Contextualizing the survey: linked trajectory of method triangulation in a study on HIV/AIDS in India.

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Extended abstract

Introduction

The marriage of qualitative and quantitative methods has never been easy. The challenge is in the way we triangulate the methods. Within demography triangulation has been largely limited to data triangulation, whereas triangulation can be of other types such as method triangulation and investigator triangulation. Qualitative data have mainly been used to explain the quantitative trends. This approach is still limited as the surveys are conceptualized differently, for example the DHS surveys. On the other hand surveys which are based on qualitative data are rare.

Linked trajectory of method triangulation

Method triangulation has been largely used to combine insights from the qualitative and quantitative methods but not to link both the methods. In this paper we suggest a linked trajectory of method triangulation. As seen below in the figure 1 the linked trajectory aims to first gather individual level information through in-depth interviews and then present the information from the in-depth interviews as vignettes in focus group discussions. The vignettes are used as a projective technique to stimulate discussion.

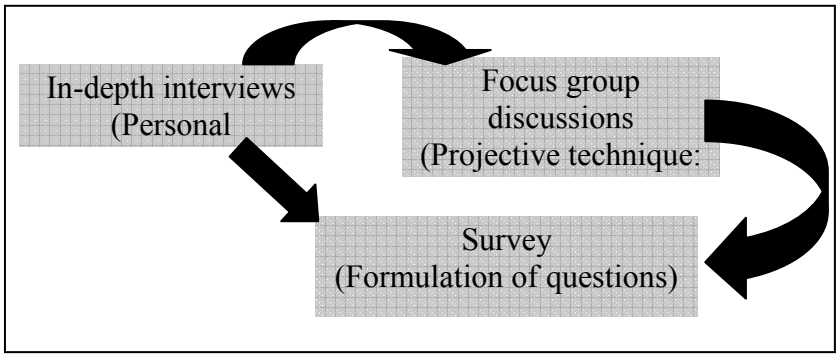


Figure 1 : Liked trajectory of method triangulation

In the focus group discussions we validate information obtained from in-depth interviews and gather emic concepts that arise from the interaction. We thus capture both the interpretation and the interaction angles of the qualitative method. Further, using the qualitative information gained, a survey is designed. In doing so, the survey questions are grounded and contextualized. As seen in the figure 1 not all information followed the trajectory but went directly from in-depth interviews to survey, For example; migration information.

Data and methods

Using the linked trajectory of method triangulation detailed above, this study sought to examine risk assessment of HIV/AIDS among migrant men and among truckers and fishermen (mobile populations) in Goa, India. Data come from two sets of studies. An initial exploratory study was conducted in 2003. This involved 14 in-depth interviews, pile sorting, three key informant interviews and community

mapping. A second, larger study was conducted in 2004–2005 and included 25 in-depth interviews, 16 focus group discussions and a survey involving 1259 men (migrant population n=752; mobile population n=507, this latter group comprising 260 truckers and 247 fishermen). Respondents in both qualitative and the quantitative studies were ever married men, aged between 20–45, born in Karnataka and migrated to Goa, and having spent the last whole year in Goa. The mobile men are truckers and fishermen who travel between Karnataka and Goa. Migrant men were selected for inclusion in the study using stratified systematic sampling. First, a list of eligible households was constructed in each area and then every third eligible house was visited. Truckers and fishermen were, however, selected by snowball sampling. As two different sampling techniques were used in the research, we present the results accordingly.

Results

Majority of the concepts found in the qualitative data were also visible in the quantitative data. As an example we present two concepts the *Cultural heuristic* and *perceived severity of HIV/AIDS* to show how these concepts emerged from the data. The former emerged as an empirical concept and the latter came from theory but was constructed different empirically. In the final paper we will provide more examples.

Cultural heuristics is risk assessment→ visual heuristic

Heuristics are mental shortcuts that people use when assessing their risk (Kahneman *et al*. 1982), the heuristics are constructed based on the cultural schemas on health and well being (Bailey and Hutter, 2006). We identified five cultural heuristics. In this paper we present 'visual heuristic'. Men reported using physical markers to assess whether a sex worker was healthy or not. These included the appearance of the face and body, since men believed that a person who has AIDS has hollow cheeks and less body fat. The use of appearance as a heuristic in order to decide whether a sex worker posed a risk or not was influenced by individual schemas about what healthy people look like. Men indicated having memories of what people living with HIV and AIDS looked like in the last stages, and used these visual heuristics to assess whether a sex worker was risky.

As seen in the Box 1, the information on the appearance was first found in the in-depth interviews and then turned into a story in FGD to elicit reactions to this story and the visual heuristic. Further in the survey, 50 migrant and mobile men reported having visited a sex worker. On asking these men whether they used the visual heuristic, 52 percent of migrants agreed they had (see figure in Box 2) and 36 percent of the mobile population, suggesting that the use of the heuristic was different among the two groups.

Box 1: Linked trajectory of method triangulation employed for cultural heuristic (visual)

In-depth interviews

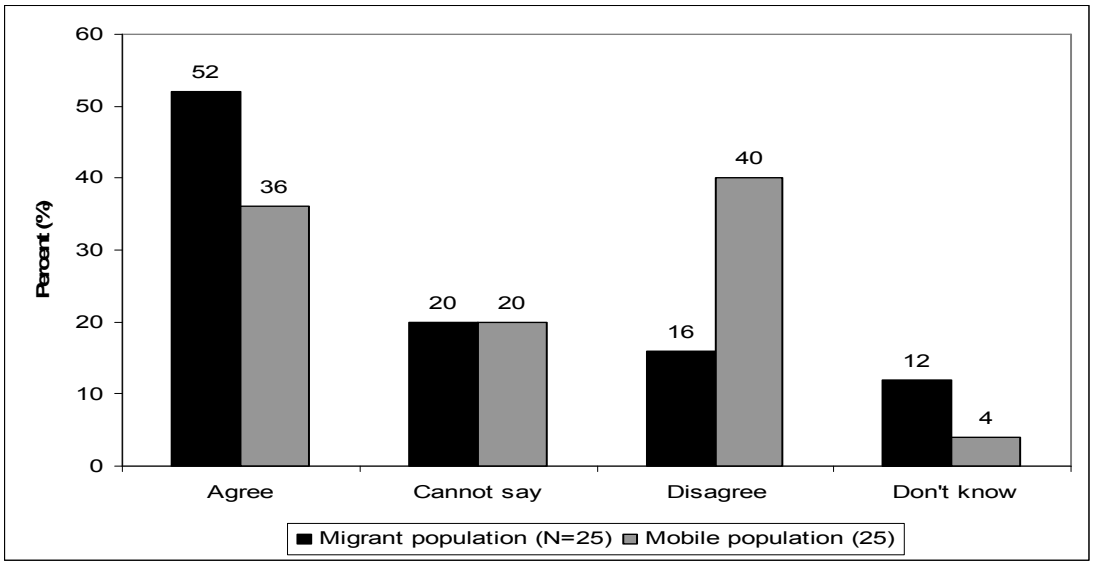
R: we have to think about that. It can be seen from the face (chera). If there are girls with sickness (bemari) then we don't go to them. If they are healthy then the face is plump, but if the person is sick then her face is small and dark. (Kalappa, migrant, 25)

Focus group discussion (vignette)

Patil told me that when they are sitting on the Kati near teashop and a girl gives him a signal then he goes with her behind the factory and has sex? As the 'adjustment' was very soon he was not able to buy a condom. What should have Patil done in such a situation? When I asked Patil why did not use condom he said that he could see from the appearance of the girl if she has AIDS or not? I am confused, what do you'll think?

Survey question:

Do you agree that if a CSW looks healthy and plump then we know that she does not have AIDS?



Perceived severity of HIV/AIDS

The concept Perceived severity comes from the Health Belief Model (Rosenstock and Strecher, 1997). It is generally measured as the medical consequences of having a disease. In our study we find that men evaluate economic and social consequences much more than medical consequences. As seen in the Box 2 , we first found this information in the in-depth interviews and then we made a vignettes of it and presented in the focus groups and further quantified it in the survey. In Box 2 we see the table which shows the percentage distribution of the migrant and mobile men who respond to one of the social consequences of HIV infection.

Box 2: Linked trajectory of method triangulation employed for Perceived severity of HIV/AIDS

In-depth interviews

R…if I die, then my wife will die, then my children will die and then who will take my family name further? The family is destroyed.

Focus group discussion (vignette)

In Vasco I met Lingappa, He told me if a person gets HIV/AIDS then his whole family is destroyed. Because there will be no one to take his family name further. What do you'll think of his story

Survey question:

If a person gets AIDS then there will be no one to continue his family name.

	Agree	**Cannot say**	**Disagree**	**DK**	**Total (%)**
Migrant population	76.0	10.6	10.5	2.8	100
Mobile population	85.8	4.1	8.5	1.6	100

Discussion and conclusion

From the examples above two major points come into sight:

- New concepts (viz. visual heuristic) emerge from the in-depth interviews and then get validated, in the FGD and in the survey. Thus we are closer to the emic perspective. The linked trajectory of method triangulation provides for the inductive validation of the new concepts.
- Theoretical concepts (viz. perceived severity) from etic models such as the HBM can be constructed differently by the people. The linked trajectory of method triangulation in this case aided in grounding the theoretical concepts.

The linking of the methods acts a measure of validation of information at each level. The linked trajectory of method triangulation can provide both completeness and confirmation of information. In this study we found linked trajectory of method triangulation useful for the eliciting information on sexuality and HIV/AIDS from men. In the final paper we will critically reflect if the present combination is best or can we find other combination of methods.

References

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