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Qualitative Approaches to Research

Topics covered in this chapter:

Rapid assessments

In-depth qualitative studies

Qualitative research methods are extremely useful to researchers and advocates interested in violence. Qualitative methods—especially rapid assessment techniques—are helpful for assessing community needs, designing prevention campaigns, planning and evaluating interventions, and engaging community actors via participatory research. They are also useful in designing and field-testing questionnaires, and in interpreting quantitative research findings. Qualitative methods provide greater insight into motivation, meanings, and dynamics of violent relationships.

In many cases, a qualitative approach will suit a specific study aim better than quantitative methods. For example, if the primary purpose of research is to help plan an intervention, it may be more constructive to use available resources to understand community attitudes toward violence and the responses and attitudes of institutional actors—such as the police, health care providers, and the clergy—toward victims. In such cases, the very

process of doing research can initiate a public discussion of violence and open a dialogue with key institutional actors.

Likewise, if the goal is to better understand the mindset and attitudes of abusive men, it will be more productive to use qualitative techniques to probe how men view their partners, how they justify and interpret their behavior, and the incidents or “transgressions” that set them off. Qualitative techniques will foster much more nuanced understanding of these issues than will quantitative surveys.

For the purposes of this manual, we divide qualitative research into two main types of research designs: **rapid assessments** and **in-depth qualitative studies**. Individuals new to the field of qualitative research will want to seek guidance from someone familiar with these techniques before pursuing a qualitative research project. In addition, readers are encouraged to consult some of the excellent resources on qualitative data collection and analysis listed in Appendix III.



RAPID ASSESSMENTS

A rapid assessment is an exploratory study done as a prelude to designing an intervention or as a means of supplementing and/or refining quantitative research (for example, helping to identify local terms used for different diseases in order to design a questionnaire). A rapid assessment responds over a relatively short period to a few specific questions with concrete applications; for example, What kinds of services do rape victims want? What words do women use to describe abuse? How do community leaders regard the use of advocates to accompany women when they report violence to the police?

A rapid assessment does not pretend to provide a full, detailed account of all aspects of abuse. Its purpose is to guide the development of research instruments (e.g., survey questionnaires), to assess local needs, or to evaluate interventions. Participatory research designs are particularly appropriate when the aim is to stimulate discussion and reflection within a community about an issue, and to promote community-based actions.

In the last 20 years, rapid assessment techniques have become very popular as a means to aid project and instrument

Participatory Rural Appraisal is a growing family of approaches and methods designed to enable local (rural or urban) people to express, enhance, share, and analyze their knowledge of life and conditions, to plan and to act. (Chambers, 1994.¹)

design, and to evaluate interventions. The field of public health research—once dominated by Knowledge, Attitudes, and Practices (KAP) surveys and epidemiological research—has now incorporated a broad array of qualitative methods borrowed from the fields of marketing, popular education, agriculture, and social anthropology. **Rapid**

assessments can draw on any number of techniques including focus groups, participant observation, in-depth interviews, or more participatory techniques such as

mapping, pile sorts, community mapping, and seasonal calendars.

Within the larger category of rapid assessments are a variety of research traditions, including Rapid Rural Appraisal, Participatory Rural Appraisal, Participatory Action Research, and situation analysis. The diversity of names and methods used for these approaches reflects their different historical roots as well as some key conceptual differences. One major distinction is the degree to which the investigator versus the community guides and implements the research process. In recent decades, various forms of participatory research have evolved as an alternative to investigator-led initiatives. Participatory research tends to blur the distinction between research and intervention and can be an excellent way to raise consciousness about violence and to initiate community work on sensitive topics like violence. The following is a brief summary of the most commonly used approaches to rapid assessment.

Participatory appraisals

In the 1970s, researchers in the field of agricultural development and natural resource management developed a set of rapid assessment techniques that provided a quick and reliable alternative to traditional methods for conducting agricultural research. Collectively known as **Rapid Rural Appraisal (RRA)**, these methods included such techniques as seasonal calendars to determine patterns of rainfall, crop production, and disease; “transect walks” to document soil and vegetation patterns; and community mapping. The methods of RRA were primarily adapted from social anthropology and quickly became popular among researchers because they produced reliable results, often as good as or better than those obtained by much more costly and time-consuming quantitative studies.



In the 1980s, RRA was increasingly criticized because of its emphasis on extracting information from communities for the use of outsiders. The critiques of RRA led to the development of a new research trend called Participatory Rural Appraisal (PRA). PRA emphasized participation of the local community in the development of the appraisal, the use of diverse methods, and the knowledge generated by the community. In recent years, the methods of PRA have been used in many other fields, including urban development. Although the methodology did not originally incorporate a systematic gender perspective, many of the techniques have been modified to give greater visibility to gender gaps in access and control of resources.

In contrast to PRA, which developed out of the experience of northern-based researchers, **Participatory Action Research (PAR)** is rooted in the popular education movements of the south, particularly those of Latin America. Popular education, initially conceptualized by Paulo Freire in Brazil and later developed by social movements in many countries during the 1980s, considers research within a participatory framework of learning and action, and takes the knowledge and experience of community members as a point of reference. The educational techniques used in PAR are designed to stimulate group reflection on an issue and to motivate participants to act collectively to address the problem.

The PAR process follows a circular logic of research and action; empowerment of individuals and the community is achieved primarily through collective endeavor. Therefore PAR, as well as popular education, is a much more political process than PRA, in that individual and collective empowerment of participants is an explicit goal. In fact, the “success” of a PAR project is measured by the social transformations

BOX 5.1 SEXUAL VIOLENCE IN KENYAN REFUGEE CAMPS: A PARTICIPATORY APPRAISAL

Background and methods

Sexual violence against women in the Dadaab refugee camps, located in Northeast Kenya, has been an issue since refugees began arriving from Somalia in 1991. The number of reported rapes (106 in a population of 106,000) in the first nine months of 1998 was higher than the number for all of 1997. CARE and the German technical cooperation agency GTZ conducted an assessment of sexual violence in the Dadaab refugee camps as part of a wider initiative by CARE to review women’s issues in the camps.

The assessment was designed to collect information to answer several critical questions to guide future programming, including:

- Determining the extent of the problem.
- Determining areas of security concern regarding sexual violence.
- Identifying what services and programs exist.
- Obtaining information and perceptions of those most affected by the issue.
- Obtaining information and perceptions of potential service providers.
- Analyzing the collected information with agencies and community representatives to develop proposal ideas.

The assessment was refugee-driven, in the sense that it focused on substantive discussions with many refugee groups to define the problem and causes and to suggest solutions to reduce sexual violence. Participatory Learning and Action methodologies, including free listing, community mapping, causal flow diagrams, and pairwise ranking, were used to structure discussion sessions with refugees (examples of how these methods were used in the Dadaab appraisal are presented in Chapter 9). The team also interviewed main agencies involved in protection services and prevention activities. Additionally, a record review was conducted of reported cases of sexual violence in the past three months. The following were among the findings that were discussed with the communities and involved agencies to improve security for women at the camps.

Areas of vulnerability

Groups identified several areas within the camps, including in and around bore holes and water tap stands and places where the living thorn fences that surround the camp had been destroyed. Vulnerability was also linked to time: People stated that they were afraid to leave their homes after dark. Women reported that they felt vulnerable when they left their homes to line up predawn at the hospital to be assured an entry ticket for health services that day.

Firewood collection

The record review of sexual violence cases showed that over 90 percent of the reported rapes and attempted rapes occurred when women left the camps to collect firewood. The firewood issue is the most problematic, because inexpensive options to replace firewood as a fuel are limited for a camp population estimated at about 106,000 people. Many women are now traveling in large groups to collect firewood. Sudanese and Ethiopian males collect or purchase firewood to reduce the need to go to the bush in search of fuel.

(From Igras et al., 1998.²)

it catalyzes rather than by the information it generates. PAR is an excellent choice if the main goal is social change and the transfer of skills. If accuracy of the data is

**BOX 5.2 JIJENGE! A PARTICIPATORY ACTION RESEARCH PROJECT IN TANZANIA****Background and methods**

In 1996, Jijenge!, which means to “build yourself” in Kiswahili, was established in Mwanza, Tanzania, in an effort to address the physical and social determinants of women’s poor sexual health by promoting sexual health. The programs at Jijenge! include a reproductive health clinic, sexual health and HIV counseling and testing services, advocacy, community awareness, and training, and all work to empower women to proactively claim their rights. In 1997, Jijenge! staff and volunteers decided to undertake a participatory rapid assessment on violence against women. The goals of the project were to initiate public discussion of the topic and to lay the groundwork for a more extensive intervention.

The rapid assessment consisted of focus group discussions (FGDs), a baseline survey, and in-depth interviews. Most of the research, conducted by Jijenge!’s Community Awareness Coordinator and the volunteers, was done in the community, except for a few in-depth interviews and one women’s FGD which were held at Jijenge! for safety reasons.

Focus group discussions. Seventy-seven people—37 women and 40 men—were involved in the FGDs: two female groups, two male groups, two mixed groups with general community members, and one mixed group with community leaders. The single sex FGDs were extremely useful; participants shared experiences and opinions honestly and the women were particularly supportive of one another. The two mixed groups with general community members were somewhat less fruitful because some women were noticeably inhibited in the company of men. Participation of both women and men in these mixed groups was clearly influenced by perceptions of status and power, and the roles they needed to maintain in mixed company.

In-depth interviews. Eighteen in-depth interviews were held with ten women and eight men. The interviews provided rich contextual information that deepened understanding about the complexity of beliefs perpetuating violence and the subsequent effects on women and men’s lives.

Selected findings

Community members commonly referred to violence as a necessary form of discipline. A man, as the head of the household, is believed to have the responsibility to discipline all family members. In the study, violence—physical, verbal, or emotional—emerged as an acceptable way to teach lessons to women and children. Family violence is a common tactic for asserting authority and power over women.

Although violence occurs at an alarming rate in this community, it is also believed that violence between a husband and wife is a “domestic matter” that should not be raised by an outsider. Some women experiencing violence did not confide in family or friends because they felt that this would label them as a “bad wife or mother.” Women accepted responsibility for men’s violence, blaming their own behavior instead of their partner’s inability to manage his emotions appropriately. This shame and stigma keeps violence underground and prevents community members from supporting the women experiencing violence or confronting violent men.

The findings from this study helped organizers better understand local attitudes toward abuse before designing a program of intervention.

(From Michau, 2002.³)

critical, a more traditional approach may be a better choice.

The main tenets of participatory research are that:

- **It involves a flexible, iterative process** of exploration that stimulates creativity, improvisation, and flexibility in the use of methods to facilitate learning.
- **Community members direct the process**, in the sense that knowledge is produced on the basis of their own experiences. By the same token, community members define the priorities of the appraisal, as well as the collection, analysis, and interpretation of data.
- **The role of outsiders is to facilitate rather than direct** the learning process and the production of knowledge.
- **Participants, not just the researchers or external agents, own the methods and the results.** The socialization of knowledge and techniques in participatory research is greatly encouraged.
- **Diversity is enhanced rather than averaged out.** Participatory research attempts to reveal differences between situations, attitudes, and practices according to social class, gender, and ethnicity and tries to learn from cases that apparently do not conform to the expected.
- **Triangulation is used to validate results.** This refers to the use of different methods for studying the same phenomena, or using the same method with groups that represent diversity, for instance by gender and class, to see whether results are valid for each group.
- **The entire process, not just the results,** is designed to enhance



empowerment of individuals and communities, thereby stimulating social change.

Examples of participatory research studies are presented in Box 5.1 and 5.2.

Situation analysis

Situation analysis first became popular within family planning research in developing countries. In the 1990s, violence researchers appropriated the term, which they used to refer to a set of rapid assessment techniques designed to evaluate existing community attitudes and practices regarding victims of abuse. Situation analyses were first used in violence research in several Mexican cities; New Delhi, India; and Harare, Zimbabwe. Situation analyses are a useful way to enter a community and begin working on violence.

Situation analyses rely on a combination of focus groups, semistructured interviews, and observation, directed at establishing both community attitudes and beliefs regarding violence and the attitudes and practices of key institutional actors, such as police, judges, social workers, clergy, and health professionals. Generally, situation analyses include focus groups with key subgroups in the population (young women, old women, young men, older men, abused women, rape victims, and so on) and interviews with a quota sample of different providers. Questions are geared toward assessing the adequacy of current institutional responses to victims of violence and the degree of support and/or victim-blaming extended to abused women. An example of a situation analysis performed in Kenya to improve postexposure HIV prophylaxis to rape survivors is described in Box 5.3.

Situation analyses can serve as a sort of community “diagnostic” that provides insights into needed areas of reform. The data they provide can also help convince community leaders that reforms are indeed

BOX 5.3 POSTRAPE SERVICES IN KENYA: A SITUATION ANALYSIS

Background

Violence is an important risk factor contributing towards vulnerability to HIV and AIDS. Discussions of opportunities and challenges around postexposure prophylaxis to reduce HIV transmission following sexual violence is growing. Gender-based sexual violence in Kenya is almost invisible, though reportedly more prevalent than officially acknowledged. Health care workers at primary health centers and voluntary counseling and testing sites are reporting increasing numbers of rape clients. There is increasing demand for VCT services and VCT scale-up as a key Kenyan strategy to fight HIV and provide infrastructure, capacity, and political support for provision of comprehensive postrape services.

Objectives

A qualitative situation analysis was undertaken to develop a strategy for the provision of comprehensive postrape services in the VCT context. A review of literature and international experience on sexual violence and service provision including the use of postexposure prophylaxis was undertaken. The study had two main objectives:

- To establish perceptions of gender-based sexual violence in Kenya.
- To document and analyze service provision for gender-based sexual violence within Kenya.

Methodology

The study focused on three districts. Nairobi, Thika, and Malindi were selected because of availability of VCT services and to capture geographical, social, and religious diversities. Assessment was done in 10 VCT sites, 16 hospitals, and 8 legal and advocacy support programs. Forty key informants were interviewed and 20 FGDs were undertaken. Analysis involved comparing and contrasting key themes emerging from different participants such as counselors and community members. Different research sites and research methodologies such as focus groups and interviews were triangulated.

Findings

Sexual violence was seen as shameful, with diverse views on whether rape happens in relationships. Greater participation in discussions on rape from male groups in comparison to female groups may suggest less social barriers to public discussions of sexuality for men. Generally, views presented by male groups seem to edge towards justification and tolerance for rape, in contrast to women’s groups that felt the need for concerted efforts to address rape. Most people were unaware of what to do or where to go in the event of sexual violence. Provision of services by the police and at hospitals was seen to be lacking and rape survivors were often humiliated and retraumatized. Further, there is no documentation for rape and a weak chain of custody for investigation. Counseling services are nonexistent in public health institutions except in places where VCT services are available.

Conclusions

The implementation of postrape services within the VCT framework in Kenya must include:

- Multidisciplinary approaches to developing a regulatory framework.
- Integration of both counseling and clinical management in health care services.
- Building capacities for services provision.
- Development of referral systems.

(From Kilonzo et al, 2003.⁴)

**BOX 5.4 “LA RUTA CRÍTICA”—INSTITUTIONAL RESPONSES TO DOMESTIC VIOLENCE: A MULTI-COUNTRY QUALITATIVE STUDY**

In 1995, PAHO began the implementation of a ten-country diagnostic study to document what happens when a woman affected by family violence decides to break the silence and seek assistance in ending the abuse. In Spanish, this process was called the “ruta crítica” or the “way out.” In effect, the study asked, what happens when a woman decides to seek help? To whom does she turn for help? What factors motivate her to act or inhibit her from acting? What kinds of attitudes and responses does she encounter from institutional actors?

Altogether, researchers conducted over 500 in-depth interviews with battered women, interviewed more than 1,000 service providers, and completed approximately 50 focus group sessions.

Results show many factors—both internal and external—influence a woman’s decision to act to stop the violence. In some cases, it takes many years and several attempts at seeking help from several sources. Rarely is there a single event that precipitates action. Findings suggest that many battered women are resourceful in seeking help and finding ways of mitigating the violence.

Battered women identified several factors that act as catalysts for action. An increase in the severity or frequency of the violence may trigger a recognition that the abuser is not going to change. An event may make it clear to her that she cannot modify the situation with her own internal resources. A primary motivating factor is the realization that lives—hers or her children’s—are in danger.

“He mistreated the children badly. He only knew how to shout orders. There was a period when he would beat them. The children, particularly my oldest son, had become very disobedient, rebellious and had lost all motivation to study. He didn’t go to school...”

“I finally decided to leave when he burned all my clothes and also burned me.”

“The moment came when I said to myself that I had to find someone to help me because it was not possible to keep going on in this way. I had become hysterical, problematic, unhappy, mainly because I could see my beaten face every week in the mirror.”

What factors inhibit the process of seeking help?

As with the precipitating factors, the obstacles for seeking help are multiple and intertwined.

“One learns to live with the person even though he is an abuser. I don’t know, for me he was my companion because I felt alone, without the support of a family. He was my family...”

“I used to excuse him for that and I believed that through the love I had for him he was going to get better, and that this was not going to keep on.”

However, economic factors appear to weigh more heavily than do emotional considerations:

“The children were very young and I didn’t think I could support them on my own. And I didn’t want to burden my mother.”

These barriers are reinforced by battered women’s feelings of guilt, self-blame, or abnormality.

“I tried to reflect on my own actions. What did I do to provoke him? I considered my personality...”

“My mother would tell me that I was crazy and that is why I was seeing a psychologist and my brothers and sisters said the same thing.”

“There came a moment in which I really thought ‘Am I crazy?’ Then I sought help to make sure that what was happening to me was true.”

Women who sought help rarely began with formal health or police services. They initially relied instead on support from other women in the community, including female family members, neighbors, and health promoters. Many women related instances of being ridiculed or treated with indifference by health providers and local authorities.

“I finally told a friend that I trusted. I went to tell her because she is an older lady and she told me that he was wrong, that he was a sadist. She told me that I should get out of the house.”

“...Almost every time he abused me I would go to my friend’s house and she would give me a place to sleep. I would even sleep on the floor, because she was poor. She was the one who finally said, ‘This is too much. I am going to help you find help because that man is abusing you too much!’”

(From Sagot, 2000.⁹)



BOX 5.5 “PLATES IN A BASKET WILL RATTLE”: IN-DEPTH QUALITATIVE STUDY ON DOMESTIC VIOLENCE IN CAMBODIA

A common Cambodian proverb—“plates in a basket will rattle”—is used to explain family problems.
*“If people live in the same house there will inevitably be some collisions. It’s normal—it can’t be helped.
 But, from time to time, plates break. So do women.”*

Background and Methods

The study, *Plates in a Basket will Rattle—Domestic Violence in Cambodia*, is based on in-depth interviews with 50 victims of domestic violence and one interview with the mother of a woman who was killed by her husband. Additional information was gathered from interviews with individuals that an abused woman is likely to encounter in her search for assistance, including judges and court personnel, police officers, district chiefs, village heads, medical workers and midwives, and staff from NGOs.

The subjects for the study were located primarily by word-of-mouth with the help of local community organizations. The main researcher (a North American) worked with two Cambodian colleagues to conduct the interviews. Before the research began, they had first to create words in high and low Khmer to refer to “domestic violence,” since no words previously existed. Interviews took an average of half a day, and women were compensated for the income they could have made during this time by trading in the market. (This generally amounted to between 7,500 and 10,000 riels, or between \$3 and \$5 per woman.)

Prior to beginning the interviews, the team made contingency plans in case there was a woman who might be in immediate danger and request assistance. To this end, they contacted three local NGOs that offered to provide temporary shelter for victims.

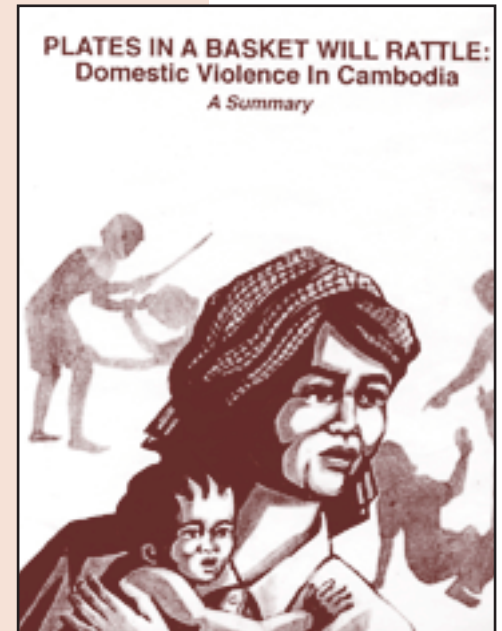
Interview information was collected in the form of handwritten notes in Khmer, which were transcribed and translated into English immediately after each encounter.

Findings

The study highlighted the difficult plight of women who were severely beaten by their husbands. It showed how cultural norms, shame, and the lack of viable alternatives kept women in abusive relationships. Many of the women interviewed suffered physical abuse in pregnancy as well as sexual abuse and degrading treatment from their partners. Virtually no public institutions, including the police and health sector, were trained or sensitive to the needs of battered women.

The most important outcome of the study was that domestic violence became a public issue in Cambodia. The research helped catalyze a conference on violence, sponsored by UNICEF, and it played a role in the development of an antiviolence organization called the Project Against Domestic Violence. Many of the findings from the qualitative study proved critical in helping to lay the foundation for the quantitative study carried out subsequently (described in Box 4.2).

(From Zimmerman, 1995.⁷)



needed. Situation analyses can be particularly productive when local community members assist in doing the interviews. In the Pan American Health Organization (PAHO) project, members of the local women’s organization that provides services for victims of abuse frequently conducted interviews. Because of the demands of assisting victims, many advocates had never taken the time to approach the local forensic doctor, the village priest, or the chief of police. The

research provided a structured environment through which to analyze institutional responses and to initiate dialogue with key institutional actors. (See Box 5.4)

IN-DEPTH QUALITATIVE STUDIES

Rapid assessments and **in-depth qualitative studies** differ mainly in the scope of research and methods of analysis. An in-depth qualitative study requires a more

**BOX 5.6 SWIMMING UPSTREAM: VIOLENCE AND MASCULINITY AMONG NICARAGUAN MEN****Background**

In 1998, the Nicaraguan NGO Puntos de Encuentro embarked on a study designed to gain information useful for designing a public education campaign that called on men to renounce violence in their intimate relationships. The study used qualitative research techniques to generate hypotheses about the type of antiviolence messages that men would accept and find appropriate to their needs and expectations.

Methodology

The research included three phases:

- Compilation and content analysis of the workshop transcripts and reports from meetings about men and masculinity in Nicaragua, including:
 1. Men's views about what it means to be a man in Nicaragua.
 2. Images and attitudes men hold about women.
 3. The advantages and disadvantages of "being a man."
 4. Men's memories of how they were raised to become adults (socialization).
- In-depth interviews with a sample of 12 nonviolent men. Researchers chose to interview nonviolent men based on the rationale that, rather than looking for "causes" of men's violence (and then offer a "medicine" with the campaign), it would be more productive to study what creates "health"—that is, how do we understand men who, in spite of growing up in a violent socio-cultural context, do not become violent themselves? To be considered "nonviolent," men had to be identified by their peers and pass a series of behavioral screens. Men exposed to feminist discourse were explicitly excluded.
- In-depth interviews with "ordinary" men.

Selected results

The research revealed that large differences exist between nonviolent and "ordinary" men. For example, ordinary men say that their relationships are best when their partner does not complain, or when she does what she is told. On the other hand, nonviolent men held very different expectations for relationships. For them, a "good relationship" is one where there is mutuality, reciprocity, and mutual support.

Nonviolent men perceived both benefits and costs to this behavior. Among the benefits identified were greater tranquility and harmony at home; a "good reputation" in the community, feeling good about oneself, health and well-being of one's children, and a household that runs more smoothly day to day. Among the costs of "swimming upstream" against a machista culture were ridicule and ostracism by other men.

Nonviolent men either grew up in very loving homes where they were taught to respect women or in very violent homes, where their own mothers were beaten and they vowed never to be like their fathers.

(From Montoya, 1998.⁸)

detailed and more time-consuming research design. It involves extensive data collection, processing, and analysis. While in-depth studies often use many of the same techniques as **rapid assessments** for collecting data (e.g., focus groups, observation, and interviews), they are generally conducted over longer periods, use more respondents, and entail more systematic data analysis. (Chapter 13 describes in greater detail some of the basic techniques for qualitative data analysis.) In general, one conducts an in-depth study for the following reasons:

- To advance theoretical understanding of an issue and/or to gain a more complete understanding of a phenomenon than can be gained during a shorter study.
- To understand cultural norms, beliefs, and behaviors or to capture and analyze complex motivations.

Such studies frequently rely on detailed interviews that require enormous amounts of time and energy to transcribe, code, and analyze. Many researchers underestimate the challenge of coding and interpreting reams of qualitative data. Performing an in-depth qualitative study is



TABLE 5.1 DIFFERENT TRADITIONS IN QUALITATIVE RESEARCH

Dimension	Biography	Phenomenology	Grounded Theory	Ethnography	Case Study
Focus	Explaining the life of an individual	Understanding the essence of experiences about a phenomenon	Developing a theory grounded in data from the field	Describing and interpreting a cultural and social group	Developing an in-depth analysis of a single case or multiple cases
Discipline origin	Anthropology, literature, history, psychology, sociology	Philosophy, sociology, psychology	Sociology	Cultural anthropology, sociology	Political science, sociology, evaluation, urban studies, other social sciences
Data collection	Primarily interviews and documents	Long interviews with up to ten people	Interviews with 20-30 individuals to "saturate" categories and detail a theory	Primarily observations and interviews with additional artifacts during extended time in the field (e.g., six months to a year)	Multiple sources, documents, archival records, interviews, observations, physical artifacts
Data analysis	Stories, epiphanies, historical content	Statements Meanings Meaning themes General description of the experience	Open coding Axial coding Selective coding Conditional matrix	Description Analysis Interpretation	Description Themes Assertions
Narrative form	Detailed picture of an individual's life	Description of the "essence" of the experience	Theory or theoretical model	Description of the cultural behavior of a group or an individual	In-depth study of a "case" or "cases"

(From Creswell, 1998.⁵)

as complex and time-consuming as conducting a community survey.

In-depth qualitative studies are not all the same, however. In fact, this term refers to a broad category with many different traditions. Creswell identifies the five most commonly used traditions in qualitative research as: biography, phenomenology, grounded theory, ethnography, and case studies.⁵ Although the methods for data collection are similar, the theoretical underpinnings and the approaches to data analysis and interpretation differ greatly. Table 5.1 presents a brief description of these traditions.

Because an in-depth description of each tradition is beyond the scope of this manual, we recommend that readers consult the resources mentioned in Appendix

III for more information about qualitative research.

Further examples of qualitative research on gender-based violence are provided in Boxes 5.4-6. Box 5.4 presents an ambitious multi-country study carried out by PAHO as a point of entry for developing coordinated community interventions against domestic violence in 25 pilot communities throughout Latin America.

Box 5.5 describes one in-depth qualitative study on domestic violence derived from interviews with abused women in Cambodia as well as with community leaders and service providers. This study, entitled *Plates in a Basket Will Rattle*, was the first of its kind in Cambodia, and provided extremely rich information about partner abuse in a society that has long



been ravaged by war. Finally, Box 5.6 presents a qualitative study done in Nicaragua to examine the roots of male violence against women. This study was performed to provide information for the development of a campaign directed towards men on violence prevention.

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