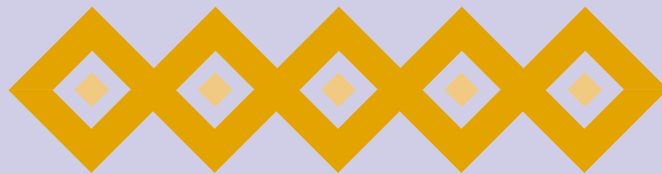




QUALITATIVE RESEARCH FOR IMPROVED HEALTH PROGRAMS:

A Guide to Manuals for Qualitative and Participatory Research on Child Health, Nutrition, and Reproductive Health



Prepared by
Department of International Health
Johns Hopkins University, School of Hygiene and Public Health

for
Support for Analysis and Research in Africa (SARA)
Academy for Educational Development (AED)

USAID, Bureau for Africa, Office of Sustainable Development

Qualitative Research for Improved Health Programs

A Guide to Manuals for Qualitative and Participatory
Research on Child Health, Nutrition, and Reproductive
Health

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Acknowledgments

The idea for this guide originated during a number of meetings in Africa, where the SARA, BASICS, SFPS and other projects were promoting the use of qualitative and participatory research methods for planning, implementing, and evaluating health programs. It became apparent that most program managers and researchers interested in qualitative and participatory research were unaware of the various manuals and tools already in existence, and, therefore, were forced to “start from scratch” in developing their own protocols for data collection. This manual aims to bring together—in one document—descriptions and ordering information about all the currently available manuals and guides on qualitative and participatory research related to child health and nutrition and reproductive health.

The first draft of the guide was reviewed at a meeting organized by the SARA, SFPS, and BASICS projects in Dakar, Senegal in July 1998. The dozen participants, representing a diverse range of expertise, organizations, and disciplines, discussed ways to develop and reinforce qualitative research competency in West Africa, including translating selected manuals into French, and making these manuals more available to African researchers. The participants concluded that by improving qualitative research capabilities, useful data would result, thereby improving health programs and, eventually, health outcomes.

We would like to give sincere thanks to the following people who took the time to read earlier drafts of the guide, giving invaluable guidance and suggestions: Lonna Shafritz, Renuka Bery, and Suzanne Prysor-Jones of the SARA Project, who provided editorial and technical feedback throughout the development of the guide; Carol Baume, Karabi Bhattacharyya, Bérengère de Negri, and Elizabeth Thomas of the Academy for Educational Development; and Patricia Hudelson of the World Health Organization.

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Foreword

This guide is designed for program managers, researchers, funders of health programs, and others who are considering using qualitative research methods to help them design more effective health programs and/or evaluate the strengths and weaknesses of existing programs. It is assumed that the reader already has some familiarity with the basic methods in the “qualitative research toolbox” such as in-depth interviews, focus groups, and participant observation.

This guide describes some of the existing manuals for conducting qualitative research on health and provides information to help would-be users select the manuals that are most appropriate to their needs. This guide does not attempt to review the available qualitative research tools related to prevention and treatment of chronic and non-infectious diseases, including tobacco control, obesity prevention, or management of such diseases as diabetes or epilepsy.

This guide is divided into three sections:

- u Section I reviews general manuals on qualitative research in health and discusses computer software available for qualitative data analysis.
- u Section II reviews manuals of methods and training for participatory research.
- u Section III reviews the available manuals on specific health topics such as child health, nutrition, and reproductive health. Chapter 7 provides an overview of different approaches that have been taken to write manuals. Chapters 8-13 describe manuals on specific topics such as malaria, nutrition, and reproductive health.

If you already have experience with qualitative research and are not interested in reading general information on qualitative research methods and participatory research, proceed to the specific chapters, focus on your particular area of interest. Ordering information for the manuals and tools discussed in each chapter is found at the end of each manual’s description.

Introduction

Why are manuals needed for qualitative research?

There are many differences between qualitative and quantitative research. One of the strengths of qualitative research methods is that they are exploratory and flexible. The results of a quantitative survey, using closed-ended questions, provide public health planners and programs with information about characteristics of the population on a set of predetermined questions. Qualitative methods allow the researcher to ask questions of different people in different ways, and to modify the questions and data collection methods to explore topics that were not initially deemed important. Why are detailed manuals needed?

Manuals help qualitative researchers to focus on the key issues to be investigated.

A good manual points the qualitative researcher toward the key issues to be investigated for a given health problem. For example, clinical and epidemiological studies have shown that very rapid breathing is a sign of pneumonia and other serious respiratory infections, indicating that a child should be treated immediately with antibiotics. Manuals on acute respiratory infections (ARIs) direct the qualitative researcher to this particular point, and describe how to explore how important people think it is, ways of learning the terms used to describe it, and what kinds of treatment, if any, is sought for it.

Manuals describe proven methods to understand these issues.

Most of the manuals described in this guide have undergone extensive pre-testing, in which a manual is used in the field by local researchers to collect and analyze data. Results of these field tests allow the authors of the manual to select the most effective methods and techniques to obtain the requisite information and to improve the instructions for using these methods. Pre-testing also allows the authors to determine the optimal sample size for each of the procedures in the manual.

Manuals improve data analysis to provide (potential) solutions to these issues.

Qualitative methods generate pages and pages of data. The results of many studies are never used because the researchers did not plan enough time to analyze the data they collected, nor do they know how to do it. Many manuals describe in detail how to analyze the data and include forms for tabulating data. Some also describe how to prepare a report.

Acronyms

AED	Academy for Educational Development
AFR/SD	Africa Bureau/Office of Sustainable Development
AIDSCAP	AIDS Control and Prevention Project
ALRI	Acute Lower Respiratory Infection
AMREF	African Medical and Research Foundation
ARI	Acute Respiratory Infection
BASICS	Basic Support for Institutionalizing Child Survival Project
CAM	Cultural Anthropology Methods (Journal)
CAFS	Center for African Family Studies
CATAD	Center for Advanced Training in Agricultural Development
CDC	Centers for Disease Control and Prevention
CRS	Catholic Relief Services
CSSP	Child Survival Support Project
CWM	Community Wildlife Management
EPB	Expanded Promotion of Breastfeeding
FES	Focused Ethnographic Study
RES	Rapid Ethnographic Study
FHI	Family Health International
HEALTHCOM	Communication for Child Survival Project
HHRAA	Health and Human Resources Analysis for Africa
HIV/AIDS	Human immunodeficiency virus/Acquired immune deficiency syndrome
HRD	Human Resource Development
IDC	Information Dissemination Center
IDS	Institute for Development Studies

IEC	Information, education, and communication
IIED	International Institute for Environment and Development
IMCI	Integrated Management of Childhood Illness
IRC	International Rescue Committee
IUNS	International Union of Nutritional Sciences
JHPIEGO	Johns Hopkins Program for International Education in Reproduction Health
JHU	Johns Hopkins University
KIWASAP	Kilifi Water and Sanitation Project
KPC	Knowledge, Practice, and Coverage
LINKAGES	Breastfeeding, Complementary Feeding, and Maternal Nutrition Project
MIS	Management information systems
MOH	Ministry of Health
NGO	Nongovernmental organization
PCS	Population Communication Services Project
PIDA	Participatory and Integrated Development Approach
PLA	Participatory Learning and Action
PLAN	An international, humanitarian, child-focused development organization
PRA	Participatory Rural Appraisal
PROWESS	Promotion of the Role of Women in Water and Environmental Sanitation Services
PVO	Private Voluntary Organization
RAP	Rapid Assessment Procedures
RCPLA	Resource Centers for Participatory Learning and Action
REFLECT	Regenerated Freirean Literacy through Empowering Community Techniques
RP	Research Protocol
RRA	Rapid Rural Appraisal
SANA	Sustainable Approaches to Nutrition in Africa

SARA	Support for Analysis and Research in Africa
SFPS	Santé Familiale et Prévention du SIDA (Family Health & AIDS Prevention Project)
STD	Sexually transmitted disease
STI	Sexually transmitted illness
UNAIDS	Joint United Nations programme on AIDS (Programme commun des Nations Unies sur le VIH/SIDA (ONUSIDA))
UNFPA	United Nations Fund for Population Activities
UNDP	United Nations Development Programme
UNICEF	United Nations Children's Fund
USAID	United States Agency for International Development
WHO	World Health Organization
WHO/AFRO	World Health Organization/Regional Office for Africa
WWW	World Wide Web

SECTION I: Resources on Qualitative Research Methods

Section I is organized into three chapters:

Chapter 1—General Resources for Qualitative Research on Health will be of benefit to those who have little or no experience with qualitative research methods. If qualitative research is new to you or your personnel, you will need a book or manual that describes the basic methods in the qualitative research toolbox, including how to use them and their strengths and weaknesses. This chapter reviews a few selected introductory-level books and manuals on qualitative research. Most are related specifically to health. This review does not pretend to be inclusive, as hundreds of books exist on theoretical and practical aspects of qualitative research.

Chapter 2—Methods for Focus Groups discusses the time and personnel needed for conducting focus group discussion research. The manuals on using this type of research method are reviewed.

Chapter 3—Methods for Qualitative Data Analysis is organized into two parts Part I, Analyzing textual data, reviews a number of options for analyzing textual data based on in-depth interviews and focus group transcripts, such as: analysis by hand; analysis with word processors; analysis with search and retrieve programs (dtSearch and ZyIndex); programs for semi-structured data (CDC EZ Text); and Integrated coding and model-building programs (The Ethnograph Version 5.0, NUD*IST, and ATLAS/ti). Part II, reviews ANTHROPAC, a software program for the analysis of systematic data.

Chapter 1: General Resources for Qualitative Research on Health

Overview of Resources for Qualitative Research on Health

Title of manual	1) RAP for Nutrition and Primary Health Care: Anthropological Approaches to Improving Program Effectiveness, Scrimshaw, SCM & Hurtado, E. 1987, 70 pages.	2) Qualitative Research for Health Programmes, Hudelson, P. 1996, 100 pages.	3) Research Methods in Anthropology, Qualitative and Quantitative Approaches, Bernard, HR. 1994, 585 pages.	4) RAP—Qualitative Methodologies for Planning and Evaluation of Health Related Programmes, Scrimshaw, NS & Gleason GR. 1992, 528 pages.	5) Population and Reproductive Health Programmes: Applying Rapid Anthropological Assessment Procedures, Manderson, L., UNFPA. 1997, 52 pages.	6) Field Methods Journal (formerly Cultural Anthropology Methods Newsletter), Bernard, HR, ed. 2000	7) Training in Qualitative Research Methods for PVOs and NGOs, Johns Hopkins School of Public Health, Center for Refugee and Disaster Studies. 2000
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Type of manual	A general introduction to qualitative research methods	Comprehensive, highly readable introduction to qualitative research on health	An introductory and reference on qualitative quantitative methods used in anthropology	Collection of papers from 1990 International Conference on Rapid Assessment Methodologies	Detailed technical review of strengths and weaknesses of rapid qualitative studies on health search methods	Journal publishing “how to” articles on qualitative and quantitative re-search methods	Trainer’s guide and participant’s manual to be used by PVOs and NGOs. Each approximately 150 pages.
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Topics covered*

Topics covered*	+	++	+++	+	+++	+	+	—
• Qualitative research theory	+	++	+++	+	+++	+	+	—
• How to do methods	+++	+++	+++	—	++	+++	+++	+++
• Guides for data collection	+++	—	—	—	—	—	—	+
• Guidelines for training	+	—	—	—	—	—	—	+++
• Examples of use of method	+	+	++	+++	+	+++	+++	—

Languages	Engl, French, Span	English, French	English	English	English	English	English	English
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*Key to topics covered

— Topic not covered at all + Topic mentioned, but not discussed ++ Topic discussed in moderate detail +++ Topic discussed in great detail, completely

1) Rapid Assessment Procedures for Nutrition and Primary Health Care: Anthropological Approaches to Improving Programme Effectiveness

Susan C.M. Scrimshaw and Elena Hurtado, UCLA Latin American Center, 1987, 70 pages. Available in English, French, and Spanish.

Who would benefit from this manual?

The non-technical language and readable style of the manual make it ideal for introducing field workers who have at least some secondary school education to qualitative research methods. Its style also makes this manual appropriate for non-native English speakers. The first section of the manual is only 32 pages, so most people should have time to read through it while attending a short training course. It is one of the few manuals on qualitative research available in both French and Spanish.

The RAP Manual is also valuable as a companion to the manuals on specific health topics described in chapters 8 through 13 of this guide. The data collection guides in the RAP manual are particularly useful for more general questions on characteristics of the community and the health system that are not included in the specialized manuals.

Organization of the Manual

This is the original Rapid Assessment Procedures manual and is often referred to as “The RAP Manual.” The manual was developed based on field work in Honduras, Guatemala, and Costa Rica in the early 1980s. An early version of the manual was published in *Food and Nutrition Bulletin* as the “Field Guide for the Study of Health-Seeking Behaviour at the Household Level” in 1984. The manual is divided into two sections:

The first section consists of six chapters that introduce anthropological methods such as participant observation and focus groups and then describes how to carry out a rapid qualitative research study, including hiring and training field workers, analyzing the data, and writing the report.

Chapter 1: Practical Anthropology for Health Programmes

Chapter 2: Anthropological Methods

Chapter 3: Focus Groups

Chapter 4: Selection, Training and Supervision of Field Workers

Chapter 5: Data Analysis

Chapter 6: Final Report

The second section consists of 31 useful one-page data collection guides on community and household characteristics, health and nutrition-related behaviors, and health services.

Ordering Information

UCLA Latin American Center
University of California, Los Angeles
405 Hilgard Avenue, 10343 Bunche Hall
Los Angeles, CA 90095-1447
Telephone 1-310- 825-4571
Fax 1-310-206-6859
E-mail latinamctr@isop.ucla.edu
Web site <http://www.isop.ucla.edu/lac/reference.htm>

English ed.: 1987, 80 pp., ill., bibl. ISBN 0-87903-111-5, LC 87-3193, \$10.95 paper
Spanish ed.: 1988, 100 pp., ill., bibl. ISBN 0-87903-113-1, LC 88-17276, \$10.95 paper
French ed.: 1990, 74 pp., ill., bibl. ISBN 0-87903-114-X, LC 90-21571, \$10.95 paper

2) Qualitative Research for Health Programmes

Patricia M. Hudelson, WHO, Department of Mental Health and Prevention of Substance Abuse, 1996, 100 pages. Available in English and French.

Who would benefit from this manual?

This guide is written for program managers and researchers, although field workers with some post-secondary training might find it useful. This guide is particularly appropriate when trying to generate interest or provide training in qualitative methods to people with prior experience in quantitative survey research, such as epidemiologists or demographers.

Organization of the manual

This manual is a comprehensive, highly readable introduction to qualitative research methods. It introduces a wider range of research methods than the RAP Manual, including more advanced methods, such as social network analysis. The examples are very practical. Especially useful are the glossary and the summary table comparing strengths and weaknesses of the different methods found in the appendices. The manual is organized as follows:

- Chapter 1: Introduction
- Chapter 2: The Toolbox: Unstructured interviews; Group interviewing techniques; Observation; Ethnographic decision modeling; Social network analysis; Structured systematic interviewing techniques
- Chapter 3: Sampling issues in qualitative research
- Chapter 4: Study design issues
- Chapter 5: Data analysis and report writing in qualitative research
- Chapter 6: Examples of qualitative research
- Appendix 1: Glossary
- Appendix 2: Summary table of data collection methods
- Appendix 3: Bibliography of resources for qualitative research
- Appendix 4: Computer programmes

Ordering Information

Free of charge from:

World Health Organization, Department of Mental Health (WHO/MNH)

Attention: Lydia Kurkcoglu

E-mail: kurkcoglu1@who.ch

3) Research Methods in Anthropology, Qualitative and Quantitative Approaches

H. Russell Bernard, Sage Publications, 1994, 585 pages.

Who would benefit from this book?

This book is appropriate for both experienced qualitative researchers and those being exposed to qualitative methods for the first time. This is a standard text on anthropological methods. While detailed and comprehensive, a minimum of technical language is used so that it is accessible to wide audience. Although long (585 pages), it can be read from cover to cover if someone wants to gain a deeper understanding of the development and application of these methods. It is a good reference book for people who will be training and supervising field interviewers.

Organization of the book

The book takes the reader through the entire research process: developing a research question, conducting a literature search, collection of data, analysis, and write-up. Of the 20 chapters, nine deal with methods of data collection, and five cover the analysis of qualitative and quantitative anthropological data.

Ordering Information

Sage Publications, Inc.
2455 Teller Road
Thousand Oaks, California 91320
Telephone 1-805-499-0721
Customer
Service 1-805-499-9774
Web site <http://www.sagepub.com>
ISBN 0 8039 5244 9, \$65. hardcover
ISBN 0 8039 5245 7, \$32. paper

4) Rapid Assessment Procedures. Qualitative Methodologies for Planning and Evaluation of Health Related Programmes

Nevin S. Scrimshaw and Gary R. Gleason (eds.), 1992, 528 pages. Available in English.

This book is a collection of papers presented at the International Conference on Rapid Assessment Methodologies for Planning and Evaluating Health Related Programmes, held at the Pan American Health Organization headquarters in November 1990. Many chapters present data that were collected using various manuals described later in this guide. Published articles, chapters, and reports based on actual use of a manual in the field can be very useful. Articles or reports from a field study can:

- u give people an idea of the types of findings they can expect to obtain if they use the manual;
- u set a standard for the quality and depth of data to be collected. This is particularly relevant to program managers deciding how long a study should last. The answer will be: long enough to collect data of comparable quality and depth to that found in the article or report; and
- u provide concrete examples of how the data are to be analyzed and used.

Ordering Information

International Nutrition Foundation
P.O. Box 500
Charles Street Station
Boston, MA 02114-0500
Telephone 1-617-227-8747
Fax 1-617-227-9504

\$25 plus postage & handling; discount available for developing-country nationals
Full-text version of document also available at following website:
<http://www.unu.edu/unupress/food/foodnutrition.html>

5) Population and Reproductive Health Programmes: Applying Rapid Anthropological Assessment Procedures

Lenore Manderson, UNFPA Technical Report, 1997, 52 pages. Available in English.

Who would benefit from this report?

This technical report, which can be downloaded from the Internet, is most suitable for those who already have some experience with rapid qualitative approaches, survey research, and/or university-level public health or social science training. It is especially appropriate for those looking for a more in-depth discussion of the methodological issues associated with rapid assessments. While it reviews many different methods, the report focuses on the strengths and weaknesses of the various methods, rather than on how to implement them. A strength of this report is its extensive list of references.

Organization of the report

This technical report gives a detailed review of the history and experiences with rapid anthropological procedures and presents some of the strengths and weaknesses of this approach. The five chapters are:

- Chapter 1: Introduction
- Chapter 2: Development and characteristics of Rapid Assessment Procedures
- Chapter 3: Methodological approaches and techniques
- Chapter 4: Rapid assessment of population and reproductive health programmes
- Chapter 5: Conclusions

Ordering Information

UNDP www.undp.org/popin/books/reprod/content.htm

7) Training in Qualitative Research Methods for PVOs and NGOs (and Counterparts)

Center for Refugee and Disaster Studies, The Johns Hopkins University School of Public Health, forthcoming in summer 2000, approximately 150 pages for the trainer's manual and 150 pages for the participant's manual. Available in English.

Who would benefit from this manual?

Training in Qualitative Research Methods for PVOs and NGOs (and Counterparts) is a set of training manuals designed to promote the systematic use of qualitative methods by PVOs/NGOs to help plan and manage community health programs. PVOs often do not use qualitative research methods. One reason for this may be a lack of clarity about when such methods will benefit the project planning and management cycle. Another reason is lack of human resources (capacity) to design, carry out, and analyze qualitative studies. In addition, qualitative methods may be seen as requiring excessive amounts of time and human resources beyond the ability of project schedules or budgets.

Included in the set are two documents—a Trainer's Guide and a Resource for Participants (Participant's Manual). The trainer's guide is designed for use by staff or consultants of community health programs with prior training and experience in the use of qualitative methods and adult education methods. It provides guidelines for conducting a 12-day training workshop, whose objectives, as outlined in the manuals, are:

- u To provide knowledge, skills, and attitudes for use of applied anthropological data collection methods useful for planning and managing community health programs,
- u To provide knowledge, skills, and attitudes for managing and analyzing qualitative data,
- u To provide knowledge, skills, and attitudes for designing qualitative studies for planning and management purposes.

The Participant's Manual is most likely to be used by program officers, health/ management information system specialists, and health educators working in community health programs; these persons are likely to be staff or partners of PVOs/NGOs.

Organization of the manual(s)

The set contains two documents: a trainer's guide and a participant's manual (collection of resources). The trainer's guide contains an introduction and lesson plans for 12 training days. Each training day is its own section, with one to three sessions per day. Each session contains the following items:

- u Title
- u Estimated time
- u Behavioral objectives for participants
- u Materials needed

- u Description of recommended training activities/experiences
- u An objectives checklist
- u Notes and hints for the trainer

The participant's manual contains overheads and charts for presentation during short lectures. This manual also contains most handouts and assigned readings and instructions for individual and group training exercises.

Time and personnel required

The training is 12 days (days off during the training not included). The number of trainers depends upon the number of participants. A general rule of thumb is to have one trainer for every five to seven participants, so that trainers can give timely feedback on field exercises and in-class training exercises. The manual recommends limiting the number of participants to 20 (participants can be formed into smaller groups for field activities to reduce logistical difficulties) and having translators (if needed) sit in on the training.

Ordering Information

Directly from Bill Weiss

E-mail: bweiss@jhu.edu

Chapter 2: Methods for Focus Groups

Overview of Manuals on Focus Groups

Title of manual	1) <i>A Manual for the Use of Focus Groups</i> , Dawson, S. et al. 1993, 96 pages.	2) <i>Guidelines for studies for using the group interview technique</i> . Aibel, J. 1993, 58 pages.	<i>Getting It in Focus: A Learner's Kit for Focus Group Research</i>	3) <i>PART A: The Handbook for Excellence in Focus Group Research</i> . Debus, M. 1988, 55 pages.	4) <i>PART B: Skill-Building Guide for Making Focus Groups Work</i> . Roberts, A et al. 1995, 141 pages. <i>PART C: Training Video for Moderating Focus Groups</i> . 1995, 34
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Type of manual	All of the written manuals provide an overview of qualitative research, tips on when to use the focus group technique, and instructions on planning and conducting focus group discussions. Guidelines on training the moderator (and other staff involved) are also covered and are the focus of the 34-minute video included with <i>Getting It in Focus</i> .
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Topics covered*

• <i>Guidelines for protocol development</i>	+++	+++	+++	+++
• <i>Guidelines for training</i>	+	+	+	+++

Time to carry out study	The average duration of a focus group discussion is one–two hours. A field debriefing held immediately after each focus group lasts approximately 15 minutes, and a full focus group debrief can last up to two hours (maximum total = 4 hours and 15 minutes). Therefore, a study of six to eight focus groups will require approximately four hours per discussion and about one week for analysis and write-up of the entire study.
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Languages	English, French	English, French, Spanish	English, French, Spanish
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*Key to topics covered	— Topic not covered at all ++ Topic discussed in moderate detail	+ Topic mentioned, but not discussed +++ Topic discussed in great detail, completely
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What Is a Focus Group?

A focus group is an organized (but flexibly structured) discussion involving six to 10 participants. It normally lasts one–two hours. The purpose of the discussion is to collect information on a particular research topic. A trained moderator guides the focus group through a discussion about the research topic. A trained note taker collects detailed notes. Group discussions are often tape-recorded to be transcribed for the analysis. Focus groups are useful for gaining formative project information because they can indicate the range of a community's beliefs, ideas, or opinions. In addition, they are a useful tool for designing question guides for individual in-depth interviews and questions for structured interviews.

Focus groups are particularly helpful to individuals/organizations planning to: generate ideas for programs, campaigns or materials; pretest educational or promotional concepts, messages, and materials; improve a product or service by clarifying people's attitudes and needs; or identify issues for quantitative research or to clarify (or build upon) quantitative findings.

As with any type of research, it is important to select methods that are appropriate for application within the study. While focus groups have a number of advantages over other research methods, they are not appropriate for every research problem. When focus groups are a suitable research technique and are well conducted, they can generate a lot of useful information.

Numerous books and manuals on focus groups exist. Many discuss how to conduct focus groups for market research. In the 1950s, focus group discussions began to gain popularity as a method of identifying people's opinions and feelings about certain products in the marketplace. Today they are widely used as a tool for researchers to gain insight into people's thoughts and behaviors about health-related issues. This chapter is limited to using focus groups to examine health topics.

Time and personnel required

The average length for one focus group is one–two hours. A 15-minute debriefing, involving all participants, should immediately follow each discussion. Later, a complete debriefing is conducted with staff members. This session may take up to two hours. Therefore, conducting one focus group will approximately require a minimum of two hours and a maximum of four hours.

An average focus group study will include six–eight focus group discussions. Therefore, two to four days will be needed to conduct all discussions. The analysis and write up of a 6-8 focus group study can take up to one week.

1) A Manual for the Use of Focus Groups

Susan Dawson, Lenore Manderson, and Veronica L. Tallo, 1993, 96 pages.

Who would benefit from this manual?

This manual will benefit researchers, members of disease control programs, and/or members of departments of health who are working on qualitative research projects.

Although the guidelines in this manual are applicable to focus groups in a variety of settings, the examples and techniques are based on the authors' experience in conducting focus groups on malaria in Africa and acute respiratory infections (ARIs) in the Philippines. Despite the specific research issues mentioned, the manual does not provide complete question guides for any particular disease. Therefore, it will be most useful to those researchers who know which issues are most important to their study, and who have already developed a list of topics. This manual can be used by people already familiar with focus group research and those without prior experience.

Organization of the Manual

A Manual for the Use of Focus Group Research provides a brief, yet thorough, discussion of focus groups—what they are, when to use them, who is involved, etc. In addition to defining focus groups, the manual offers simple step-by-step instructions on how to conduct the discussions. It is divided into two parts:

Part I—Team Leader Focus Group Training is organized in seven sections, beginning with a definition of focus groups and a discussion of what types of research projects they can benefit. Following this introduction is a description of the structure and conduct of focus group discussions (including guidelines on Selecting and Training Staff, Selecting the Study Participants, and Developing the Question Line). Part I concludes with a section on the management of information collected during focus groups and analysis of the results.

Part II—Staff Training for Focus Group Discussions includes a series of training sessions for staff members who will be involved in the focus group research. It is written to guide the researcher (trainer) through the different aspects and phases of the sessions. It identifies main points to be covered while training field staff, including (but not limited to) needed skills, language differences, stimulation of discussion, and dealing with unforeseen problems.

Ordering Information

Full-text version of document also available at following website in English and French:
<http://www.unu.edu/unupress/food/foodnutrition.html>

2) Qualitative Research For Improved Health Program Design

Judi Aubel, 1993, 58 pages. Available in English, French, and Spanish.

Who would benefit from this manual?

This manual was explicitly written for health and development workers in developing countries who are involved in implementing health and nutrition programs or researchers who are providing support to such programs. The guidelines are specifically designed to be used in situations in which a health or nutrition program already exists or in which there are plans to implement such a program.

A unique feature of this manual is that it describes how program stakeholders can be involved in all steps of planning, implementing and completing a qualitative study using group interviews. This approach, based on principles of adult and organizational learning, is intended to increase both the relevance of research to program implementors, and their sense of ownership of research results. Feedback from those who have participated in studies using this methodology has repeatedly shown that it does lead to greater relevance and ownership than in studies where program implementors are not systematically involved in the research process.

Organization of the Manual

Qualitative Research For Improved Health Program Design manual begins with a discussion of several key concepts related to qualitative research and specifically to research using group interviews, also called focus groups. The major part of the manual is devoted to describing a series of 17 steps which can be followed in planning and carrying out a community study based on focus group interviews.

Chapter one contains: a description of a group interview is and of the situations in which they can be used, a brief discussion of the differences between qualitative and quantitative research methods and of some criteria to consider in deciding which approach is more appropriate, and the advantages of involving program staff in a group interview research activity.

Chapters two, three and four present the seventeen steps in the focus group methodology and explain the purpose as well as the approach to be followed for each step. The 17 steps are:

- 1) Define the Topic
- 2) Review Existing Literature
- 3) Constitute the Study Team
- 4) Identify Information Needs of Programme Managers
- 5) Develop a Topic Map