LISTENING TO OUR COMMUNITIES

A Guide on Data Analysis

Sexual Assault
DEMONSTRATION INITIATIVE
Enhancing Sexual Assault Services

Listening To Our Communities

A Guide on Data Analysis

This guide is part of the *National Sexual Assault Demonstration Initiative Toolkit* on community assessment approaches to support the growth of sexual assault services within multi-service programs. It includes tips for analyzing interviews and groups to make sure that community stories are captured effectively. Additional tools for conducting focus groups and interviews are also available as part of this toolkit at www.nsvrc.org.

Introduction

Qualitative research is used by many different disciplines to gather an in-depth understanding of human behavior (Denzin & Lincoln, 2005). Community assessment work can use qualitative research techniques like interviews and focus groups to gather quality information. In order to analyze the information that is gathered, we must develop a strategy that organizes your impressions. The purpose of analyzing the interviews and focus group notes is to identify common themes in a way that is systematic. While there are many in-depth ways of analyzing qualitative data, this guide provides an overview of a relatively simple process that will be sufficient for your assessment process.

If you have decided to use interviews and/or focus groups in your assessment work, you have committed to an active listening process that will carry through into your analysis of the data you collected. The aim is to:

• Listen to what people have to say

• Identify common themes

• Summarize those themes in a way that is useful to you and your program.

How to Describe Your Process

Although your assessment is not formal research, it is sometimes helpful to use specific language about your process that will resonate with boards of directors, partners and funders.

If you followed the process recommended in this toolkit, you might want to use the following descriptions of your process:
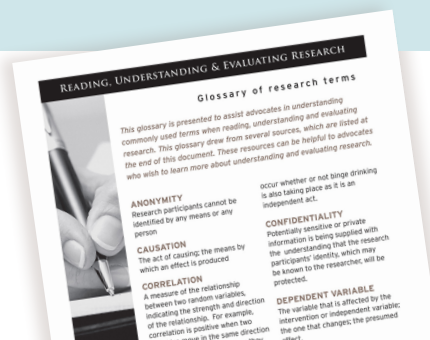
WHEN DESCRIBING THE INTERVIEWS

You can say that you conducted qualitative, key informant interviews using a semi-structured interview protocol.

WHEN DESCRIBING THE FOCUS GROUPS

You can say that you conducted qualitative, open-ended discussions using a semi-structured focus group protocol.
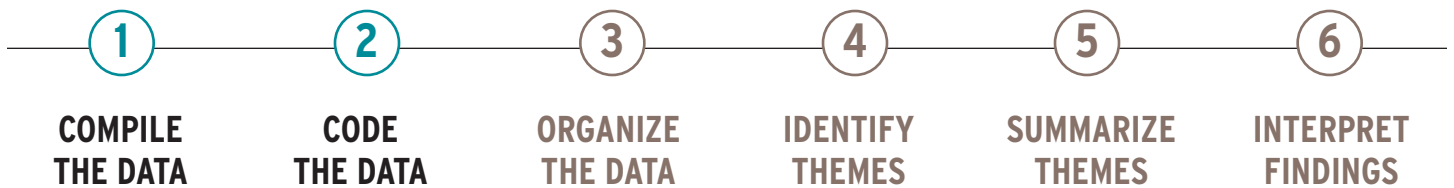
The interview and focus group data were analyzed using conventional content analysis.

For a glossary of research related terms download *Reading, Understanding, & Evaluating Research: Glossary of Terms* at **http://tinyurl.com/77g2mln**.

How to Identify Themes

Following six steps will let you focus on the most predominant ideas and experiences described in your assessment interviews and groups. The systematic nature of the process is also what gives the assessment validity and will make it credible in the eyes of the community, partners, policy makers and potential funders.
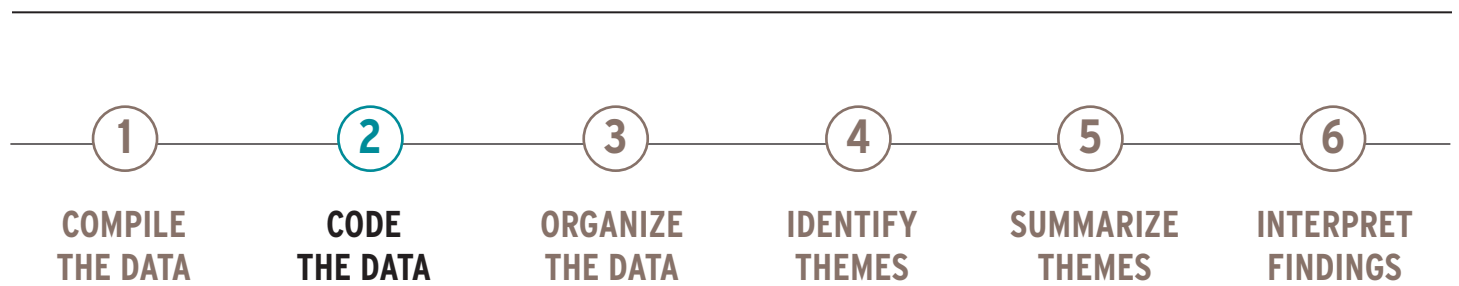
1 — **2** — **3** — **4** — **5** — **6**

COMPILE THE DATA | **CODE THE DATA** | **ORGANIZE THE DATA** | **IDENTIFY THEMES** | **SUMMARIZE THEMES** | **INTERPRET FINDINGS**

STEP 1: COMPILE THE DATA

While you were conducting the interviews, you may have taken brief notes or jotted down key words and phrases. (See Listening to Our Communities: *Tips for Interviewing* and *Listening to Our Communities: Guide for Focus Groups* for more details www.nsvrc.org) As soon as possible after the interview, you need to write up a detailed summary of what you heard. This does not have to be a word for word transcript. However, it should have as much detail as possible. You can write your notes sequentially, describing what was said in the order it occurred. Or, you can write your notes thematically, summarizing the major topics that were discussed. Your decision of how to write your notes should be based on what is easiest for you to do and what lets you capture the greatest level of detail. These notes will be the data that you analyze. Similarly, for focus groups the note taker should have taken notes during the group discussions and then written them up in as much detail as possible soon after. (Krueger & Casey, 2008)

STEP 2: CODE THE DATA

The next step is to break the data into smaller, distinct parts that let you see what is most common across all of the interviews. To do this, read the interview or focus group notes. As you read, make notes in the margins to mark what was said. These notes become your code (or label) and can be applied to a sentence, a few sentences, or an entire paragraph. Sometimes one passage will get more than one code.

Because you have specific things you are interested in, you can use those interests to guide your coding process. Make sure your labels are specific enough to tell them apart later on. You can also group codes together so they are organized in logical ways.
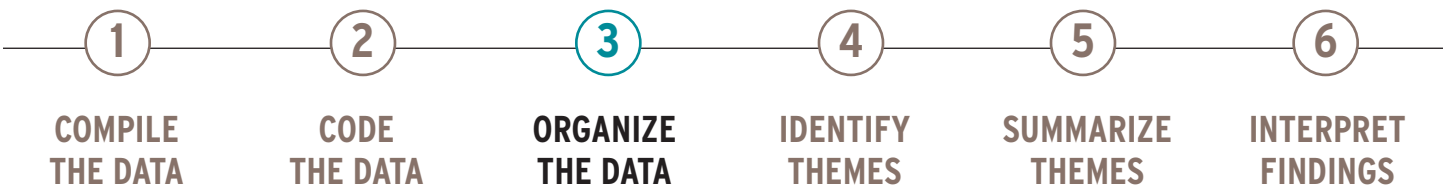
Here are some hypothetical codes that might help you to imagine this process:

EXAMPLES OF ORGANIZED CODES		
POSITIVE	**NEGATIVE**	**WAYS TO REACH OUT**
Support	Blame	Personal Contacts
Tangible Aid	Anger	Media Campaigns
No Blame	Didn't	Presentations

These are intended as examples so you understand what codes might look like. You need to determine your codes based on what you hear in the Interviews and group discussions. The power of qualitative analysis is the ability to discover the unexpected.

Sometimes we only become aware of a new label after we have come across the idea a few times. If you create a new label after you have already coded some of your notes, you need to go back and look at those notes you have already coded and see if your new label applies to them.

Do not be surprised if you end up having dozens of labels! After you have gone through the notes and labeled them, you can go back over the labels and see if you can combine some of them to reduce the list. However, if you hear a lot of detail in the interviews or focus groups, then you will have many labels.

1 **2** **3** **4** **5** **6**

| COMPILE THE DATA | CODE THE DATA | ORGANIZE THE DATA | IDENTIFY THEMES | SUMMARIZE THEMES | INTERPRET FINDINGS |

STEP 3: ORGANIZE THE DATA

Look over all your labels. See if you can group any more together into common categories. For example:

• Did you create a unique label that really overlaps with another label? If so, combine them.

• Do you have some miscellaneous labels that really go together under a broader category ? If so, edit those labels.

Now combine your data so that all the passages that have been given the same label are in one place. You can do this in a wide variety of ways, including:

• Using MS Word to copy/paste passages into lists or tables

• Using MS Excel to copy/paste passages into a spreadsheet where every column represents a different label

• Writing passages on color-coded Post-It notes or index cards and grouping them together

STEP 4: IDENTIFY THEMES

Now look at your lists/tables/piles of passages. What do you see?

• What labels have a lot of passages? These are your major themes.

• When you read the passages of major themes, which ones seem to have more impact on survivors accessing services? These are the major themes that are most important.

• What labels have very few passages? These are minor themes.

• What did no one talk about? This is important to pay attention to, as well. For example, if no one talked about media campaigns as a way of reaching out to survivors, then you may want to conclude that this is not a strategy worth pursuing.

• Are there differences between groups? These may show the need for community-specific responses. Before concluding that there are group differences, check across the interviews to make sure that the theme truly is unique to that group.

STEP 5: SUMMARIZE THEMES

Once you have identified your themes, summarize them in whatever way is most useful to you. This may mean:

• Writing a paragraph or two about each theme, describing what people said and giving examples from the interviews

• Making slides with bullet points that describe each theme

• Some other creative way of summarizing or illustrating the themes.

STEP 6: INTERPRET YOUR FINDINGS

Look at your summaries of the themes. Use them to answer as many of the questions you included in your assessment plan as you can.

Example of Coding

The following is an illustration of Steps 1 through 4. This example is taken from *Writing Ethnographic Fieldnotes* (Emerson, Fretz, & Shaw, 1995). It shows the coding of notes from a support group for those taking care of family members with Alzheimer's disease.

STEP 1: COMPILE THE DATA

Lucie says her husband is in good health, but his symptoms include memory loss and poor and dangerous driving. The doctor does nothing to stop him from driving. She asks, "What does everyone else think?" Some other members say, "Change doctors." Lucie explains the doctor is a friend of the family. Her son has stressed to the doctor that his father's driving is dangerous and they could be legally involved. The doctor has done a CAT scan but there is no direction from that.

Pat, the group leader, recommends, "Take it into your own hands." She suggests that Lucie go to the DMV. Lou says she thinks there is a new law that states anyone with a mental deficiency, including Alzheimer's disease, is not supposed to drive. Lucie says, "But I don't have a name on it – that's what hinders action. I am so frustrated."

Vie says, Isn't it important for the doctor to tell him not to drive?" Lucie says, "Why won't he do that? Maybe he's too close and he doesn't want to get involve." Lou: "What about Nicholson? He's a geriatric psychiatrist." Others suggest that she hide the car keys. Joey says, "You need to lie to him." Lucie says, "I must say I have been doing that." Joe says, "We all have."... Lucie says in terms of the car keys, he knows there is a second set. Another woman says she talked with her husband and he doesn't drive anymore. "I've done this. It is not working." Someone says, "you need a good diagnosis

from a medical doctor." Lucie: "That's what I think." Others in the group agree.

STEP 2: CODE THE DATA

• Trouble: memory loss; bad driving

• Doctor does not "Help," asks advice

• Family pressures doctor; medical tests but no results

• No medical diagnosis. Advice: coalition with doctor. Practical remedy: deception

• Talking hasn't worked

STEP 3: ORGANIZE THE DATA

If the notes from group discussions were very long and had many codes, then it might be worthwhile to combine and simplify some codes. Once all the group notes are coded, passages with the same or similar codes should be grouped together so you can look at them all at one time and not be distracted by other codes/data.

STEP 4: IDENTIFY THEMES

Based on the codes made in the margins, the following themes emerged:

• Driving by Alzheimer's patients may be dangerous; family caregivers may have to actively manage those who insist on continuing to drive

• Medical diagnoses may play a critical role in caregivers' efforts to manage patient activities

• Caregivers may experience frustration with doctors who fail to be sensitive to and support family concerns

• Support group members may suggest ways of getting around obstacles presented by doctors

• Support group members may recommend various practical remedies that will prevent the person with Alzheimer's from driving

These themes will change as more group notes are examined. Some themes will be dropped because while they seemed important in this particular set of notes, they may not come up again in any of the other notes. Or, a theme may continue to occur but be less important than other themes. New themes may emerge as more important. Those themes that remain will be the most supported and useful ones.

References

Emerson, R. M., Fretz, R. I., & Shaw, L. L. (1995). *Writing Ethnographic Fieldnotes*. Chicago, IL: University of Chicago Press.

Denzin, N. K., & Lincoln, Y. S. (Eds.). (2005). *The Sage handbook of qualitative research* (3rd ed.). Thousand Oaks, CA: Sage.

Krueger, R. A., & Casey, M. A. (2008). *Focus groups: A practical guide for applied research* (4th ed.). Thousand Oaks, CA: Sage.