. The findings take the form of looking at patterns in the words that children use to talk about their experiences. These findings can help researchers understand children's thoughts and feelings on this issue and may give an indication of how other children in the same situation might feel (transferability).

In health there has been a growth of qualitative research and greater calls to include qualitative findings in supporting evidence-based practice (Sandelowski, 2004).







Illuminating the differences

We outline the distinctions between these two approaches in Table 1.2.

Table 1.2 Differences

Quantitative	Qualitative
Makes predictions about children and their behaviour and then tests those predictions.	Starts with an open question about a child related topic and then explores it.
Considered an objective approach.	Considered a subjective approach.
Tries to reduce any impact that the researcher may have during the process.	Accepts that the researcher will inevitably influence the research process.
Makes generalisations from the results about other children in the same situation.	The findings can be used to help understand other children in similar situations.
Uses statistics to analyse the data.	Analyses children's words or texts.
Interested in cause/effect or relationships between things.	Interested in how children make sense of things.
Focuses mostly on outcomes.	Focuses mostly on process.

These broad differences are widely accepted and may be helpful to you in deciding which one you prefer. The table presented may seem to suggest that your choice is either/or, but in some cases researchers may choose to design their research project in two phases, incorporating both a quantitative and qualitative element. This is known as mixed-methods research design.

Example

Phase one (quantitative) may be to ascertain the number of children who are clinically obese and also have low self-esteem. This will indicate the frequency or the extent of the problem. Phase two (qualitative) may be to explore how these children experience feelings of poor self-image.

Although it may appear that quantitative and qualitative research are quite separate, viewing the two approaches as dichotomous may oversimplify the issue and it may be more useful to think of all methods as on a spectrum (Peters, 2010).









Case example: The value of a qualitative approach in child mental health research

Rajesh is a paediatrician carrying out his research on refugee children's experiences of anxiety. Rajesh found that these children are particularly anxious when visiting his clinics and he is interested in the reasons why; he thinks it may be related to discrimination and stigma. He is currently attempting to write down his ideas to show his colleagues and is struggling to decide which approach would be most suitable.



Activity Case example

Consider in what ways a qualitative methodology might be most appropriate to explore this topic. Reflect on the assumptions Rajesh is making and how this might influence his research.

You may have considered a range of different reasons why a qualitative approach is suitable. This might include the main purpose of his study being to explore children's accounts of their own subjective experiences as refugees. He is clearly interested in ascertaining personal reports of anxiety rather than clinical scales or measurements. The qualitative approach provides an opportunity to discover aspects of their experiences that may not have been anticipated by Rajesh.

It would be beneficial through supervision for Rajesh to reflect on his assumptions about these children experiencing discrimination in their host country. It is possible that not all of the children experience discrimination, or may not be aware of discriminatory behaviour against them. Furthermore Rajesh is assuming that any anxiety experienced by these children is caused by discrimination/stigma rather than considering that it may be attributed to a complex interplay of other factors.

The role of theory

From the literature you are likely to come across specific terminology that researchers use. Although it might be tempting to skip over these, the concepts they represent are important to help inform your choices. There are five key concepts that we briefly consider here: *paradigm*, *ontology*, *epistemology*, *methodology* and *methods*, illustrated in Figure 1.1. We advise you to consult other texts for additional information, for example, Pascale (2011).









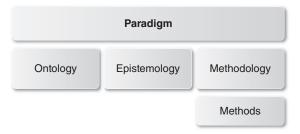


Figure 1.1 Concepts and theory

Paradigm – a set of beliefs and practices that define a particular discipline

Thomas Kuhn (1962) is often credited as being one of the original writers on the issue of scientific paradigms, arguing that paradigms refer to a set of practices that define a particular scientific discipline at a given period of time. Kuhn argued that paradigms are scientific achievements providing model problems and solutions for communities of researchers. A paradigm in social and health research therefore is viewed as a basic set of beliefs representing a particular worldview, which includes specific beliefs and meanings. Paradigms constitute an overarching framework for understanding how the world operates and provide structure for the direction research should take and how it should be performed.

Ontology – the nature of reality and what can be known about it

Ontologies are theories about the nature of existence and address the question of what can be known (Pascale, 2011). Ontology deals with questions in relation to what can exist or what is said to exist. It is important to recognise that ontological questions are fundamental in research as they constitute the foundations of social inquiry (Pascale, 2011). The three most common ontological positions which most researchers align with are realism, critical realism and relativism (Guba & Lincoln, 2004).

First is realism. The researcher believes in an objective reality that can be uncovered through research and which is contrasted with a subjective reality. An objective reality means that there is a reality that is outside an individual's interpretations or imagination. This objective external world can be represented through language, thoughts, beliefs and desires, as well as physical artefacts such as pictures and maps (Cromby and Nightingale, 1999). Realism believes that this world exists regardless of how we represent it.







Example

A realist researcher undertaking research involving children with ADHD will start from the premise that ADHD exists objectively as a condition which can be measured and understood through research.

Second is critical realism. The researcher believes in an objective reality but recognises that personal, social, cultural and historical factors, such as race, gender and economics, subjectively influence the way that reality is understood and experienced. The notion of critical realism has been associated with several schools of thought with slightly different philosophical understandings of the term.

Example

A critical realist researcher undertaking research related to children with ADHD will start from the premise that ADHD exists but will also take into account the ways in which it is constructed and understood within social, political and cultural contexts.

Third is relativism. This stands in opposition to realism and this is often negotiated rhetorically (Edwards et al., 1995). For relativism the researcher believes that there is no objective reality but that all that is 'known' is the product of socially constructed ways of making sense of things. It argues that any external world is actually inaccessible to us in practice and in principle and need not be considered (Cromby & Nightingale, 1999).

Example

A relativist researcher undertaking research related to children with ADHD will start from the premise that ADHD does not exist objectively, but is a contemporary label which has been agreed upon and given meaning only through its social context.









Epistemology – the relationship between the knower, what can be known and how

Epistemology, like ontology, is a branch of philosophy. Epistemology asks questions regarding how we can know what we know (Pascale, 2011) and is concerned with the nature and scope of knowledge. Epistemology can be understood as a 'justificatory account' of the production of scientific knowledge (Pascale, 2011). Although there are many (and some contention regarding what constitutes epistemologies), three common epistemological positions are positivism, post-positivism and social constructionism.

Positivism assumes that knowledge about the world is derived from objective facts and draws upon the principles of the natural sciences to make its claims. It is based on the idea that information which is logical, scientific and mathematical is the most valid knowledge. Positivist researchers believe that aspects of humanity can be measured objectively.

Example

A positivist researcher interested in investigating autism would start from the premise that knowledge about what constitutes autism can be gained through objective measures, usually quantitative. Positivists believe that autism exists independently and its symptoms can be measured to determine whether or not it is present in the child.

Post-positivism recognises that evidence in research is always imperfect. This position identifies that socio-political factors influence the way knowledge is shaped (Robson, 2011). In other words the researcher accepts that their knowledge, values and background may influence what they observe, but still pursues objectivity by recognising and seeking to eliminate this bias. Methods, therefore, should reflect this concern by aiming to reduce bias and seek to describe causal relationships.

Example

A post-positivist researcher interested in investigating autism would also start from the premise that knowledge about what constitutes autism can be measured. However, they would be concerned to remove contextual factors such as social or cultural, which could bias the research results.







Social constructionism is an epistemological position which assumes that knowledge does not pre-exist as a fact which can be discovered, but rather is co-created in a social, historical and political context and cannot be separated from this. In other words this argument advocates that meaning is co-created in and through language and interaction. Thus, research does not aim to discover 'facts' but to look to a more pragmatic and political goal, not searching for the truth, but meaning and experience (Burr, 1995). This means that the social construction of reality is a dynamic process which is reproduced by people and that reality is constructed rather than objective.

Example

A social constructionist researcher interested in investigating autism argues that it can only be understood within the context of an individual's idiosyncratic ways of making sense of their symptoms, the meanings they themselves construct. Autism exists only because people have agreed it does and consolidated its meaning through talk and text.

Methodology – the guiding theories that dictate which methods will be used to acquire knowledge

It is helpful to remember that methodology and methods are different. Methodologies are the 'logical frameworks of research design' while methods are the techniques for acquiring data (Pascale, 2011: 2). In other words, methodology is a design process for carrying out research and methods are the set of tools/instruments to carry out the research. The usefulness of the chosen method will be dependent upon its congruence with the associated ontology, epistemology and methodology.

Example

A researcher interested in Asian girls' experiences of their eating disorders is likely to choose a qualitative methodology and may opt for the data collection method of interviewing with the analytic method of thematic analysis.

This is particularly important in child mental health research which historically has been predominantly quantitative, because positivism resonates









with medical practice training where the natural sciences dominate (Peters, 2010). Although this can be useful it is not always appropriate. Qualitative methods for investigating areas of mental health can be especially informative. These methods can help stimulate new ideas and build theories around mental health. The rich data gathered can also be especially helpful in providing terminology which is meaningful to service users and these can be incorporated into clinical practice (Peters, 2010).



Activity Building a glossary

We have introduced you to some unfamiliar terms and it may be useful to consolidate your understanding of them by building your own glossary of concepts in your own words.

Summary

This chapter has introduced you to some important concepts associated with research projects in child mental health. You should now be able to distinguish between audit, service evaluation and research. You should be clear regarding the distinction between quantitative and qualitative research and the rationale for using a qualitative approach for your child mental health project. Hopefully you will also be starting to appreciate how your worldview and theoretical position will inform your methodological choices. This in turn will greatly assist you in making decisions about the methods you will use both for data collection and analysis. This chapter provides a foundation for working through the rest of this book.

Key messages

- Audit, research and service evaluation have a different purpose, different aims and objectives and are conducted in different ways.
- Qualitative research aims to explore people's perceptions, experiences, opinions and accounts.
- Quantitative research aims to establish cause and effect or relationships in an objective manner.
- Research is underpinned by particular assumptions about how the world works and methodological choices should be congruent with this worldview.









Further reading

Guba, E. G. & Lincoln, Y. S. (2004). Competing paradigms in qualitative research: Theories and issues. In S. N. Hesse-Biber & P. Leavy (eds), *Approaches to qualitative research: A reader on theory and practice* (pp. 17–38). Oxford: Oxford University Press.

Nightingale, D. & Cromby, J. (eds) (1999). *Social constructionist psychology: A critical analysis of theory and practice*. Buckingham: Open University Press.

Pascale, C-M. (2011). *Cartographies of knowledge: Exploring qualitative epistemologies*. Thousand Oaks, CA: Sage.





