

Getting good data from respondents: interviews

Respondent 2: *Are we not going?*

Facilitator: *We are only left with two questions.*

Respondent 2: *In Christ's sake*

Respondent 3: *It is getting late*

Respondent 1: *We have already discussed on it. You are asking repeatedly.*

Facilitator: *It is not a repeated question. Earlier we have discussed on the most important and less important behaviors. Now I am asking you about what the Health workers promote and encourage you to do and do not*

F: Tell me about the birth of X

R: The strong labor pain started around 9:30 pm, when I felt the strong labor pain I lie down on the floor.....

F: ummm

R: It is normal to call HEWs during labor, the usual practice is when a mother felt labor pain, she immediately call HEW, then they call an ambulance and the mother will be taken to the health center, this is what they advise us to do while they are coming here.

F: It's normal to call them

R: We have to call them as traditional birth attendants are not allowed to attend in any delivery; they are not also willing to attend any delivery. It is forbidden by the health facility and the Health extension worker. HEWS advise every member of the community to deliver at the health center, all people are advised by HEWs, we are told that traditional birth attendants are not allowed to attend in any delivery, they are not also willing to attend the delivery...

F: After M was delivered was anything other than breast-milk given for the baby to take?

R: nothing was given

F: what of water

R: [moves closer, ...whispers]...I gave water of the third day but I did not give again after that..... I am confused with the advise I am getting, some of my friends say give, some say do not give..... I want to follow the HEW advice, it's just that sometimes when you see a child crying, you will feel like to take the water and give them thinking they are feeling thirsty. But they said the breast milk is enough for him. Is it true? I am confused

F: Tell me more about what you have heard

R: The HEW and the HDA told me that breast milk contains water, but I talked to my neighbor who said my baby is crying because she is thirsty. When I gave the water she stopped but I am afraid to give it again in case the HEW hears of it and comes to shout at me. If the baby keeps crying I don't know what I will do. I don't want the neighbors to think I am a bad mother but I don't want the HEW to be angry.

F: Who makes decisions about the newborn in the household?

R2: It is the responsibility of the mother.

F-Tell me more

R2: The mother is the one who took the lesson from the HEW, mother in law used to make decisions but now, they should give the responsibility to the mother, it is the mother's turn now.

R1: The grandmother could still give advice to the mother, she could talk both the current and the past experiences, but the mother can say I won't accept this because I have been given education, they could accept it or don't accept it because they have been educated by the HEW

R2: Yes we are the ones who know more, we have been educated

I want you to name all those things that make women to give birth at home, Ok let's start talking

R3: lack of understanding of the reason for going to the hospital,

F: okay what else?

R2: lack of the husband's permission, lack of transport, accessible road

R3; Attitudes of hospital workers, Like us here, in our hospitals, the doctors don't sleep here.

F: okay, what next? Why do women give birth at home?

R3: some of the women are just too stubborn. Some of the women, you will be persuading them, but their stubbornness will not allow them

R2: some from the order of the mother in law, who will say I don't deserve this embarrassment, how can a woman in my house not deliver in my hands?

R5: sometimes the husband is willing to invite the TBA but his mother would refuse him. Sometimes the closure of hospital facilities at night is a big problem

R3: No, it is not that hospital don't open at night but doctors don't stay till night

R2: even me as TBA during the delivery of this my baby, we came to the hospital, nobody was around and that's how we went back home to deliver, and the hospital staff came back to quarrel me that why did I give birth at home

F=What changes have you seen in how newborns are cared for since you started work?

R3=Previously families gave newborns butter to swallow, and bathed the baby immediately they were delivered; but now that is avoided. This is because the mothers have delivery preparation training. We also have discussion with the mothers in law and also the family members and thus we are seeing lots of changes.

R4= Yes our work is changing things, but our people do not change overnight; you have to tell things over and over again. So starting from the time when she knows that she is pregnant, we give her health education, I give it, the HDA gives it and those at the health center give it. Then the people become convinced.

What do we want from an interview?

- Relevant, truthful and detailed information.
- For this the respondent must:
 1. Understand the purpose of the interview
 2. Be interested in the interview
 3. Feel comfortable and able to open up
 4. Be asked the right questions
 5. Be encouraged to talk and elaborate
 6. Not deviate from the topic

What do we want from an interview?

- Interviewer must be:
 1. Open minded
 2. Flexible and responsive
 3. Patient
 3. Observant – remembers what has been said
 4. Good listener and empathetic
 5. Curious but gentle
 6. Able to put people at ease
 7. Knowledgeable
 8. Critical –prepared to challenge
 9. Ethically sensitive

Pay attention to interviewer selection, training, and supervision

- Who will your audience open up to?
- Select interviewers based on their skills/potential skills
- Make interviewers investigators rather than data collectors.
 - Understand the intent of the questions
 - Make interviewers passionate
 - Hold reflection meetings
 - Conduct pre-analysis
- Give timely and regular feedback and make adjustments to data collection.
- Spend time in the field to understand context and support interviewers.

Pay attention to positionality and what might affect it

Discuss the advantages and disadvantages of the following

1. You are doing a study to explore barriers and facilitators to exclusive breastfeeding, you have asked the HEW to locate and introduce you to women who delivered within the last year.
2. A young childless women versus a multiparous women collecting data on child birth practices
3. A university lecturer versus a community member collecting data on newborn illness
4. The use of a translator during a focus group vs recruiting a local language speaker

Ensure respondents understands the purpose of the interview

- Explain at the start that you want to know about their thoughts and opinions in their own words
- Be sensitive about things like informed consent
- Explain that there are no correct answer to the questions and that you want to learn from them - and mean it
- Be clear who you are and who you are not

Ensure respondents are interested in the interview

- Select respondents who have information to give and are willing to give it, if respondents know little politely end the interview
- Be enthusiastic, lively, humorous and show interest
- Show commitment: Arrive on time, be prepared and familiar with all documentation, turn cell phones off and out of view, keep any promises
- Observe non-verbal communication
 - Be aware of your own tone of voice, facial expression and body language and those of the participants

Good body language can include

- Sitting squarely facing the person you are listening to
- Leaning slightly toward the person to demonstrate interest in what they are saying
- Maintaining eye contact as appropriate
- Maintaining a relaxed and open position to show you are at ease with them - arms should not be crossed.
- Nodding the head

Respondents must feel comfortable and able to open up

- Assure informants of confidentiality and anonymity
- Explain what will happen (e.g note taking)
- Choose a location which is neutral, sufficiently quiet and where there will be no disturbances
- Build rapport: Be unthreatening, relaxed, humble, patient, non judgmental, supportive and listen
- Use appropriate greetings and clothing
- Use words and phrases that give the respondent 'permission' to talk
- Use appropriate seating arrangements

Exercise

- We are going to look at some pictures that show an in-depth interview
- Turn to your neighbour and comment on what you think of the physical environment and comment on the interviewer and respondent body language.













Exercise

- List culturally appropriate ways to put someone at ease from the beginning to the end of an interview. Address the following:
 - How should you start the interaction?
 - What could you say or do initially to make the participant feel relaxed?
 - What could you say or do if the conversation becomes tense or boring?
 - What would make a participant feel that he or she could trust you?
 - What parting words or behaviours will help the participant leave feeling they had a positive interview experience?
- List things an interviewer might do that would be offensive to a participant or that would discourage the participant from speaking freely.
 - What would make someone feel uncomfortable? Offended? Hurt? Angry?
 - What kind of clothing would express disrespect for the participant in this culture?
 - What kinds of culturally specific words or gestures would convey interviewer bias?

Ask the respondents the right questions

- Open ended and non leading
- The list of questions is only a '*guide*':
 - If the respondent doesn't respond well to one of the questions ask it in a different way
 - if it makes sense to change the order of topics do so
 - If an interesting & relevant issue comes up explore it
 - Use knowledge from one interview to feed into the next.
- Conduct analysis in every interview:
 - Does this response confirm something I already know?
 - If not, Am I understanding the response? Exactly how does it differ?
 - Can I probe to see why there is a difference in the response?

Some useful ways of asking questions

- Content mapping and content mining
- Descriptive: Can you describe what happened to the baby after the placenta came out?
- Contrast: You said that mothers take special care of babies that come early what about babies born small?
- Check perspective: You said you were very happy with your care after delivery but was there anything that fell short of your expectations?'
- Projective questions: e.g. vignettes, asking about 'others'

Use a variety of questions

- Direct questions (best at end so not too directive): Are you happy with the way you and your husband decide how money should be spent?' Such questions are perhaps best left until
- Indirect questions: 'What do most people round here think of the ways that health workers treat patients?' 'Is that the way you feel too?'
- Specifying questions: 'What did you do then?'; 'How did X react to what you said?'
- Interpreting questions: 'Do you mean that your role has had to change from one of encouraging others to a more directive one?'
- Top-of-mind: What's the first thing that comes to mind I say 'skin to skin'?
- Querying the obvious. What does "starting breastfeeding" mean to you?

How to write a guide

- Start with thematizing
- Use literature and theory do identify themes if appropriate
- Develop questions for each area/theme that will tap into respondent's experiences and/or perceptions
- Limit to about 15 main questions
- Pilot

How to write a guide

- First question should put respondent at ease and be an opener – easy to answer and not too long
- Use open ended and non-leading questions
- Order questions logically – factual before opinion
 - General to specific
 - “What activities were conducted?” before “What did you think of the activities?”
- Use short, simple and clear questions that make no assumptions and lead to long answers
- Carefully consider hypothetical questions – think back not to the future
- Ask how rather than why questions 'How did you come to join this training'
- Write in local and appropriate language
- End with 'is there anything else you would like to tell me?' and leave the respondent feeling positive

Good questions

- What did you think of the program?
- How did you feel about the conference?
- Where do you get new information?
- What do you like best about the proposed program?

Group exercises

In groups of three comment on and re write the following questions

1. What fears would you have if your baby was born small?
2. What actions do you take to stop his/her diarrhea?
3. Was the treatment your baby got at the health center good?
4. Do you know about the clinic's services?"

Respondents should be encouraged to talk and elaborate through probing

- Stimulate respondent to provide more information:
 - Silence
 - ‘Nod’, ‘I see’ or ‘uh-hu’
 - Reflect: Repeat the last thing the respondent said to show attention
 - Paraphrase
 - Be empathetic ‘I can see why that was difficult...’
 - Act like you already have some knowledge ‘I heard around here’

Respondents should be encouraged to talk and elaborate through probing

- Stimulate respondent to provide more information:
 - Give compliments to encourage the informant to carry on
 - Act like you are confused to indicate that more information is needed
 - Show understanding so the informant knows their information is understood and treasured
 - Make small steps in questioning not big leaps
 - Ask for more detail: Could you say more about....Can you give me an example...what happened then..... How did you feel..... I am not sure I understand....What was it exactly that you...What gave you that impression... How did you respond... What effect did that have... What makes you say that

- Do not overuse why questions
- Don't be afraid of silence but don't let it get awkward:
 - Informants need time to reflect, gather thoughts and prepare to say something
 - Try not to comment on everything that is said and avoid a question and answer session

“The key to successful interviewing is learning how to probe effectively...that is, to stimulate an informant to produce more information...without injecting yourself so much into the interaction that you only get a reflection of yourself in the data.” (Bernard, 1995)