Special Article

The Ethnographic Research Method in Community Health: **Current Needs for Qualitative approaches**

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Abstract

Background: Recently more qualitative research articles appear in the field of health sciences offering triangulated methodology and multifaceted approaches. However, the ethnographic method is not yet sufficiently used, although there is evidence of significant effectiveness mainly in the field of intercultural research and community health.

Aim: This study presents the ethnographic research method and its use in the community health context. In particular, it highlights the philosophical framework and the rationale in which the specific method is developed as well as practical elements for its application.

Methods: This was a literature review in conventional libraries but also in international digital scientific databases such as Scopus, PubMed, Google Scholar and EBSCO.

Results: Recent research highlights the importance and usefulness of this research method, which offers an interdisciplinary approach to social issues related to Community Health Care. The issue of self-reflexivity, the leading role of the researcher in the process and the special way of writing the results are also illustrated. Furthermore, it is worth noting that current literature raises issues of subjectivity and objectivity in qualitative research methods.

Conclusions: Overall, there is considerable potential for enriching active methods in scientific research, and in particular in Community Health, which is gradually evolving internationally.

Key-Words: Ethnography, self-reflexivity, community health, ethnographic method.

Introduction

Current research often refers to the need of triangulated approaches, which qualitative data collection (Aguilar Solano, 2020). It is true that many scientific studies are based mainly on the quantitative approach, ignoring the benefits of qualitative methods such as the ethnographic or otherwise known as fieldwork. The ethnographic research approach developed mainly by Ethnologists Anthropologists and involved the researcher's onsite participatory observation of in-depth study of social groups (Lewis, 2021). In this way scientists studied the different Other and the foundations of diversity were laid in the field of research (Johnstone, 2016; Mammola et al., 2021). In the 18th century, diversity was studied from the view of the national origin, while today, with the multicultural formation of societies, we can see heterogeneous communities. Therefore,

patient has become the Other in comparison with the healthy population. In the past the different Other was the foreigner but today we distinguish two categories of diversity; the internal and the external diversity. The external diversity includes refugees and immigrants who live in another country and consist a minority with its own individual characteristics. On the other hand, internal diversity consists of ethnic groups with specific features like people with disabilities, communities of different religious beliefs, people with different sexual orientation or even specific choices in their everyday life. This cultural diversity of in and out, needs special approach during the research process (Argyriadis & Argyriadi, 2019).

Ethnography can be applied to healthcare issues in numerous ways. It has been seen as a way of accessing beliefs and practices, allowing these to be viewed in the context in which they occur and thereby aiding understanding of behaviour surrounding health and illness. Nursing science focuses on the holistic and individualized approach of the patient, something that is best achieved through a qualitative approach and analysis of each case. Each patient is evaluated following exactly the same steps and methods as in research. The nurse uses observation, interviews and in-depth discussions in order to evaluate each case and plan the intervention plan. Ethnography is exactly the same process in scientific research, something that health professionals are familiar with. The rationale for the establishment and promotion of the ethnographic approach in community health emerges due to the multicultural dimension of the field of health, while at the same time this method offers the possibility for interaction and in-depth study of the human experience (Green & Thorogood, 2018). In particular, for the study of internal diversity which includes health and disease in combination with the particular social and cultural backgrounds of each community, this method is considered the most appropriate. Taking into account the above, there is a significant research gap in studies that make use of the ethnographic method for the study of issues related to health and disease, mainly by nurses and doctors.

Features of the method: The ultimate goal of the research projects in which the ethnographic method is applied, is the in-depth investigation of the phenomena and the fact itself as it is experienced symbolically and naturally in a specific time-place context (Brannen, 2017). In this process, the researcher is not on and off the field as a non-participating observer, but he works inside the context with deep understanding. Thus, another feature of the method is the focus on a relatively smaller number of cases compared to the quantitative method, since the general trends of the phenomenon under investigation are not sought, but the formation of a more complete picture of the cases is studied (Johnstone, 2016). The method deviates from the quantitative approach and the trace of the average value, since each case is of interest to the researcher. This reasoning fits perfectly with health sciences which have a humanitarian aspect and they focus in each case individually with the same intention to provide care (Delamont, 2016; Mammola et al., 2021). The rationale of the ethnographic method does not focus, like other research methods, on the results but mainly on the process itself. It is

important that the researcher, actively participating in the process, experiencing the situation and knowing in depth each participant, succeeds through the process to gather information and understand the problem (Argyriadis, 2016). Thus, through data collection there is a symbolic exchange of material artifacts, meanings and data that complete the puzzle of the research. At the same time the data themselves offer the unique experience and knowledge to the researcher and on the other hand the possibility of multiple interpretations through scientific data according to the methods of content analysis (Brannen, 2017). Ethnographic research is also widely known as fieldwork which is a type of approach that enables the researcher to observe the subject in the environment that lives (Gullion, 2021). For this reason, community health is a field where ethnography can be successfully applied. Each community and any clinical context are structures in which the study of the personal experience and history of each participant is facilitated (Mammola et al., 2021). This method also offers the opportunity to the researchers to develop a personal relationship with the participants and collect experiential data in a variety of ways. This whole process offers multiple benefits in terms of understanding the phenomena and shaping the research in the process. (Giddens & Sutton, 2017). Research shows that each individual, family or community experiences health and disease in its own particular way that depends on the socio-cultural context in which he/she is born and developed. Both health experience and self-management of health and disease are culturally constructed (Argyriadis, 2016). This construction emerges through two conceptual systems, the biological and the metaphysical. Over time, a competitive dipole between quantitative and qualitative methods has also been constructed, and history itself has shown that both approaches are important. However, there is a reduced use of qualitative approaches in the health sciences and in particular methods such as field research that includes tools such as discussion, interview, participatory observation, etc. (Gullion, 2021). There are two main ingredients that a researcher has to be familiar with, in order to design an ethnographic study. Reflexivity, a relatively recent addition to the philosophical matrix of qualitative research that signifies the researcher's part in the social world. Thus, the researcher can him/herself can become one of the more refined research tools in the process of data collectionsubjects' responses to the presence of the researcher, and the researchers response to the context, are as valuable as any other aspect of the study. Bias and subjectivity are a risk, but it allows a richer vein of data to be appraised, and is valuable in contexts in which "natural history" is central (Hodgson, 2000). The second one is the participatory observation. This is the process in which a researcher, puts himself/herself, his/her whole body, his/her whole social situation, to the set of contingencies that play upon a set of individuals, so that he is close to them while they are responding to what life does to them, not just to listen to what they talk about, but pick up their minor grunts and groans as they respond to their situation (Goffman, 1989). The core of ethnography is observation of the group from the inside. Field notes are taken to record these observations while immersed in the setting; they form the basis of the final written ethnography. They are usually written by hand, but other solutions such as voice recordings can also be very useful alternatives. After the data collection is completed, their analysis follows. Loblay et al., (2021), identified five purposes of content analysis. The researcher proceeds with description of the contents of the communication, checks the hypotheses related to the content of the messages, compares the contents with the real world, evaluates the image of the social subjects and draws subjective conclusions and finally interpretations. Data analysis should focus on the words, symbols, social representations, stereotypes and deeper cultural structures that govern the respondents' responses.

The main difficulty of this method is the issue of subjectivity, in other words the fact that the research findings are essentially interpretations of the data, so they can not be considered as the only possible or as objective (Giddens & Sutton, 2017). Many experts who have been educated by quantitative approaches often criticize methods such as ethnography on the issue of validity, reliability, and objectivity of results. The answer that can be given to a possible critique is that no research method can offer absolute objectivity in social or psychological issues. The targeting of this method does not focus on the extraction of absolute and quantified results but on the contrary, in the recording of human experience. Moreover, it aims to the understanding of the diversity and the education of the wider social context or the experts in a specific situation. At the same time, the very pursuit of objectivity negates the fact that

it exists. In each social survey the answer given by the participants stems from their personal point of view. Therefore, the focus of the method is on getting to know a situation, highlighting a problem and educating the public on a phenomenon. Within ethnography, the question of objectivity and subjectivity is of crucial importance. In the end, it deals with the most fundamental issues: What is the nature of the knowledge generated? What claims to validity exist (if any)? What consequences will a certain research behaviour have concerning this validity? Health professionals often feel insecure about interpreting data, but ethnography is just that. It shifts the interest from statistics to the researcher and makes him/her responsible for understanding a situation in his / her own space-time context in relation to himself /herself. This is extremely fascinating and interesting in understanding a phenomenon. Recently, many studies have included both quantitative and qualitative data, or we see quantitative ethnographic studies in health sciences. One does not exclude the other in any case, however, it is not possible to study a phenomenon only from the one side. It is important to have a multifaceted study of all phenomena otherwise we make a social discrimination on research methods.

Self-reflexivity in ethnographic research: One of the most interesting aspects of the ethnographic process is self-reflexivity. The idea behind selfreflexivity is that research is not just about observing others, but also yourself (Reed-Danahay, 2021). In particular, during the research process, the researcher interacts with the participants and creates deep relationships of trust in order to collect as much information as possible and on the other hand to penetrate deeper into the field of research by interacting with the participants. The concept of self-reflexivity, however, complements this process by redefining the established prejudices of the researcher who enters the process. So, this endoscopy helps the researcher to get rid of possible prejudices or established perceptions that may affect him and lead him to draw wrong results. Self-reflexivity involves the examination of the researcher's relationships with the participants (Slade et al., 2020). It also involves taking into consideration the traits that he/she has, and how these traits shape the way others may see him/her. Some traits that researchers may consider when reflecting on themselves include gender identity, sexual identity, race, socio-economic status, level of education, religious affiliation, family background and nationality. Reflexivity is especially important when it comes to raising awareness of power dynamics. For example, research participants may view a researcher with a certain level of authority because of the researcher's educational background employment with organizations like a university or the government. Because they view the researcher as an authority figure, participants may not want to reveal certain information that they think could get them in trouble. Even if the assures researcher participants information given will be kept confidential, the fear of being exposed may still be there (The Culture Courier, 2019).

Presentation of the ethnographic findings: The presentation of the findings of an ethnographic study includes the typical structure of a scientific article of qualitative methodology but not only that. The data of ethnographic studies include photographic artifacts, material, recordings, videos, exchange of gifts, symbolic representations, memories and experiences (Urcia, 2021). All this cannot be recorded on paper and cannot be rendered through "wooden" language that is technically used only in scientific texts. Research is conducted primarily to provide new knowledge and answers to important questions with the ultimate goal of improving people's quality of life. Unfortunately, in recent years, scientific research has focused almost exclusively on those who work in academia and have to produce publications in scientific journals. However, the results of an ethnographic study can be presented either in the classic way of writing a scientific article but can still be presented in exhibitions, events involving the wider society, modern digital ways, conferences, symposia and everything else the researcher decides. It is a matter of fact that ethnography is also a process of linking theory to practice and the everyday life. So, the results can improve the community's everyday life both personal and professional (Argyriadis et al., 2021). Ethnographies often do not follow the standard structure of a scientific paper, though like most academic texts, they should have an introduction and conclusion (Gullion, 2021). Many papers begin by describing the historical background of the research, then focus on various themes in turn before concluding. An ethnography may still use a more traditional structure, however, especially when used in combination with other research methods.

The goal of a written ethnography is to provide a rich, authoritative account of the social setting and convince the reader that the observations and interpretations are representative of reality. Ethnography tends to take a less impersonal approach than other research methods. Due to the embedded nature of the work, an ethnography often necessarily involves discussion of personal experiences and feelings during the research.

Conclusions: Through methodological discussion, this article highlights the need to apply the ethnographic method in caring sciences research and especially in the field of community health. Going one-step further, this research approach is considered suitable for data concerning experiences, behaviours and social phenomena of specific population groups, either they are vulnerable or not. Although many health professionals are unfamiliar with this method because they had no previous experience in their undergraduate and postgraduate studies, this can be an interesting challenge for them. Recent literature states that the quantitative study of health issues mainly in the field of mental health and social discrimination is not sufficient so ethnography can either add data to a quantitative approaches or be in itself an autonomous method.

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