

ACT Consortium Manual for Qualitative Data Analysis

This manual was written by Clare Chandler, social scientist for the ACT Consortium. The manual was prepared in response to a need identified at a qualitative data analysis workshop for ACT Consortium social scientists in April 2009.

The manual covers the topics identified by the participants of the workshop as important to include in study protocols. This manual is intended to form the basis of protocols for qualitative data management and analysis across projects in the ACT Consortium. This should ensure consistency in approaches and provide a step-by-step guide for those less familiar with qualitative data analysis, especially using the software package NVivo 8. The manual should be adapted for individual projects before incorporating into standard operating procedures for research staff. This manual is not intended to substitute workbooks on operating software.

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1 Data management

1.1 File names

Unique **identity numbers** (IDNOs) will be determined in advance and used to link all data collected about a specific interview, focus group or observation incident. This will be done by using numbers or letters to identify the type of data collection, the location, the type of respondent(s) and a unique identifying number. For example, the third focus group with male drug sellers in a sub-district numbered '23' might have the IDNO: FGDDS23M03.

1.2 Handling data during field work

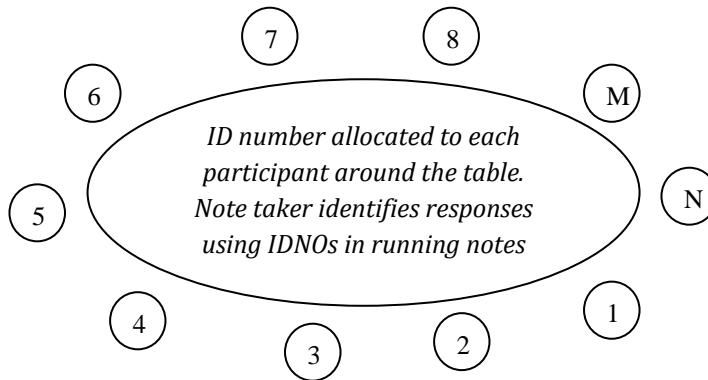
To ensure **confidentiality**, all notes and audio files will be kept on the person of the field worker at all times or in a locked vehicle or room. Participants and non-participants will not be allowed to view the notes at any time and content of discussions and interviews will not be revealed to anyone else.

1.2.1 Interviews

Names of interviewees will not be used at any stage of the data collection process. Pre-determined IDNOs will be used on data collection form (topic guide and notes). Audio recordings will not start until the interviewee has given **consent** and will not record their name.

1.2.2 FGDs

First names may be used during FGDs to refer to participants during the discussion and to enter demographic data. However, notes will be taken using IDNOs defined by a map of the group rather than writing participant names.



1.3 Storage of files

On returning from the field, all data will be taken directly to a lockable data room and inserted into **secure folders**. This includes: topic guides, field notes, audio files/tapes, contact summary form, enrolment forms, consent forms and any other notes. No notes will be kept on the person of the fieldworker upon return from the field.

2 Transcription

Transcripts for each interview or FGD will be written by hand or typed into a new Word file, directly from the tapes in the **original language** used during the interview. The transcript document will be labelled with the ID number of the individual interviewed or the ID of the FGD, followed by ‘Transcript’, e.g. ‘FGDDS23M03Transcript.doc’.

2.1 Participant details

At the head of the document, the details of the setting and participant(s) will be recorded:

Transcription header for in-depth interviews

Participant IDNO _ _ _ _	Gender: Male / Female	Interviewer Initials _ _ _
Community number _ _ _	IDI Date _ _ / _ _ / _ _	Audio file number _ _ _
Transcriber Initials _ _ _	Translator Initials _ _ _	

Transcription header for focus group discussions

FGD IDNO _ _ _ _	Group: Adult Male / Adult Female / Community leaders			
Facilitator Initials _ _ _	Note taker Initials _ _ _			
Community number _ _ _	FGD Date _ _ / _ _ / _ _	Audio file number _ _ _		
Transcriber Initials _ _ _	Translator Initials _ _ _			
FGD participant IDNOs and data				
Participant ID	Age	Sex	Occupation	Number of children
1	31	Male	Village chairman	1
2	37	Male	Area Chairman/Subsistence farmer	5
3	54	Male	Ward health officer	5
4	25	Male	Area chairman	1
5	62	Male	Area chairman	6
6	48	Male	Ward executive officer	6

Quantitative data from the first page of each interview (for example demographic and work history details) or the data about the whole focus group will be entered into Excel or Access. The IDNO for each interview or focus group will be listed in the first column on the left, followed by headings for each data field. When text data are entered, care will be taken to ensure phrasing and spelling are identical for the same field, e.g. ‘Community health officer’ will be used consistently, rather than ‘CHO’ for some participants or vice versa.

Quantitative data entry for IDI

IDNO	GRADE	YEARS TRAINING TOTAL	Year of Graduation most recent	YEARS WORKED AT FACILITY	ORIGINALLY FROM AREA?	AGE	EVER PRESCRIBE?
IDIMF53	CHN	2	2006	1.3	No	25	Often
IDINF52	MD		2003	4.5	No	39	Yes
IDIMM42	MD		2000	0.3	No	48	No
IDIMF40	CHN	4	1985	12	No	56	Often
IDINF41	CHN	4	2006	0.6	No	50	Often
IDINF43	NM	4	1972	1	Yes	61	Often

Quantitative data entry for FGD

IDNO	Number of participants	Mean Age of participants	Sex	Occupation most common	Mean number of children
FGDFH01	8	38	Female	Subsistence farmers	4
FGDMH02	10	44	Male	Subsistence farmer	6
FGDMH03	12	23	Male	Subsistence farmer	1
FGDFH04	12	41	Female	Subsistence farmer	4
FGDVH05	10	42	Male	Village leaders	8
FGDML01	9	48	Male	Subsistence farmer	4

Projects may choose to copy the data from the excel spreadsheet for each interview into the top of each transcript.

Participant IDNO [IDIMF49] Gender Female Interviewer Initials CC
 Health facility number |_|_|_3] IDI Date 25/2/09 Audio file number IDIMF49
 Transcriber Initials CC Translator Initials n/a

IDNO	IDIMF49
JOB TITLE	TB Coordinator
GRADE	Staff Nurse
YEARS TRAINING TOTAL	3
HIGHEST SCHOOL EDUCATION LEVEL	Senior secondary school
YEAR OF GRADUATION	2005
YEARS WORKED AT FACILITY	2.5
ORIGINALLY FROM AREA?	No
AGE	27
EVER PRESCRIBE?	Often
Went to Jan 09 workshop?	Yes

Transcription...

2.2 Transcription method

Recordings should be transcribed as soon as possible after the interview/group discussion, preferably within 24 hours. The transcription will use the initials of the interviewer or facilitator to mark each time they speak or interject, and the IDNO of the participant to mark each of their contributions to the interview or discussion. For example:

IDIMF40: If it is negative, we see it. If it is positive we see it. Then we straight ahead we give treatment [CC uhuh]. So it's really helpful
 CC: and what do you think about.. you have to wait some time [IDIMF40:yes yes] for the result? [IDIMF40:yes] how do you feel about that?
 IDIMF40: Oh, it's simple, it doesn't waste time. It doesn't waste much time at all. The results come very simple and fast

In the case of FGDs, the transcription will be conducted together with the notes taken by the note-taker in order to insert the **IDNOs** of the participants. If the IDNO of the speaker in a focus group discussion is difficult to identify, they will be named as 'UNKNOWN'.

The transcription will be written **verbatim**, including all 'umms', 'mms', repetitions and incomplete sentences as well as details in square brackets, including pauses e.g. '[short pause]' or '[long pause]' and any interruptions e.g. '[telephone rings]'. If more than one person is talking at once, this should be detailed, e.g. '304 [speaking at same time]'. If any comments are made by the transcriber, translator or field worker about the transcription, these will be indicated using <<comment>>.

In the case of FGDs, the notes of the facilitator and note taker will also be entered to supplement the transcription. **Annotations** will include notes about the interaction/atmosphere at different points, and other details (such as '[uncomfortable silence for 5 seconds]' Or '[laughter by participants 3,6 and 7]').

Once the transcriber has completed the draft transcription, they will **proof read it**, checking for accuracy against the audio file and revising the transcript accordingly.

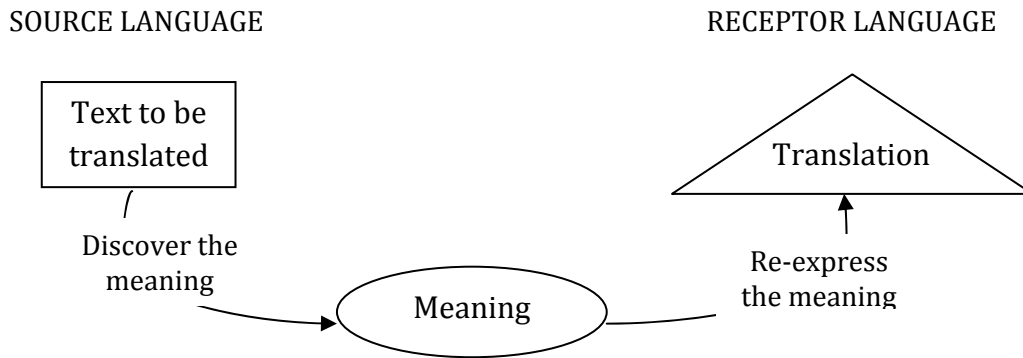
The transcript will then be passed to the interviewer or facilitator who will check the transcripts again for accuracy, **editing** and inserting any additional comments. At this point the facilitator and moderator will go through the transcript and remove any participant names occurring in the transcripts, replacing these with the numbers allocated to each participant. In addition, names of specific people mentioned during the discussion (e.g. health workers or community members) will be removed and replaced with a general statement, e.g. '[name of local nurse]' and names of places and institutions will also be replaced, e.g. the village or health centre name.

3 Translation

Transcriptions will be typed or copied into new Word files for translation, and **labelled** with the interview or FGD ID followed by ‘TranscriptTranslated’, e.g. ‘FGDDS23M03TranscriptTranslated.doc’.

Files in local languages will be translated into English by a member of the research team. The text in the original language will remain in the document, and the translation will be made beneath each short section of 4-5 lines.

Rather than word-for-word translation, the translator will conduct meaning-based translation:



From Larson (1998)

Sections of text in each translated transcript will be double-checked for accuracy of translation by the social science team leader.

4 Setting up the project in NVivo

4.1 Importing internals

Contact summaries, transcripts, any audio files and photographs will be imported into a **Master Project (Version 1)** in NVivo 8 as ‘read only’ files, under folders in the ‘internals’ area. Folders will be named:

- Contact Summaries
- Translated transcripts
- Audio
- Images

The files will either be imported by right clicking in the *List View* for the relevant internals folder and selecting ‘import internals’ and navigating to the file(s) to import, or new files will be made in the relevant folder in NVivo by right clicking in the *List View* for that folder and selecting ‘new internal’, selecting the type and copying and pasting the contents of an existing file into the NVivo document.

4.2 Importing quantitative data

Demographics and other quantitative data collected about each interviewee or focus group will be put into an excel spreadsheet with the IDNO of the participants in the left column. Attribute values will be checked for consistency (e.g. spellings and acronyms). Ages will be kept in one column, and an additional column with age ranges will be created and filled according to each participant/overall FGD characteristic. The file will be saved as ‘unicode text’ and will then be imported to NVivo as a **casebook**, *tools > casebook > import casebook > select ‘create unmatched cases’*. Once in NVivo, all data sources for each case (first contact summaries, then translated transcripts, then audio files, etc.) will be **attached to the casebook**: *right click on each contact summary and then each transcript > code sources > at existing nodes > click on cases > tick by the case with the corresponding IDNO prefix to attach to > ok*. For example, you would attach the transcript ‘FGDDS23M03TranscriptTranslated.doc’ to the case with the IDNO “FGDDS23M03”.

4.3 Managing the NVivo project

The analysis team will code transcripts from their position stored as **cases**. This will enable the coder to read the contact summary at the top of the case, followed by the transcript. This also minimises likelihood of editing original transcripts as cases are read-only.

A **password** will be set up to protect this project. In NVivo, this is done by going to *file > project properties > passwords*. If more than one researcher is analysing the data in NVivo,

each team member will be listed as a **user** for the project, by going to *tools > options > add new users*. In order to track the user, activate the ‘initials’ prompt on opening, by going to *tools > options > prompt for user*.

Copies of the project (with all data available to date) will then be made for each team member, labelled with the initials of the team member, e.g. ‘ACT Formative project CC.nvp’, who will then use their own initials when logging onto the project. Projects will be saved to each member’s laptop C:/ drive but backup copies will be made to external hard drives each day, identified by the date, e.g. ‘ACT Formative project CC 020509.nvp’.

5 Stating research concern and theoretical perspective

Those conducting the data analysis will discuss their research concerns for the specific study and their own theoretical perspectives. Each member will then write a ‘memo’ in their own project, listing the objectives of this research and their own standpoint. This will be saved in the **memos** section in NVivo, named with the researcher initials. For example, ‘Research objectives and standpoint CC’:

- Research objective: to understand why health workers who have RDTs available often do not use them
- My theoretical position: broadly ‘*realist*’, seeking underlying influences on a particular human phenomenon, with an emphasis on *praxis*: what people actually do
- My analytical approach aims to understand a research concern with a ‘bottom-up’ method, attempting to understand the experiences and perspectives of the participants by coding and categorising their stories and responses in relation to those of other participants and building a theoretical framework that encompasses the themes developed from these categories together with wider theory

This will form part of the reflexive process in coding and analysing data and will contribute to the understanding of other members of the team with regards coding developed by other individuals.

6 Initial coding

6.1 Selection of transcripts

All team members will code the same 2-3 transcripts for each sub-group, for example 2-3 health worker in-depth interviews and 2-3 community focus group discussions. Coding will be conducted using **cases** rather than the original transcript. Team members will work independently on the same cases as the first step to generate a coding template for remaining data. The chosen transcripts will be selected at random and specified, for example:

To be coded under one parent tree node, 'Drug Shop IDIs'

Coding for 2-3 IDIs with DSs

To be coded under another parent tree node, 'Community FGDs'

Coding for 2-3 FGDs with Communities

To be coded under another parent tree node, 'Stakeholder IDIs'

Coding for 2-3 IDIs with stakeholders

6.2 Selection of relevant text

Coders will read the entire transcript prior to any coding. Only relevant text will be coded. Following Auerbach and Silverstein (2003), criteria for relevant text will be:

- Does it relate to your research concern?
- Does it help you to understand your participants better? Does it clarify your thinking?
- Does it simply seem important, even if you can't say why?

6.3 Coding (repeating) ideas

The method for coding will be to read the data line by line, trying to see the underlying meaning or concepts behind the statement (Strauss & Corbin, 1990). Each line, or few lines, will be labelled according to the idea(s) in the transcript, using a short title, such as 'want to serve community'. These ideas are called *nodes* in NVivo. One sentence may represent several ideas and that sentence may be coded to several nodes. For each node, a description will be created in NVivo to describe in more detail what should be coded at this node, e.g. 'this node contains lines of data when the participant talks about wanting to help the community, or public service'. When the same idea appears again, this will be coded to the same node, creating a list of **repeating ideas**.

For initial analysis, nodes will be kept in the *tree nodes* area, under a parent node with the name of the coder.

6.4 Coding themes

Themes may begin to emerge from this coding process. A theme is an implicit topic that organises a group of repeating ideas. The list of repeating ideas that group to form a theme will be listed under a *parent node* which is named according to the implicit topic underlying all the ideas in the list. Further repeating ideas may be added to this parent node, and they may be moved to other parent nodes, or remain unallocated to a theme.

6.5 Coding theoretical constructs

At this point, **theoretical constructs** may become apparent. These are more abstract ideas that arise from groups of themes. They may come directly from the ideas in the data, or from ideas from reading other literature on the research topic or themes that have been found in the data. They may also be informed by the initial conceptual framework for the study. When theoretical constructs are made, **memos** will be created to describe the rationale for creating the theoretical construct.

An initial coding tree may look something like this,

Clare's Coding

Health worker IDIs

- Public service role strain
 - o Lack of agency
 - Expected to work anytime
 - Patient abuse
 - Unfair selection of staff for training
 - You are forgotten if on village rotation
 - Policy makers forget COs
 - o Commitment
 - Want to serve community
 - Work in spite of low salary
 - If few staff, should keep working
 - We don't expect patients to say thank you
- Another theoretical construct
 - o Another theme
 - Another repeating idea

7 Creating coding template

After the initial transcripts are coded by each team member independently, the separate projects coded by each team member will be sent to the senior social scientist on the project, or the ACT Consortium social scientist, for review and feedback, and the team will discuss their different approaches to the data. At this point, further transcripts may need to be analysed if the team are aware of further ideas that arose in other interviews/FGDs that are not covered in their initial coding trees.

A **single ‘template’** coding structure will be agreed upon, taken from the different coding of each of the team members. This will be done by:

First, looking at each project separately to find coding in common, and differences

Second, deciding which nodes best describe the data: discuss in the team, with advice from CC

Third, merging all three projects together into one **Master Project (Version 2)**, keeping all coding from each team member: *open new project > file > import project > for duplicate items, select ‘create new item’ > browse for existing project > open.* This stage will be conducted by the senior social scientist on the project or the ACT Consortium social scientist.

Fourthly, merging all nodes to be kept, under agreed names, and deleting all nodes not needed (e.g. if alternative node trees are selected). This should keep the existing coding so it does not have to be repeated. This stage will be conducted by the senior social scientist on the project or the ACT Consortium social scientist.

8 Code book and additional nodes

Once the coding template is defined for each population group (CDD IDIs, community FGDs, institutional IDIs) one of two options will be taken. Option A: a code book will be created to describe the purpose of each code. This will be done in NVivo for each node *right click on node > properties > description*. Six components will constitute the code book, following MacQueen et al. (2008)

Code: PATIENT'S FAULT

Brief definition: Respondent blames patients

Full definition: Patients may be blamed, and/or blame themselves for negative health outcomes, for example if treatment fails patients may be blamed for coming to the health worker too late, or not taking a complete course.

When to use: Code when health workers, stake holders or community members blame patients for different health outcomes

When not to use: Do not use this node if there is no blame apportioned

Example: " That patient would not have had room to complain because it was his fault, he passed on the doctor and went to choose a health worker he liked himself"

Option B: codes will be longer and more descriptive, enabling coders to understand the purpose of the code, for example, 'we have changed practice because of the RDT'. In this case, it may be necessary to expand the area for displaying nodes. This can be done by selecting *view* from the toolbar and selecting *child node headers* and adjusting the size of the name display. The *child node headers* can then be removed and the larger space for the node names will remain.

Once the coding template is decided and descriptions have been made in the Master Project, remaining data will be imported into a new **Master Project (3)** as *read-only* documents. Copies will then be made for each member of the coding team.

Remaining transcripts will then be coded by different members of the coding team, according to the template developed. **The template will not be changed.** However, new ideas, themes and theoretical constructs may emerge, and the coder may want to rearrange the template. New codes and trees will be made under a parent node with the team member's name and ideas for changes to the template will be kept in a memo by the individual coder.

9 Reviewing and revising coding

When further transcripts have been coded by different team members, the projects containing the coding of these individual coders will be merged, including any additional nodes and memos added by each individual coder. This will create Master Project (4). *Open blank project > file > import project > for duplicate items, select 'merge duplicate items' > browse for new project > open.* This will be conducted by the senior social scientist from the project or the ACT Consortium social scientist.

The coding at the shared template nodes will be **checked for consistency** of coding by each team member. The additional nodes developed by each researcher will be explored, and trees adjusted to fit additional nodes, and moved around after discussion of notes made in memos by team members. The changes will be saved as Master Project (5) and further coding will continue until all transcripts have been coded. At this point, all projects from the team of coders will be merged and should contain a finalised version of trees containing *repeating idea* nodes and *theme* nodes, with potentially some *theoretical construct* nodes.

10 Development of theoretical constructs

The fully coded Master Project will then be explored for theoretical constructs by the senior social scientist for the project or the ACT Consortium social scientist in conjunction with the team. This will include the running of queries, looking at any differences in the concepts emerging according to the district, and different characteristics of participants (including age, sex, qualification, occupation, area of residence etc).

The finalised coding tree (and earlier versions at points in time appropriate for the study) will be **exported to Microsoft Excel** for sharing with Principal Investigators. Navigate to the nodes window then, on the toolbar, select *View > expand/collapse > expand all tree nodes* then *Project > export list*.

11 Constructing theoretical narrative

The social science analysis team will work together to develop a narrative that bridges the original research concerns with the participants' subjective experiences. The aim of the theoretical narrative will be to retell the participants' stories in terms of the theoretical constructs. This can be structured in a results section of the report/paper using the structure of the tree nodes. The findings will be related to wider theory and literature in the topic of interest. This will involve relating the findings to the original conceptual framework, which may be adjusted or replaced by a new framework based on the evidence from the study. Drawing from this narrative, key beliefs and attitudes that underlie current behaviour, or that are expected to affect the introduction of a proposed intervention will be identified. Messages to target these beliefs, attitudes and behaviours will be suggested.

12 Feedback on findings from participants

Presentation of preliminary findings to participants of research is recommended for both ethical and academic reasons. Participants have contributed time, and potentially shared confidential or personal information during interviews and group discussions, often on a topic that is important in their lives or work. Presenting preliminary findings gives the opportunity for participants to know what was done with the information they shared, and what you plan to do with this. It also gives the opportunity to validate findings: do participants feel your analysis is a good reflection of the situation? In addition, participants may help to explain findings from both qualitative and quantitative research. Preliminary findings can then be revised in the light of this feedback.

Common approaches to giving feedback include written reports, didactic presentations and group discussions. Written reports are often least effective at reaching the objectives outlined above. Presentations enable a large group to hear the findings and have the potential for discussion and feedback during the presentation. Group discussions allow a more in-depth critique of the findings, although fewer findings are likely to be discussed in any one focus group.

Scheduling feedback from participants should be a priority when planning the analysis, and time and resources need to be allowed for this.

13 Writing up

The format for qualitative research publications varies. For academic journals, the length of papers is often restricted. This gives an opportunity to ensure that writing is precise and quotes are carefully selected, although this can be a challenge. The theoretical narrative will form the main body of the paper, but it is important to put this into the context of why, when, where, with whom and how the study was undertaken. A useful checklist for this has been developed by Tong et al. (2007).

Table 1 Consolidated criteria for reporting qualitative studies (COREQ): 32-item checklist

No	Item	Guide questions/description
Domain 1: Research team and reflexivity		
Personal Characteristics		
1.	Interviewer/facilitator	Which author/s conducted the interview or focus group?
2.	Credentials	What were the researcher's credentials? <i>E.g. PhD, MD</i>
3.	Occupation	What was their occupation at the time of the study?
4.	Gender	Was the researcher male or female?
5.	Experience and training	What experience or training did the researcher have?
Relationship with participants		
6.	Relationship established	Was a relationship established prior to study commencement?
7.	Participant knowledge of the interviewer	What did the participants know about the researcher? <i>e.g. personal goals, reasons for doing the research</i>
8.	Interviewer characteristics	What characteristics were reported about the interviewer/facilitator? <i>e.g. Bias, assumptions, reasons and interests in the research topic</i>
Domain 2: study design		
Theoretical framework		
9.	Methodological orientation and Theory	What methodological orientation was stated to underpin the study? <i>e.g. grounded theory, discourse analysis, ethnography, phenomenology, content analysis</i>
Participant selection		
10.	Sampling	How were participants selected? <i>e.g. purposive, convenience, consecutive, snowball</i>
11.	Method of approach	How were participants approached? <i>e.g. face-to-face, telephone, mail, email</i>
12.	Sample size	How many participants were in the study?
13.	Non-participation	How many people refused to participate or dropped out? Reasons?
Setting		
14.	Setting of data collection	Where was the data collected? <i>e.g. home, clinic, workplace</i>
15.	Presence of non-participants	Was anyone else present besides the participants and researchers?
16.	Description of sample	What are the important characteristics of the sample? <i>e.g. demographic data, date</i>
Data collection		
17.	Interview guide	Were questions, prompts, guides provided by the authors? Was it pilot tested?
18.	Repeat interviews	Were repeat interviews carried out? If yes, how many?
19.	Audio/visual recording	Did the research use audio or visual recording to collect the data?
20.	Field notes	Were field notes made during and/or after the interview or focus group?
21.	Duration	What was the duration of the interviews or focus group?
22.	Data saturation	Was data saturation discussed?
23.	Transcripts returned	Were transcripts returned to participants for comment and/or correction?
Domain 3: analysis and findings		
Data analysis		
24.	Number of data coders	How many data coders coded the data?
25.	Description of the coding tree	Did authors provide a description of the coding tree?
26.	Derivation of themes	Were themes identified in advance or derived from the data?
27.	Software	What software, if applicable, was used to manage the data?
28.	Participant checking	Did participants provide feedback on the findings?
Reporting		
29.	Quotations presented	Were participant quotations presented to illustrate the themes / findings? Was each quotation identified? <i>e.g. participant number</i>
30.	Data and findings consistent	Was there consistency between the data presented and the findings?
31.	Clarity of major themes	Were major themes clearly presented in the findings?
32.	Clarity of minor themes	Is there a description of diverse cases or discussion of minor themes?

Taken from Tong et al., 2007

References

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