The Qualitative Report

TOR BUILD THE WORLD COMEST OL LEARN OULTATIVE RESEARCH

Volume 29 | Number 9

Article 3

10-14-2024

Considering Participant Observation Methods for Nursing Qualitative Research

Ana Inês Lourenço da Costa Escola Superior de Enfermagem de Lisboa, a.costa@esel.pt

Maria da Luz Jansénio Monteiro de Almeida Fonseca Rosa *Unidade Local de Saúde Almada Seixal*, mljrosa@hotmail.com

Paula Manuela Jorge Dioga Escola Superior de Enfermagem de Lisboa, pmdiogo@esel.pt

Follow this and additional works at: https://nsuworks.nova.edu/tgr

Part of the Quantitative, Qualitative, Comparative, and Historical Methodologies Commons, and the Social Statistics Commons

Recommended Citation

da Costa, A. I. L., de Almeida Fonseca Rosa, M. d. L. J. M., & Diogo, P. M. J. (2024). Considering participant observation methods for nursing qualitative research. The Qualitative Report, 29(9), 2430-2439. https://doi.org/10.46743/2160-3715/2024.7647

This Article is brought to you for free and open access by the The Qualitative Report at NSUWorks. It has been accepted for inclusion in The Qualitative Report by an authorized administrator of NSUWorks. For more information, please contact nsuworks@nova.edu.

THE QUALITATIVE REPORT DISCOVER ONE OF OUR VIRTUAL QUALITATIVE RESEARCH WORKSHOPS WITH INDUSTRY EXPERTS.

JOIN US ONLINE. LIMITED SPOTS AVAILABLE. BOOK YOURS NOW!

Considering Participant Observation Methods for Nursing Qualitative Research

THE QUALITATI

Abstract

Observation is used as a research technique and the selection of the appropriate type depends on the research question and the paradigm underlying each study. The degree of participation and involvement of a nurse researcher varies according to the nature of the setting and the research question. The objective is to reflect on the experience in applying observational techniques in nursing qualitative research. We report on the experience of using 14 observations of interactions between nurse-child-parents in a nursing appointment in a healthcare center. This data collection allowed identification of advantages and limitations in the nurse-child-parent interaction processes, in a healthcare center. We argue that advantages of observation can include overcoming the divergence between what participants say and what they do; capturing the emotional dimension cultivated within the natural environment; flexibility and non-intrusiveness if the researcher gives time to develop a relationship with the participants. Doing observations requires significant time in the natural context, through sustained presence, building trust, and becoming integrated into the context before the research begins. In interpretive and naturalistic qualitative research observational techniques.

Keywords

observation, nursing research, qualitative study

Creative Commons License



This work is licensed under a Creative Commons Attribution-Noncommercial-Share Alike 4.0 International License.



Considering Participant Observation Methods for Nursing Qualitative Research

Ana Inês Lourenço da Costa^{1,3}, Maria da Luz Jansénio Monteiro de Almeida Fonseca Rosa^{2,3}, and Paula Manuela Jorge Diogo^{1,3} ¹Escola Superior de Enfermagem de Lisboa, Portugal ²Unidade Local de Saúde Almada Seixal, Portugal ³ Centro de Investigação, Inovação e Desenvolvimento em Enfermagem de Lisboa (CIDNUR)

Observation is used as a research technique and the selection of the appropriate type depends on the research question and the paradigm underlying each study. The degree of participation and involvement of a nurse researcher varies according to the nature of the setting and the research question. The objective is to reflect on the experience in applying observational techniques in nursing qualitative research. We report on the experience of using 14 observations of interactions between nurse-child-parents in a nursing appointment in a healthcare center. This data collection allowed identification of advantages and limitations in the nurse-child-parent interaction processes, in a healthcare center. We argue that advantages of observation can include overcoming the divergence between what participants say and what they do; capturing the emotional dimension cultivated within the natural environment; flexibility and non-intrusiveness if the researcher gives time to develop a relationship with the participants. Doing observations requires significant time in the natural context, through sustained presence, building trust, and becoming integrated into the context before the research begins. In interpretive and naturalistic qualitative research observational techniques continue to offer a method that can be used alone or conjugated with other data collection techniques.

Keywords: observation, nursing research, qualitative study

Introduction

Qualitative research is a type of research strategy that aims to generate deep insights related to phenomena, and this can be achieved through involvement with places and social actors. Qualitative research especially uses an inductive view of the relationship between theory and search as being interpretive in nature, which means that search shows an understanding of the real world. Qualitative research often involves interactions between researchers and participants highlighting relational aspects of its ontological position. Qualitative research can utilize different methodologies such as grounded theory, phenomenology, and ethnography (Bowling, 2014; Clark et al., 2021) and context is critical for understanding phenomena, so researchers describe in detail the environment and social context of the study, which can be seen as a manifestation of naturalism (Clark et al., 2021).

Within choices of methods for conducting qualitative research, observation is an election data collection technique that allows the researcher to understand people and activities in the action context (Clark et al., 2021). The context of observation is usually chosen by the researcher. Observation of behaviors, actions, activities, and interactions is an instrument to

understand more what people say about complex situations and comprehend this situation deeply (Austin & Sutton, 2014; Bowling, 2014). This type of data collection improves comprehension of practice, processes, knowledge, beliefs, and attitudes existent in clinical contexts (Fry et al., 2017). In qualitative studies, observation is often a central technique because it represents the capacity to see, look, and take notes (Swaminathan & Mulvihill, 2018) and it is an underutilized technique in nursing research (Coker et al., 2013).

For several decades, researchers have sought to differentiate the various types of observational techniques. Gold (1958) is an example of these researchers who defined four roles that the observer takes during observation in context: the complete observer, the observer as participant, where the principal focus is observation with some participation, the participant as observer where the focus is participation with minimal observation, and the complete participant. In this sense, these differences allow a balance between participation and observation and between involvement and detachment. Further, Bowling (2014) describes that an observation can be structured and quantitative or unstructured and qualitative, and it can be overt and concealed. Structured or systematic observation is a technique that utilizes a guide of activities to observe, and the researcher follows rules for observing and taking notes of behavior (Clark et al., 2021; Mulhall, 2003). Unstructured observation does not require an observation schedule to take notes of behavior, and the researcher goes to the context to describe and analyze what is seen and listened to (Bowling, 2014; Clark et al., 2021; Mulhall, 2003). Mulhall (2003) points out that unstructured observation gives insight into relationships between participants, shows the totality of the scene, captures the context, and contributes to knowledge of the physical environment.

A nurse researcher can choose to be a participative or non-participative observer in naturalistic healthcare contexts to understand human interaction, relationships, and actions (Salmon, 2015). Specifically, participant observation includes the researcher immersing in a social context for a long period, having direct contact with social actors in cultural contexts, and observing the behavior of people to comprehend the meaning people give to things. This involves observing the environment, behaviors of people, and particularly listening to what people say to others in conversations (Bowling, 2014; Clark et al., 2021). As an alternative, non-participant observation is conducted when a researcher observes a social context but does not participate in events or actions that are occurring (Clark et al., 2021). Nurse qualitative researchers have utilized observational techniques to find gaps in the existing studies and in cases when the researchers desire to analyze defaults or examine fine points that allow meaningful findings (Swaminathan & Mulvihill, 2018). The objective of this paper is to reflect on the experience in applying observational techniques in nursing qualitative research conducted for a doctoral thesis, entitled "Health Children Nursing Intervention with Abuse Families: Emotional Process Experienced by Nurses." The main purpose of the dissertation project was to characterize the follow-up of parents who abuse children, made by nurses in primary health care, to analyze the emotional experience of nurses, and to understand nurses' management emotional process in interaction with abusive parents. In the next sections we report on the implementation of participant observation techniques and discuss the lessons learned in the process.

Method: Describing Participant Observation Process

According to Corbin and Strauss (2015), grounded theory methodology can use various data collection techniques to improve the comprehension of concepts. The qualitative study based on a naturalistic interpretive paradigm, used grounded theory methodology with an inductive analytic approach (Corbin & Strauss, 2015) and participant observation as a data collection technique (Rosa, 2023; Rosa et al., 2020). We collected fourteen instances of

participant observation of care moments/interactions between children, parents, and nurses, which occurred in appointment rooms and waiting rooms in various primary healthcare centers. Research participants, including one of the authors of this paper, were nurses, who were considered experienced experts about study phenomena (Morse, 1994) and had a deep understanding and relevant information of data to collect. Participant observation was used in complementarity with other data collection techniques: semi-structured interviews and focus groups because the researcher desired to understand the emotional process lived by nurses in interaction with abused children and abusive parents. Semi-structured interviews were done with nurses after the observation, as follow up to the data insights that emerged in participant observation. The first focus group was done in the middle of the data collection techniques with a leading role of participant observation as an overarching data collection strategy were applied to gain the corpus of data.

Negotiating the Presence of the Researcher

Before using the participant observation technique, researchers must pay attention to numerous procedures. In this study, the main researcher worked in a primary healthcare center where the study was developed, which facilitated entry into the research cite, because of the knowledge of nurses and other healthcare professionals and the dynamic of the institution. Firstly, the ethical approval from a healthcare organization to observe parents, children, and nurses was acquired. The primary researcher also asked for authorization from the healthcare organization director, and then scheduled a meeting with the nursing director and nursing chief to present and explain the study. This first encounter was a facilitator of nurses' acceptance of the presence of the researcher during the observation, because the main nurse researcher was not considered an external element of the team. The experiences of the informal moments of meeting in the team were essential to the comprehension of behaviors and interactions of nurses during observations that followed. Secondly, according to ethical principles of the International Military Tribunal (1949) and World Medical Association (2008), written consents of parents and nurses were received before the observation of nursing health child appointments.

The researcher's presence was concealed during the observations because the nurse researcher did not desire to interfere in the interactions among the nurse-child-parents. The researcher asked nurses about the best place to stay during observation, which occurred in the nursing appointment rooms and waiting rooms to reduce interference, discomforts, and intrusion caused by his presence. However, the researcher negotiated with the nurses a place to stay where one can listen to and observe the totality of the nursing appointment scene. The researcher decided to do an observation seated in a comfortable chair so that his physical movements were minimal.

What Was There to See?

Participant observation technique was guided by the objectives of the study and theoretical concepts of qualitative research, criteria of observation technique, such as validation, veracity, objectivity, and reliability, the role of the researcher, and philosophies of nursing child health and pediatrics. Participant observation was focused on parents' needs concerning the development and growth of the child; parents' emotional needs about parenthood; the child's emotional and social needs; and strategies to promote the development of the child. The researcher also observed how nurses dealt with the experience of child abuse during interaction, and emotional management strategies used by nurses in caring moments. The physical environment was observed by the researcher, such as painted walls with superheroes, toys, and games in the appointment rooms and waiting rooms, small tables and chairs adapted to children in nursing appointment rooms, and colored equipment to use in the children's consultation. The researcher observed nurses' uniforms with colorful fabrics and toys placed in the uniforms, and colored pencils and pens, which are facilitators of interaction between child and nurse. Observations mainly occurred during the nursing appointment because the objective was to observe the interaction between nurse-child-parents, supplementing the observations with interactions that occurred also in the waiting room. The timing of observation was variable, depending on the duration of interaction between participants. The nurse researcher highlighted the importance of flexibility in the choice of the moment of observation of the interaction between child-nurse-parents.

Nurse researchers' physical presence allowed for understanding interpersonal relationships, observing the needs of vulnerable families, and seeing close nursing follow-ups of children and parents. The particularities, needs, and familiar relationships were recorded by observation. Sharing of significant events that the child and parents lived at home with the nurse revealed proximity between nurse-child-parents, and it was observed by the researcher.

Through observational techniques, the researcher observed that sometimes nurses demonstrated difficulty in interacting with abusive parents, showing seeming emotional detachment. However, these instances were not verified with participating nurses in the nursechild interaction during observation. Sometimes the researcher felt the necessity to bring the study objectives to the forefront of his attention during the observation, because the reality of observing was so rich and complex, that it was important to refocus on the objectives, reducing the dispersion of attention.

Documenting Participant Observations

Observation notes were not written during the observation of interaction between nursechild-parents but were taken by the researcher immediately after nursing appointments or at the end of interaction with nurse-child-parents in the waiting room, in a place/room separate from the interaction. Information about the external environment was captured by naturalistic observation, where the attention of the researcher was directed to external characteristics of the environment.

In writing this reflection, we used field notes, which were short notes of reflections about the interaction between nurse-child-parents and were taken by the researcher. These field notes included ideas, strategies, and reflections that emerged from observational techniques. Field notes were written by the researcher to take memories about what was listened to, what was seen, what was thought during the data collection and what is the experience. Field notes were important because they helped the researcher accompany the project development and raise awareness of the influence of the researcher in the data collection process and interpretation. We also used research journals that allowed the researcher to see the research progress and notice changes as well as the investigation progress. In journals, the researcher wrote his feelings, perceptions, sensations, difficulties, and satisfactions while collecting the data.

Discussion: Lessons Learned

What Being an Insider Means in Participant Observation

There are different types of observation, and a central concern is the degree of involvement and participation of the researcher with participants and activities that are being

observed. In non-participative observation, the researcher does not demonstrate involvement with participants or activities (Spradley, 1980). In contrast, participant observation is an open system, that does not have predefined categories to observe. Mulhall (2003) states that negotiating access in healthcare settings often involves approaching people in positions of authority and power, such as nursing directors. In the healthcare context access may involve a long process of negotiation between numerous professionals, like managers, nurses, and allied professionals' healthcare. The researcher who understands the social world from the inside because he or she shares the same context with participants, is more likely to gain access, so it is important to show involvement with participants at the scene. The researcher can access the perspective of participants living the same situations, meanings, and concerns (Lessard-Hébert et al., 2012). The objectives of participant observation go far beyond the detailed description of the components of a situation, allowing the identification of the meaning, orientation, and dynamics of each moment (Spradley, 1980). During participant observation it is important to build a trusting relationship with participants to enable observing the nurses during their nursing practice, and to conduct a valid interpretation of information given by participants in interviews (Morse & Field, 1996). The observational techniques involve a permanent interaction with reality so, the researcher also interacts with his or her perspectives, beliefs, and expectations (Cruz, 2015).

In participant observation researchers are, firstly, the instrument for collecting data and, at the same time, they are a vehicle for an interpretation of data - an essential tool for the project's progress (Carnavale et al., 2008; Correia, 2009; Swaminathan & Mulvihill, 2018). In applying the observational techniques in this project, the nurse researcher was confronted with two different roles: nurse and researcher. Awareness of both a nurse and a researcher role was necessary, since for each of them observation made sense and was valuable, but in a different way. However, a nurse researcher subjectivity was valuable because the researcher was immersed in the group, which he observed and the involvement with participants was a reality (Correia, 2009). Substantial involvement was important to get a deeper understanding of the context under study, confirming Takyi (2015) suggestion that the participant-as-observer role is recommended. In this way, the researcher demonstrates the ability to observe the friendly relationship between participants, share emotions and feelings with participants, and reveal his identity to the participants (Takyi, 2015). Therefore, the shortening of distance between the researcher and the participants was crucial to developing acceptance and trust (Takyi, 2015). The nurse researcher was integrated into a social group, that he decided to study and the benefits of being an "insider" were numerous, such as providing a deep understanding of the culture studied, maintaining social interaction unchanged, and establishing intimacy between the researcher and participants. Additionally, an "insider" status reduced ethical dilemmas, facilitated access to the context, and built a relationship with participants, who were nurses known by the researcher (Bonner & Tolhurst, 2002). In our study, the nurse researcher knew the place and knew where to collect the data, and this constituted an advantage for the study. Consequently, this involvement and proximity between the nurse-researcher and participants, marked by high confidentiality, put a researcher at risk of interpreting the data with more subjectivity (Takyi, 2015).

Preparation for Observing

Careful attention to ethical safeguards should be taken especially when observational techniques are used to study children and families (Bowling, 2014). It is essential to request ethical approval from a university, an institution, or an organization to carry out the observational techniques and to seek consent from participants, who are involved in the chosen context of observation (Clark et al., 2021). The nurse researcher should obtain the written

consent of parents and oral assent for children with consideration of the child's abilities, age, and maturity. When children express objection to participation in a study, this should be respected as a refusal to participate even if the parent consents (Carnavale et al., 2008).

The observational techniques allow the researcher to observe affection children toward family members in their social context, showing normal children's lives (Carnavale et al., 2008). Our descriptions highlighted sharing emotions during the interaction between nursechild-parents in nursing appointments, in which children and parents speak about their social lives. Ethical challenges involve respecting the singularity of children and parents, which is observed. In qualitative research the comprehension of social reality suggests a close relationship between researcher and participant, valuing his emotions and thoughts; focusing on a complex and singular human experience; understanding the context and the history of the participant, seeing perceptions, habits, customs, and beliefs.

As seen in the results, the nurse researcher must be able to prepare rigorously for observation, and personal qualities such as attention, flexibility, and patience should be present (Correia, 2009; Swaminathan & Mulvihill, 2018). In addition, careful training, rehearsal, and discipline to acquire skills and competencies in observational techniques are essential to reduce subjective deformities (Bowling, 2014; Correia, 2009). Similarly, the role of a nurse-researcher raises the question of how much time is spent on observation. The nurse-researcher must spend as much time as possible in the natural context, including different days and times to ensure that collected data are understandable and achieve validity and reliability. To observe effectively, it is crucial to know how typical events and interactions are prioritized (Bowling, 2014). To accomplish this, the researchers can opt in for a progressive integration in the context, which is to be observed.

Another critical reflection is related to access to the context by the researcher when using observational techniques. When selecting a context to observe, the researcher should consider simplicity, accessibility, unobtrusive, permissibleness, and activities that regularly happen (Spradley, 1980). Many nurse researchers undertake observational techniques in researching their workplace. This has obvious advantages because the access facilitates the integration of the researcher into the culture immersed in the study context (Mulhall, 2003). In addition, access to the context depends on the personal and psychological characteristics of the nurse researcher, and Mulhall (2003) argues that the researcher should have the competency to integrate rapidly into the context and mixture with participants, reducing some emotions of fear and hesitancy. Our results show that the nurse-researcher knew the physical environment and the healthcare professionals, which gave access to the context for the study to progress more effectively.

While Observing in the Field

Observational techniques require some criteria for implementation, especially when answers to research questions must be systematic and planned, subject to validation and verification, precision, and control (Clark et al., 2021; Correia, 2009). Fieldwork where the observation technique is seen as a subjective meeting can influence the data collection (Minayo, 2021). In the context of observation, the researcher should have appropriate identification and clothing for the context, consider the distance from participants, and take some field notes as close as possible to the observation of the events, without discussion (Fry et al., 2017). Berg (2017) and Mulhall (2003) suggest a field note, which includes: structural and organizational characteristics (physical environment), interaction, routines, complaints, messages, critiques, arguments, dialogues, conversations between participants, behaviors, and movement of participants, daily activities, special events that occur, and finally, a personal reflective diary, which involves emotions and reflections. Researchers can take field notes at the end of each day, write events as they occur, or retire to a silent place directly following the observation period (Mulhall, 2003). Another option is for the researcher to write notes in any order through the events that come to memory, requiring the researcher's expertise (Swaminathan & Mulvihill, 2018). Cruz (2015) highlights the reflection about what she was observing, as well as thoughts, assumptions, and perspectives as important elements of field notes. In this study, through taking notes the researcher became aware of surroundings, people, and actions, recording what happened, and who the researcher met, and reflecting on that experience. In our results it became apparent that the researcher needs to pay attention to non-verbal communication between participants, such as eye-to-eye contact, gestures, use of hands, body posture, blushing, and spatial behavior like movements of people, distance, or closeness, which is fundamental to research (Bowling, 2014). Often these non-verbal behaviors signalled participants emotions and discomforts during the interactions.

According to Mulhall (2003) and Clark et al. (2021) there exist two distinct forms of how field notes should be written: (1) critical incidents or exchanges - the researcher waits for them and records what happened and (2) short or long periods, using the chronological ordering of events. Alternatively, and integrated approach is possible when during the writing up of notes specific critical incidents or exchanges may be related to other experienced events. Context notes can supplement field notes; these recordings are influenced by professional and personal worldviews, prioritization, the researcher's relationship, and the researcher's interpretation and perception (Mulhall, 2003; Swaminathan & Mulvihill, 2018).

Liabilities in Participant Observations

Ethical challenges exist when the researcher uses observational techniques, because the participants are living and acting in a natural context, and it cannot be specified *a priori* what will and will not be observed and the degree of participation in the context. The presence of the researcher can bring some inconvenience, because of inhibition that this presence can cause in participants and their behavior. Observation can also generate fragmented data with different pieces and the researcher has the challenge of joining these diverse parts to create a whole picture of the environment, attitudes, and social context (Clark et al., 2021). The participants can change their behavior because of being observed, watched, or studied by the researcher. So, losing the spontaneity and reactivity of participants can be a risk that can be accounted for and can be reduced by the trust relationship over time (Correia, 2009). The researcher should be able to integrate in the context to reduce reactive effects and be prepared for prolonged fieldwork to collect more coherent data (Clark et al., 2021).

Further, in using the observational techniques, the researcher should consider personal biases and how they can influence participant observation (Takyi, 2015). In the naturalistic context, the presence of the researcher causes some degree of subjectivity in the interpretation of data that can lead to contamination of results (Bowling, 2014). Therefore, the limitations of the observational techniques are researcher bias, the reactive effects of the researcher's presence, and the impossibility of observing a large sample of participants, organizations, or other units of study (Bowling, 2014). Additionally, Clark et al. (2021) state that the researcher should be aware that the observational techniques do not inform about the reasons behind the behavior of people, which is a limitation. When a nurse researcher witnesses an interaction between participants, the following interpretation may be incorrect if the researcher does not check the observation interpretations with other data collection techniques, such as interviews (Corbin & Strauss, 2015).

The insider role of the researcher, the nature of observation, appropriate analysis of the data, and validation of results contribute to rigor in the observational techniques (Coker et al., 2013). Observational techniques should be a part of the research methodology where the researcher uses observation conjugated with other techniques (interviews, focus groups, and writing narratives) to reduce biases (Bowling, 2014). Observational techniques can add a valuable strength to nursing research when the researcher has preparation and training to allow for capturing emotions, concerns, and perceptions related to the interaction of participants.

Conclusion

Participant observation is a data collection technique appropriate for grounded theory methodology because data collection occurs in a natural context where participants live, and the researcher intentionally becomes immersed in the participant's world (Corbin & Strauss, 2015). The reasons to choose observation in the grounded theory methodology are the discrepancy between what participants say in interviews and what they do in practice, and participants are not always aware of the details of what is going on during interaction (Corbin & Strauss, 2015). As demonstrated in this study of interactions among children, nurses, and parents, advantages of utilization of the observational techniques lie in helping to overcome the discrepancy between what nurse participants said, in interviews, and what they did during interactions; informing about the interaction between nurse-clients; observing details that escape the nursing team because of the taken-for-granted routines. In addition, observation allows access and capturing behavior and events as they are experienced by the participants at the moments of occurrence, leading to revealing and powerful data.

To date, there is a sparse discussion in the literature of the problems and dilemmas associated with the use of observational techniques in qualitative nursing research. We advocate for a wider use of participant observation in grounded theory methodology. Observation is a highly valued and effective qualitative research technique in nursing research. To ensure rigor in participant observations, the researchers are asked to recognize their subjectivity, reflect on this technique, and adjust data collection behaviors to make observation more prominent in qualitative grounded theory research. Observation of care and observation in nursing practice can contribute to the improvement and quality of nursing. Studies that privilege the spontaneity and authenticity of nurses in their practice during data collection can be valuable for enhancing the quality of qualitative nursing research with pediatric clients and nursing professionals in healthcare units.

References

- Austin, Z., & Sutton, J. (2014). Qualitative research: Getting started. *The Canadian Journal of Hospital Pharmacy*, 67(6), 436-440. <u>https://doi.org/10.4212/cjhp.v67i6.1406</u>
- Berg, B. L. (2017). Designing projects and concept mapping. In H. Lune, H. & B. L. Berg (Eds.), *Qualitative research methods for the social science* (7th ed.; pp. 41-51). Pearson. <u>http://law.gtu.ge/wp-content/uploads/2017/02/Berg-B.-Lune-H.-2012.Qualitative-</u> Research-Methods-for-the-Social-Sciences.pdf
- Bonner, A., & Tolhurst, G. (2002). Insider/outsider perspectives of participant observation. *Nurse Researcher*, 9(4), 7-19. <u>https://doi.org/10.7748/nr2002.07.9.4.7.c6194</u>
- Bowling, A. (2014). *Research methods in health: Investigating health and health services* (4th ed.). McGraw-Hill, Open University Press.
- Carnavale, F., Macdonald, M. E., Bluebond-Langner, M., & Mckeever, P. (2008). Using participant observation in pediatric healthcare settings: Ethical challenges and solutions. *Journal of Child Healthcare*, *12*(1), 18–32. https://doi.org/10.1177/1367493507085616
- Clark, T., Foster, L., Sloan, L., & Bryman, A. (2021). *Bryman's social research methods* (6th ed.). Oxford.
- Coker, E., Ploeg, J., Kaasalainen, S., & Fisher, A. (2013). Assessment of rigour in published nursing intervention studies that use observational methods. *The Qualitative Report*, 18(34), 1-23. <u>https://doi.org/10.46743/2160-3715/2013.1475</u>
- Corbin, J., & Strauss, A. (2015). Basics of qualitative research. Techniques and procedures for developing grounded theory. SAGE.
- Correia, M. C. B. (2009). A observação participante enquanto técnica de investigação. *Pensar Enfermagem*, 13(2), 30-36. <u>https://doi.org/10.56732/pensarenf.v13i2.32</u>
- Cruz, L. (2015). Self-reflexivity as an ethical instrument to give full play to our explicit and implicit subjectivity as qualitative researchers. *The Qualitative Report*, 20(10), 1723-1735. <u>https://doi.org/10.46743/2160-3715/2015.2353</u>
- Fry, M., Curtis, K., Considine, J., & Shaban, R. Z. (2017). Using observation to collect data in emergency research. Australasian Emergency Nursing Journal, 20(1), 25-30. <u>https://doi.org/10.1016/j.aenj.2017.01.001</u>
- Gold, R. L. (1958). Roles in the sociological field observations. *Social Forces*, *36*(3), 217-223. https://doi.org/10.2307/2573808
- International Military Tribunal. (1949-1953). Trials of war criminals before the Nuernberg Military Tribunals under Control Council law no. 10 Nuernberg, October 1946-April 1949. U.S. G.P.O. <u>https://lccn.loc.gov/2011525364</u>
- Lessard-Hébert, M., Goyette, G., & Boutin, G. (2012). *Investigação qualitativa. Fundamentos e práticas* (5^a ed.). Instituto Piaget.
- Minayo, M. C. S. (2021). Ethics of qualitative research according to its characteristics. *Revista Pesquisa* http://dx.doi.org/10.33361/RPQ.2021.v.9.n.22.506
- Morse, J. M. (1994). Critical issues in qualitative research methods. Sage Publications.
- Morse, J. M., & Field, P. (1996). *Nursing research: The application of qualitative approaches* (2nd ed.). Chapman & Hill.
- Mulhall, A. (2003). In the field: Notes on observation in qualitative research. *Journal of* Advanced Nursing, 41(3), 306–313. <u>https://doi.org/10.1046/j.1365-2648.2003.02514.x</u>
- Rosa, M. L. (2023). Intervenção de enfermagem de saúde infantil com familias maltratantes: O processo emocional vivido pelos enfermeiros (Doctoral Thesis, Lisbon University). Repositório Institucional da Universidade de Lisboa. <u>https://repositorio.ul.pt/handle/10451/58261</u>

- Rosa, M. L. F., Diogo, P., & Barros, L. (2020). The emotional process experienced by nurses in the interaction with maltreatment parents in the child health nursing consultation. *Pensar Enfermagem*, 24(1), 39-56. <u>https://doi.org/10.56732/pensarenf.v24i1.168</u>
- Salmon, J. (2015). Using observational methods in nursing research. Nursing Standard: Official Newspaper of Royal College of Nursing, 29(45), 36-41. https://doi.org/10.7748/ns.29.45.36.e8721

Spradley, J. (1980). Participant observation. Holt, Rinehart, & Wilson.

- Swaminathan, R., & Mulvihill, T. (2018). *Teaching qualitative research: Strategies for engaging emerging scholars*. The Guilford Press.
- Takyi, E. (2015). The challenge of involvement and detachment in participant observation. *The Qualitative Report*, 20(6), 864-872. <u>https://doi.org/10.46743/2160-3715/2015.2164</u>
- World Medical Association. (2008). Declaration of Helsinki Ethical principles for medical research involving human subjects. <u>https://www.wma.net/wp-content/uploads/2016/11/DoH-Oct2008.pdf</u>

Author Note

Ana Inês Lourenço da Costa, MSc, R.N., is Adjunct Professor at Escola Superior de Enfermagem de Lisboa, Centro de Investigação, Inovação e Desenvolvimento em Enfermagem de Lisboa (CIDNUR) ORCID: <u>https://orcid.org/0000-0002-1297-0392</u>; email: <u>a.costa@esel.pt</u>

Maria da Luz Jansénio Monteiro de Almeida Fonseca Rosa, Ph.D., R.N. ORCID. is Nurse Manager at Unidade Local de Saúde Almada Seixal, Centro de Investigação, Inovação e Desenvolvimento em Enfermagem de Lisboa (CIDNUR) ORCID <u>https://orcid.org/0000-0003-4871-796X</u>; e-mail: <u>mljrosa@hotmail.com</u>

Paula Manuela Jorge Diogo, Ph.D., R.N., is Coordinator Professor, at Escola Superior de Enfermagem de Lisboa, Centro de Investigação, Inovação e Desenvolvimento em Enfermagem de Lisboa (CIDNUR). ORCID: <u>https://orcid.org/0000-0003-4828-3452</u>; e-mail:

Copyright 2024: Ana Inês Lourenço da Costa, Maria da Luz Jansénio Monteiro de Almeida Fonseca Rosa, Paula Manuela Jorge Diogo, and Nova Southeastern University.

Article Citation

da Costa, A. I. L., de Almeida Fonseca Rosa, M. d. L. J. M., & Diogo, P. M. J. (2024). Considering participant observation methods for nursing qualitative research. *The Qualitative Report, 29*(9), 2430-2439. <u>https://doi.org/10.46743/2160-3715/2024.7647</u>