Qualitative Research Designs

OUTLINE

Qualitative Research Designs

- · Phenomenological Studies
- · Ethnographic Studies
- · Grounded Theory Studies
- · Historical Studies
- Case Studies
- Action Research Studies

Critiquing Qualitative Research Designs Summary

Nursing Research on the Web Get Involved Activities

Self-Test

OBJECTIVES

On completion of this chapter, you will be prepared to:

- 1. Discuss six common types of qualitative research designs.
- 2. Describe the most important features of these six types of designs.
- 3. Recall the disciplines associated with some of the various qualitative research designs.
- 4. Identify the most common qualitative designs reported in the nursing research literature.
- 5. Critique the design sections of qualitative research studies.

NEW TERMS DEFINED IN THIS CHAPTER

action research
bracketing
case studies
constant comparison
content analysis
ethnographic studies
external criticism

grounded theory studies
historical studies
internal criticism
key informants
participatory action research
phenomenological studies

ou are glancing through an issue of a research journal and see the following title: "Experiencing a Hurricane—Up Close and Personal." As this chapter is being written (September 2005), Hurricane Katrina has just devastated the Gulf coast and New Orleans, Louisiana, in particular. You might decide to read such an article because the title indicates you will be reading a first-person account of the experiences of people who survived that terrible hurricane. Were you able to tell that you would probably be reading a qualitative research article?

Chapter 4 presented an overview of qualitative research. Table 4–2 lists some of the different types of qualitative research.

As you can see in Table 4–2, there are many different types of qualitative research. Try to gain an overall understanding of these different approaches to qualitative research. Do not be discouraged if you feel you do not quite understand all of the information or have difficulty in distinguishing between the various designs. Just try to gain an appreciation of the value of qualitative research to the nursing profession. At some later time, you may be interested in learning more about one or more types of qualitative research. The words *approaches*, *types*, and *designs* are used interchangeably here in discussing qualitative research.

QUALITATIVE RESEARCH DESIGNS

Six common qualitative designs are described in this chapter: phenomenological, ethnographic, grounded theory, historical, case study, and action research. Excerpts from published nursing studies are presented for each of these six types of qualitative research.

Phenomenological Studies

Phenomenological studies examine human experiences through the descriptions provided by the people involved. These experiences are called *lived experiences*. The goal of phenomenological studies is to describe the meaning that experiences hold for each subject. This type of research is used to study areas in which there is little knowledge (Donalek, 2004).

In phenomenological research, respondents are asked to describe their experiences as they perceive them. They may write about their experiences, but information is generally obtained through interviews.

To understand the lived experience from the vantage point of the subject, the researcher must take into account her or his own beliefs and feeling. The researcher must first identify what she or he expects to discover and then deliberately put aside these ideas; this process is called **bracketing**. Only when the researcher puts aside her or his own ideas about the phenomenon is it possible to see the experience from the eyes of the person who has lived the experience.

Phenomenological research would ask a question such as, "What is it like for a mother to live with a teenage child who is dying of cancer?" The researcher might perceive that she, herself, would feel very hopeless and frightened. These feelings would need to be identified and then put aside to listen to what the mother is saying about how she is living through this experience. It is possible that this mother has discovered an important reason for living, whereas previously she had not felt needed anymore by her teenage child.

Parse, Coyne, and Smith (1985) wrote that the analysis of data from these types of studies requires that the researcher "dwell with the subjects' descriptions in quiet contemplation" (p. 5). The researcher then tries to uncover the meaning of the lived experience for each subject. Themes and patterns are sought in the data. Data collection and data analysis occur simultaneously.

Phenomenological research methods are very different from the methods used in quantitative research. Mariano (1990) asserted that phenomenology could be difficult to understand, particularly if a person has had a limited background in philosophy. Although phenomenological research has sometimes been viewed as so-called soft science, Streubert and Carpenter (2002) contended that this research method is rigorous, critical, and systematic. They called for the beginning researcher to seek a mentor who has experience in phenomenological research.

Donalek (2004) wrote that conducting qualitative research is "a challenging, exciting, and at times, exhaustive process" (p. 517). However, she asserted that the final research product might be very satisfying for the researcher.

Phenomenological Study

Daly (2005) studied the lived experiences of mothers of suicidal adolescents. She contended that, unfortunately, the mother's experience is often the hidden dimension in the family. Unstructured interviews were conducted with 6 mothers living with suicidal adolescents. Six themes were identified: failure as a good mother, the ultimate rejection, feeling alone in the struggle, helplessness and power-lessness in the struggle, cautious parenting, and keeping an emotional distance.

Ethnographic Studies

Ethnographic studies involve the collection and analysis of data about cultural groups. Agar (1986) described ethnography as "encountering alien worlds and making sense of them" (p. 12). He further stated that ethnographers try to show how actions in one world make sense from the point of view of another world. Cameron (1990) wrote that ethnography means "learning from people" (p. 5). According to Leininger (1985), ethnography can be defined as "the systematic process of observing, detailing, describing, documenting, and analyzing the lifeways or particular patterns of a culture (or subculture) in order to grasp the lifeways or patterns of the people in their familiar environment" (p. 35).

In ethnographic research, the researcher frequently lives with the people and becomes a part of their culture. The researcher explores with the people their rituals and customs. An entire cultural group may be studied or a subgroup in the culture. The term *culture* may be used in the broad sense to mean an entire tribe of Indians, for example, or in a more narrow sense to mean one nursing care unit.

Ethnographers interview people who are most knowledgeable about the culture. These people are called **key informants**. Data are generally collected through participant observation and interviews. As discussed under phenomenological studies, researchers

bracket, or make explicit, their own personal biases and beliefs, set them aside, and then try to understand the daily lives of individuals as they live them. Data collection and analysis occur simultaneously. As understanding of the data occurs, new questions emerge. The end purpose of ethnography is the development of cultural theories.

Although ethnography is relatively new to nurse researchers, the method has been used in anthropological research for a long time. Margaret Mead (1929) used it to study the Samoans. Ethnography has been the principal method used by anthropologists to study people all over the world. Ethnographers study how people live and how they communicate with each other.

The use of the ethnographic method in nursing research began in the 1960s. Ethnography is useful in nursing because nurse researchers can view nursing and health care in the context in which it occurs.

Ethnographic Study

Gance-Cleveland (2004) examined the features, critical attributes, processes, and benefits of school-based support groups for adolescents with an addicted parent. Ethnographic methods were used to gather data. Participant observations were conducted weekly at two high schools over one semester. Interviews were conducted with program administrators, school administrators, group co-facilitators, and participants. School-based support group participation was found to enhance self-knowledge and led to self-care and self-healing.

Grounded Theory Studies

Grounded theory is a qualitative research approach developed by two sociologists, Glaser and Strauss (1967). **Grounded theory studies** are studies in which data are collected and analyzed and then a theory is developed that is *grounded* in the data. Some of the terms used by Glaser and Strauss are difficult for nurses to understand. Leininger (1985) wrote that in 1980 she began to translate their terms into what she called "standard English."

The grounded theory method uses both an inductive and a deductive approach to theory development. According to Field and Morse (1985), "constructs and concepts are grounded in the data and hypotheses are tested as they arise from the research" (p. 23). These authors argued that given the state of development of nursing theories, theory generation is more critical than theory testing for the development of nursing knowledge.

According to Jacelon and O'Dell (2005), grounded theory is an excellent method for understanding the processes through which patients learn to manage new or chronic health problems. Each individual may manage the health problem in a different way. For example a nurse researcher might be interested in how young women deal with premenstrual syndrome (PMS). In talking to a group of these women, one woman might seem to be distressed at the mention of PMS and not want to discuss it at all. Another woman might seem embarrassed but is willing to ask questions of the researcher. A third young woman might seem to be perfectly comfortable talking

about PMS and is willing to share her experiences with the other women. Each of these women responded to the topic in a unique way.

Rather than using probability sampling procedures, purposeful sampling is used (see Chapter 11). The researcher looks for certain subjects who will be able to shed new light on the phenomenon being studied. Diversity rather than similarity is sought in the people that are sampled.

Data are gathered in naturalistic settings (field settings). Data collection primarily consists of participant observation and interviews, and data are recorded through handwritten notes and tape recordings. Data collection and data analysis occur simultaneously. A process called **constant comparison** is used, in which data are constantly compared to data that have already been gathered. Pertinent concepts are identified and assigned codes. These codes are constantly reviewed as new interpretations are made of the data. The researcher keeps an open mind and uses an intuitive process in interpreting data. The codes developed frequently are gerunds (words ending in "ing") like *soothing*, *placating*, and *asserting*.

Once concepts have been identified and their relationships specified, the researcher consults the literature to determine if any similar associations have already been uncovered. Consulting the literature for the first time at this stage of a research project is quite different from quantitative methods in which the literature is always consulted early in the research process. Leininger (1985) asserted that a prestudy literature search could lead to "premature closure." This means that the researcher would go into the research setting expecting to find what is reported in the literature. When an instance is found that is similar to that reported in the literature, the researcher would say, "Yes, that's it!" and go home and write the same thing.

Despite the great diversity of the data that are gathered, the grounded theory approach presumes it is possible to discover fundamental patterns in all social life. These patterns are called *basic social processes*.

Grounded theory is more concerned with the generation rather than the testing of hypotheses. The theory that is generated is self-correcting, which means that as data are gathered, adjustments are made to the theory to allow for the interpretation of new data that are obtained.

Although the grounded theory approach was developed by two sociologists, Glaser and Strauss, to study questions in the discipline of sociology, the approach seems quite appropriate to nurse researchers. Nursing is very concerned with social interactions.

Grounded Theory

The grounded theory qualitative method was used by Williams and Irurita (2005) to study the personal control and emotional comfort of hospitalized patients. Interviews were conducted with 40 patients, and 75 hours of field observations were conducted. The basic psychological process identified by the researchers was labeled "optimizing personal control to facilitate emotional comfort." Personal control referred to the ability of patients to influence their environment; emotional comfort was defined as a state of relaxation that affected the physical status of the patient. Personal control was found to be a central feature of emotional comfort.

Historical Studies

Nurses are increasingly interested in establishing a body of nursing knowledge and defining the role of professional nurses. One means of achieving these aims is to examine the roots of nursing through historical research. **Historical studies** concern the identification, location, evaluation, and synthesis of data from the past. Historical research seeks not only to discover the events of the past but to relate these past happenings to the present and to the future. Leininger (1985) wrote, "Without a past, there is no meaning to the present, nor can we develop a sense of ourselves as individuals and as members of groups" (p. 109).

Although there is a need for historical research in nursing, a limited number of nurse researchers have chosen it. According to the noted nursing historian Teresa Christy (1975), nurses are action oriented and have preferred experimental research to historical research. She contended that many nurses think of historical research as more "search than research" (p. 189). But the process of historical research is basically the same as in many other types of scientific research. The problem area or area of interest is clearly identified and the literature is reviewed. Research questions are formulated. Finally, the data are collected and analyzed.

Historical research may be more difficult to conduct than some of the other types of research. Christy wrote that the historical researcher must develop the "curiosity, perseverance, tenacity and skepticism of the detective" (p. 192).

The data for historical research are usually found in documents or in relics and artifacts. Documents may include a wide range of printed material. Relics and artifacts are items of physical evidence. For example, you might examine the types of equipment used by nurses in another time period. Historical data can also be obtained through oral reports. The material may be found in libraries, archives, or in personal collections. Much valuable material has probably been discarded because no one recognized its importance.

The sources of historical data are frequently referred to as primary and secondary sources. *Primary sources* are those that provide firsthand information or direct evidence. *Secondary sources* are secondhand information (or sometimes third or fourth hand). For example, a letter written by Florence Nightingale about nursing care during the Crimean War would be considered a primary source of data. If a friend summarized the information about nursing care during the Crimean War based on a letter she received from Florence Nightingale, this source of information would be considered a secondary source.

Primary sources should be used in historical research when possible. There are many examples of primary sources: oral histories, written records, diaries, eyewitnesses, pictorial sources, and physical evidence. Suppose a nurse researcher wished to examine the practices of nurse midwives during the 1940s. An oral history might be obtained from an older member of the nursing profession who had practiced as a nurse midwife during that time. The researcher might also be able to obtain some of the field notes written by people who had practiced as nurse midwives during the 1940s. Some of the nurses may have kept diary accounts of the events that occurred during that period of their lives. It might also be possible to interview some women who had been cared for by nurse midwives during the 1940s. These women

would be considered eyewitnesses. Some of the women or the nurse midwives might have photographs taken during the birthing events. Finally, it might be possible for the researcher to obtain some equipment used by nurse midwives during that period.

The data for historical research should be subjected to two types of evaluation. These evaluations are called external criticism and internal criticism. **External criticism** is concerned with the authenticity or genuineness of the data and should be considered first. **Internal criticism** examines the accuracy of the data and is considered after the data are considered to be genuine. Whereas external criticism establishes the validity of the data, internal criticism establishes the reliability of the data.

External criticism would seek to determine if a letter was actually written by the person whose signature was contained on the letter. The writing paper might be examined to determine if that type of paper was in existence during the lifetime of the letter writer. False documents, such as a supposed copy of Adolf Hitler's diary, have been uncovered through the process of external criticism. Various methods, including carbon dating, can be used to determine the age of substances such as paper.

Internal criticism of historical data is more difficult to conduct than external criticism. In the case of a written document, internal criticism would evaluate the material contained in the document. Motives and possible biases of the author must be considered in trying to determine if the material is accurate. It might be fairly easy to determine that a certain person was the writer of a letter being examined. It might not be so easy, however, to determine if the letter contained an accurate recording of events as they actually happened.

Although nurse researchers have conducted only a limited number of historical studies, there seems to be a growing interest in historical research, particularly among doctoral candidates who are writing dissertations. In 1993 the first issue of *Nursing History Review* was published. Members of the American Association for the History of Nursing (AAHN) receive the journal as a benefit of membership in the organization. The URL for the AAHN is http://www.aahn.org. The Web site states "Nursing history is not an ornament to be displayed on anniversary days, nor does it consist of only happy stories to be recalled and retold on special occasions. Nursing history is a vivid testimony, meant to incite, instruct and inspire today's nurses as they bravely trod the winding path of a reinvented health care system."

Many historical studies have focused on nursing leaders. There seem to have been few historical studies on nursing practice. It is hoped that historical research will expand and nursing will be provided with a recorded account of the significant events and developments of nursing practice as well as those of the nursing profession. As interest in historical nursing research increases, nursing archives, which are repositories of nursing memorabilia, are being established throughout the United States. Try to visit one of these storehouses of nursing history.

Case Studies

Case studies are in-depth examinations of people or groups of people. A case study could also examine an institution, such as hospice care for the dying. The case method has its roots in sociology and has also been used a great deal in anthropology,

Historical Study

Oral histories were gathered from 8 nurses who were employed between 1951 and 1965 in a Virginia state hospital (Harmon, 2005). These nurses were now retired and had between 12 and 46 years of psychiatric nursing experience. The researcher wanted to describe the experiences of these nurses who practiced in a state mental hospital before and during the introduction of antipsychotic medications. They expressed resignation and frustration while trying to provide care despite crowded wards and inadequate personnel and supplies. The nurses indicated that they focused on the patient's body instead of on the patient's mind. The camaraderie they experienced with other nurses helped them continue in their positions, despite what they felt to be a "thankless job."

law, and medicine. In medicine, case studies have frequently been concerned with a particular disease. In nursing, the case study approach might be used to answer a question such as "How do the nurse and patient manage nausea associated with chemotherapy?" Jacelon and O'Dell (2005) have proposed the use of case studies to explore real clinical situations in depth.

A case study may be considered as quantitative or qualitative research depending on the purpose of the study and the design chosen by the researcher. As is true of other types of qualitative studies, for a case study to be considered as a qualitative study, the researcher must be interested in the meaning of experiences to the subjects themselves, rather than in generalizing results to other groups of people. Case studies are not used to test hypotheses, but hypotheses may be generated from case studies (Younger, 1985).

Patricia Benner is a qualitative researcher who has been interested in how a nurse moves from being a novice to an expert nurse. She has used the case study approach extensively. She contended that case studies help us formalize experiential knowledge and thus promote quality nursing care (Benner, 1983).

Data may be collected in case studies through various means such as questionnaires, interviews, observations, or written accounts by the subjects. A nurse researcher might be interested in how people with diabetes respond to an insulin pump. One person or a group of people with diabetes could be studied for a time to determine their responses to the use of an insulin pump. Diaries might be used for the day-to-day recording of information. The nurse researcher would then analyze these diaries and try to interpret the written comments.

Content analysis is used in evaluating the data from case studies. **Content analysis** involves the examination of communication messages. The researcher searches for patterns and themes. After reading the diaries of the individuals who are using insulin pumps, the nurse researcher might come up with themes such as: "freedom from rigid schedule," "more normal life," and "release from self-inflicted pain."

When subjects are chosen for case studies, care must be taken in the selection process. In the previously discussed example, the researcher should avoid choosing only those clients who are expected to respond favorably or unfavorably to the insulin pump.

Case studies are time consuming and may be quite costly. Additionally, subject dropout may occur during this type of study. Whenever a study is carried out over an extended period, loss of subjects must be considered. A person may move from the locality or simply decide to discontinue participation in the study.

Case Study

A case study approach was used to study the roles of perioperative nurses in Ireland (McGarvey, Chambers, & Boore, 2004). Data were collected in three different hospitals during 358 hours of observation and from 35 nurses during 34 hours of interviews. Nurses used a range of coping mechanisms to manage the dissonance they felt between what was considered to be ideal and what could realistically be done in the operating department. Nursing behavior was "administratively modeled by the nursing hierarchy and negatively reinforced by the medical profession" (McGarvey et al., 2004, p. 1119).

Action Research Studies

Action research is a type of qualitative research that seeks action to improve practice and study the effects of the action that was taken (Streubert & Carpenter, 2002). Solutions are sought to practice problems in one particular hospital or health care setting. There is no goal of trying to generalize the findings of the study, as is the case in quantitative research studies. In action research, the implementation of solutions occurs as an actual part of the research process. There is no delay in implementation of the solutions.

Action research became popular in the 1940s. Kurt Lewin (1946) was influential in spreading action research. He came interested in helping social workers improve their practice. Although many of you may have heard of Lewin and his contribution to change theory, his involvement in action research is not as well known.

Action Research

Action research was used with staff in one hospice and one nursing home setting in London (Dunckley, Aspinal, Addington-Hall, Hughes, & Higginson, 2005). The purpose of the study was to identify facilitators and barriers to the use of the Palliative Care Outcome Scale (POS). Staff took part in semistructured interviews, completed diaries, and participated in monthly meetings to give their opinions of what they thought were the facilitators and barriers to the implementation of the POS.

Participatory action research (PAR) is a special kind of community-based action research in which there is collaboration between the study participants and the researcher in all steps of the study: determining the problem, the research methods to

use, the analysis of data, and how the study results will be used. The participants and the researcher are co-researchers throughout the entire research study. According to Kelly (2005), PAR provides an opportunity for involving a community "in the development and assessment of a health program" (p. 65).

CRITIQUING QUALITATIVE RESEARCH DESIGNS

Qualitative studies should not be evaluated with the same set of criteria as quantitative studies. It is more difficult to evaluate qualitative studies using a standard set of criteria. Each qualitative method is unique. However, there are some general criteria by which qualitative research can be evaluated. Box 10–1 presents some of these criteria. You may want to read Chapter 4 again ("Overview of Qualitative Research") before examining the evaluation criteria presented in Box 10–1. These criteria concern not only criteria for evaluating specific qualitative designs but also general criteria for evaluating all qualitative research reports.

The beginning researcher may be very reluctant to critique qualitative studies. When unfamiliar with the study topic, the reviewer may believe that she or he lacks the expertise to critique the study. However, a determination can be made of how clearly the research report presents the process of data collection and analysis. The most important issue to consider is whether the data are provided to answer the research questions. Are the researcher's conceptualizations clearly based on the data presented? The reviewer should expect to see examples from the data and then make a judgment about how clearly the researcher has presented the interpretation of the data.

Box 10-1. Guidelines for Critiquing Qualitative Designs

- I. Does the phenomenon lend itself to study by qualitative methods or would a quantitative approach have been more appropriate?
- 2. Does the study focus on the subjective nature of human experience?
- 3. Is the specific qualitative approach named and described?
- 4. Will the study findings have significance for nursing?
- 5. Does the researcher clearly describe how participants were selected?
- 6. How was the sample size determined?
- 7. Is the data collection and recording process fully presented?
- 8. Is it clear how researcher bias in data collection was avoided?
- 9. Is the data analysis method consistent with the purpose and approach of the study?
- 10. Are the study findings clearly presented and study limitations acknowledged?
- 11. Are suggestions made for further research, based on the study findings?

SUMMARY

Nurses are becoming more interested in qualitative research. Qualitative research focuses on gaining insight and understanding about an individual's perception of events and circumstances.

Six common types of qualitative research are phenomenological, ethnographic, grounded theory, historical, case study, and action research.

Phenomenological studies examine human experiences through the descriptions that are provided by the people involved. **Bracketing** is the process in which qualitative researchers put aside their own feelings and beliefs about the phenomena under consideration to keep from biasing their observations.

Ethnographic studies collect data from groups, such as certain cultural groups. Ethnographers frequently live with the people they are studying. Data are collected from **key informants**, who are the people most knowledgeable about the culture.

In **grounded theory studies**, data are collected and analyzed, and then a theory is developed that is *grounded* in the data. A process called **constant comparison** is used, in which data are constantly compared to data that have already been gathered. Pertinent concepts are identified and assigned codes.

Historical studies concern the identification, location, evaluation, and synthesis of data from the past. Historical data should be subjected to both external and internal criticism. **External criticism** is concerned with the authenticity of the data, whereas **internal criticism** is concerned with the accuracy of the data.

Case studies are in-depth examinations of people, groups of people, or institutions. **Content analysis** is the term used to indicate the examination of communication messages obtained in case studies, as well as in other types of qualitative studies.

Action research is a type of qualitative research that seeks action to improve practice and study the effects of the action that was taken. **Participatory action research** (PAR) is a special kind of action research in which there is collaboration between the study participants and the researcher in all steps of the study.

NURSING RESEARCH ON THEWEB

For additional online resources, research activities, and exercises, go to www.prenhall. com/nieswiadomy. Select Chapter 10 from the drop-down menu.

GET INVOLVED ACTIVITIES

- **I.** Each student brings to class a published article that contains a report of a qualitative study. Using these qualitative research articles located in the literature, determine the specific type of qualitative design that was used.
- 2. While searching the literature for a qualitative study, make a list of titles that indicate the study might be a qualitative study (e.g., the title might contain a gerund, such as "becoming" or "transcending").
- 3. Divide into groups and develop an idea for a study in which the grounded theory method or the phenomenological method would be appropriate.

4. Try to obtain a historical research study that focused on the types of uniforms worn by nurses through the years.

SELF-TEST

Circle the letter before the *best* answer:

- 1. Which of the following types of studies is considered a qualitative study?
 - A. Correlational
 - B. Ethnographic
 - C. Comparative
 - D. Methodological
- 2. Grounded theory research was developed by two
 - A. nurses.
 - B. physicians.
 - C. psychologists.
 - D. sociologists.
- 3. Margaret Mead was a researcher from what discipline?
 - A. Anthropology
 - B. Psychology
 - C. Nursing
 - D. Sociology
- 4. Which of the following statements is true concerning the examination of historical research?
 - A. Internal criticism should be considered before external criticism.
 - B. External criticism should be considered before internal criticism.
 - C. Both internal and external criticism should be considered simultaneously.
- 5. Case studies may concern an in-depth examination of
 - A. individuals.
 - B. groups of peoples.
 - C. institutions.
 - D. all of the above.
- **6.** Consider this title: "The Lived Experience of Surviving a Tornado." This title would indicate which of the following types of qualitative research?
 - A. Ethnographic
 - B. Phenomenological
 - C. Historical
 - D. Grounded theory
- 7. The review of the literature in qualitative research is
 - A. never conducted prior to the beginning of the study.
 - B. sometimes conducted prior to the beginning of the study.
 - C. always conducted prior to the beginning of the study.
- **8.** Which type of qualitative research approach would be most appropriate to study nurses' involvement in bringing about a change in the type of forms used to record patient data?
 - A. Action
 - B. Ethnographic
 - C. Phenomenological
 - D. Historical

- **9.** Teresa Christy, a nurse, was involved in what type of qualitative research?
 - A. Action
 - B. Ethnographic
 - C. Historical
 - D. Phenomenological
- 10. Which type or types of qualitative research has or have been conducted by nurses?
 - A. Action
 - B. Ethnographic
 - C. Phenomenological
 - D. Historical
 - E. All of the above

REFERENCES

Agar, M. H. (1986). Speaking of ethnography. Beverly Hills, CA: Sage.

Benner, P. (1983). Uncovering the knowledge embedded in clinical practice. *Image: Journal of Nursing Scholarship*, 19, 36–41.

Cameron, C. (1990). The ethnographic approach: Characteristics and uses in gerontological nursing. *Journal of Gerontological Nursing*, 16(9), 5–7.

Christy, T. (1975). The methodology of historical research. Nursing Research, 24, 189–192.

Daly, P. (2005). Mothers living with suicidal adolescents: A phenomenological study of their experiences. *Journal of Psychosocial Nursing & Mental Health Services*, 43(3), 22–28.

Donalek, J. G. (2004). Demystifying nursing research: Phenomenology as a qualitative research method. *Urologic Nursing*, 24, 516–517.

Dunckley, M., Aspinal, F., Addington-Hall, J. M., Hughes, R., & Higginson, I. J. (2005). A research study to identify facilitators and barriers to outcome measure implementation. *International Journal of Palliative Nursing*, 11, 218–225.

Field, P. A., & Morse, J. M. (1985). *Nursing research: The application of qualitative approaches*. Rockville, MD: Aspen.

Gance-Cleveland, B. (2004). Qualitative evaluation of a school-based support group for adolescents with an addicted parent. *Nursing Research*, *53*, 379–386.

Glaser, B. G., & Strauss, A. C. (1967). The discovery of grounded theory: Strategies for qualitative research. New York: Aldine.

Harmon, R. B. (2005). Nursing care in a state hospital before and during the introduction of antipsychotics, 1950–1963. *Issues in Mental Health Nursing*, 26, 257–279.

Jacelon, C. S., & O'Dell, K. K. (2005). Case and grounded theory as qualitative research methods. *Urologic Nursing*, 25, 49–52.

Kelly, P. J. (2005). Practical suggestions for community interventions using participatory action research. *Public Health Nursing*, 22, 65–73.

Leininger, M. M. (Ed.). (1985). *Qualitative research methods in nursing*. Orlando, FL: Grune & Stratton.

Lewin, K. (1946). Action research and minority problems. Journal of Social Issues, 2(4), 34-46.

Mariano, C. (1990). Qualitative research: Instructional strategies and curricular considerations. Nursing & Health Care, 11, 354–359.

McGarvey, H. E., Chambers, M. G., & Boore, J. R. (2004). The influence of context on role. *AORN Journal*, 80, 1103–1120.

Mead, M. (1929). Coming of age in Samoa. New York: New American Library.

O'Connell, K. (2000). If you call me names, I'll call you numbers. *Journal of Professional Nursing*, 16, 74.

Parse, R. R., Coyne, A. B., & Smith, M. J. (1985). *Nursing research: Qualitative methods*. Bowie, MD: Brady.

184

- Streubert, H. J., & Carpenter, D. R. (2002). Qualitative research in nursing: Advancing the humanistic imperative (3rd ed.). Philadelphia: Lippincott Williams & Wilkins.
- Williams. A. M., & Irurita, V. F. (2005). Enhancing the therapeutic potential of hospital environments by increasing the personal control and emotional comfort of hospitalized patients. *Applied Nursing Research*, *18*, 22–28.
- Younger, J. (1985). Practical approaches to clinical research: The case study. *Pediatric Nursing*, 11, 137.