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EXPLORING RESEARCH METHODS TO CONDUCT AN IN-DEPTH STUDY OF TOPICS CONSIDERED A TABOO

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ABSTRACT

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Key words:

Research Methods, Polling Booth Survey, Qualitative, HIV AIDS Several research studies have been conducted to magnify understand and exploration of many sensitive issues that people experience. This kind of research is mainly undertaken and conducted using qualitative research methodologies to explore in-depth the experiences of the people. However, there are several complications that are seen while doing qualitative interviews on sensitive topics. The main issue is that these interviews are often stressful for both the researcher and the interviewee. In order to avoid the complications of emotions faced by the participants in order to respond to sensitive questions, this paper delves into the research approach of polling. Polling Booth Survey is an excellent mix of quantitative and qualitative methods, whatever information is gathered via questions which are secretly answered to, by the respondents and later measured by the researcher. Polling Booth Survey also involves a discussion session after the survey, which is, in a way, quite similar to Focused Group Discussion but what is discussed about in this session is based on the responses that are tabulated immediately after the survey, which makes data collection more accurate and transparent.

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INTRODUCTION

Research on sensitive topics explores a wide range of social issues using a variety of research methods. There is no particular genre to describe sensitive research. However, it can be made distinctive by trying to find answers to research questions that may have been anticipated as sensitive. Few examples of sensitive topics are sexual behaviours, deviance, drug abuse, HIV AIDs, death and other topics sometimes labelled as taboo subjects. [1] There are many areas of research that have the potential to be threatening to those taking part. [2] Out of all the sensitive topics that invade what has been termed the 'private sphere', HIV AIDS is one such topic. This is because of the emotions evoked by the participants while responding to interviews related to HIV AIDS. This topic is considered sensitive based on societal perceptions of it as a taboo as it is related to sexual life. This kind of study is also considered 'risky' as it is feared that it will not be completed due to non-response. [3] However, there is a term called the 'perception of risk', which highlights that different schools of people will have different ideas of risk. The ethics committees, gatekeepers, researchers and participants may all perceive the risk differently as this perception is highly subjective. [4] Nevertheless, conducting studies on sensitive topics and taboo subjects should not be avoided.

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Research needs to be undertaken on sensitive issues to magnify understanding and exploration of many issues that people deal with currently. [5] Data collection in sensitive research can sometimes be a challenging task and is often fraught with problems. [6] Many methodological research approaches have aided data collection on taboo subjects over the past years. [7] As reported by various articles, sensitive research that genuinely examines the experiences of people is more likely to be undertaken using qualitative methodologies, which provides a holistic approach to understanding the sensitive topics. [8-10] It sees individuals in their social contexts and allows the research agenda to be shaped by both the researcher and the researched. Researchers conducting research on sensitive topics choose a qualitative design using the in-depth interview and focused group discussions as their preferred method of data collection. Several issues arise while conducting a qualitative interview investigating sensitive topics. The critical issue raised is that these interviews are often stressful for both the researcher and the interviewee. Indepth interviews are done on a one-off basis, or they can involve a more longitudinal design, [11] which basically means building rapport and a relationship with the potential participant through more than one interview. A number of potential challenges are seen affecting the relationships that researchers build with research participants.

In order to avoid the complications of emotions faced by the participants in order to respond to sensitive questions, this paper delves into another form of interview or survey to conduct research on sensitive issues, which is called a Polling Booth Survey. Polling Booth Survey is a new method for research applied since 2009 by various organizations, notably Kerala State Aids Control society who have claimed to have initiated the methodology, especially for studying taboo subjects, like, HIV/AIDS, gynecological problems among women and women trafficking. [12] A group interview method such as Polling Booth Survey (PBS) follows a structured methodology that ensures the collection of quantitative information as well as qualitative information. [13] A study among currently married women (CMW) was conducted by the Institute of Health Management Research, Jaipur to help USAID funded and PHFI implemented "HIV/AIDS Partnership: Impact through Prevention, Private sector and Evidence-based programming (PIPPSE)" project to track behaviour change among Currently Married Women of selected districts of Uttar Pradesh and Orissa over time, in terms of access to and utilization of services, to inform the program about efforts made through tracking and information sharing mechanism with the help of Migration Service Delivery System (MSDS) under which information is gathered related to migrants at the destination and information is linked to the source State (place of origin) to follow up the migrants.. The behavioral outcomes of interest were those related to knowledge about HIV/AIDS, sexual behaviour, sexual practices, program exposure, and quality of health services/camps accessed by the targeted community, which have a bearing on the prevention of HIV and other STIs.

Research Methodology of A Polling Booth Survey

The research methodology of this survey uses polling booths. While conducting the survey, the selected respondents/samples are separated from each other in a polling booth environment created by sheets or cardboards. Each participant is given one ballot box separated with three colors with responses specified. Options like 'YES, No, Not Applicable' can be the responses to the questions. A pack of cards is also stacked in serial order and given to the respondents for polling in the appropriate response. These cards are usually numbered in accordance with the number of questions in the schedule or questionnaire. The researcher then explains the method of the survey with an example and a mock session. The questions are read out one by one, slowly and loudly in the local language, so that every participant hears the question clearly. The participants answer each question by dropping the card-carrying the question number into any of the three colors on the box. The card is kept outside the box if the participant does not want to respond to the question. After administering the questions, the answer cards are collected separately and the number of cards in each box for each question is counted, and the tallies are recorded in the reporting form. The group responses are shared with the participants and the discussion points are documented.

A national survey among key populations of Kenya was conducted to find the HIV Prevention Programme outcomes, which involved PBS. The anonymity afforded to PBS participants has been found to elicit more accurate reporting of sensitive and personal information regarding sexual behaviours when compared to both face-to-face interviews and selfadministered questionnaires. In the context of polling booth survey conducted in India, Bhavan, India's AIDS initiative of the Bill and Melinda Gates Foundation, was an extensive HIV preventive intervention targeting vulnerable populations in four Southern and two north eastern states of India. In the context of a comparison between FTFI and PBS based on the Ahavan program, Loundes et al. has considered PBS as a novel approach for reducing social desirability bias in HIV-related behavioural surveys in resource-poor settings.

Experience of A Polling Booth Survey

A study of HIV issues among currently married women with migrant and non-migrant husbands was conducted in the highly HIV/AIDS affected zones like Ganjam and Nuapada districts of Odisha and Gorakhpur and Basti districts of Uttar Pradesh, the survey was conducted differently. It was particularly suitable for gaining an in-depth understanding of underlying reasons and motivations regarding awareness as well as ignorance of HIV/AIDS, sexual practices, the attitude towards AIDS as a disease. It provided insights into the setting of these issues and at the same time, quantifying and measuring them.

An Edge over Focussed Group Discussion

Polling Booth Survey (PBS) inherits a multi-method approach consisting of both quantitative as well as qualitative research. It addresses the limitations of both survey and qualitative information. Quantitative and qualitative mix attempts to answer the reasons of behavior which has been quantified via PBS. Since the technique is an excellent mix of quantitative and qualitative methods, whatever information is gathered via questions which are secretly answered to, by the respondents and later measured by the researcher. The information is shared, and the discussion revolves around the responses gathered, this makes the discussion more relevant and caters to the loopholes that might have occurred while responding during the Polling Booth session.

CONCLUSION

Both the approaches, FGD and PBS relies on allowing the participants to agree and disagree to a particular question or topic with each other. This is helpful because it provides an insight into how a group thinks about an issue, about the range of opinions and ideas, and the inconsistencies and variations that exist in terms of beliefs and their experiences and practices. However, considering HIV/AIDS being a sensitive issue, the confidentiality of data in PBS is much more as the responses are kept anonymous and strictly confidential. PBS also involves a discussion session after the survey, which is, in a way, quite similar to FGD, but what is discussed about in this session is based on the responses that are tabulated immediately after the survey. Eventually, the data collected becomes more accurate and transparent. The discussions bring in several examples, and the reasons behind agreement and disagreement to opinions are explored with the names of the respondents being confidential. The chances of the mothers-inlaw sitting with the respondents are comparatively meager in PBS, and it is because the PBS setup with boxes, cards, and screens gives an ambiance of a polling booth where the idea of confidentiality automatically plays in the minds of the respondents. It generates interest, and people are able to associate seriousness with the issue being discussed.

Limitations of a Polling Booth Survey

No technique is without flaw, and neither can it be applied in all situations and all contexts. PBS also suffers from this limitation. A polling Booth survey questionnaire should not contain more than 40 questions since it is a non-interactive process. The chances of concentration lag time over the seriousness of the session could gradually reduce with more time consumption, which can eventually affect the discussion time period. Moreover, a Polling Booth Survey questionnaire can only have answers in dichotomous scales – yes-no, agree-disagree, true-false.

Though, qualitative analysis becomes interesting through PBS studies due to the discussion rounds after the sessions as the respondents psychologically tend to discuss and interact about the topic of study after responding silently.

References

- Musyoki, Helga, et al. "Changes in HIV Prevention Programme Outcomes among Key Populations in Kenya: Data from Periodic Surveys." PLoS One, vol. 13, no. 9, Public Library of Science, Sept. 2018, p. e0203784.
- 2. Bhattacharjee P, McClarty LM, Musyoki H,Anthony J, Kioko J, Kaosa S, et al. (2015): "Monitoring HIV Prevention Programme Outcomes among key populations in Kenya: Findings from a national survey," PLoS ONE 10(8): e0137007. doi:10.1371/journal.pone. 013700, webpage accessed on 31 May 2016, https://www.researchgate.net/ publication/281552055_Monitoring_HIV_Prevention_Pr ogramme_Outcomes_among_Key_Populations_in_Keny a_Findings_from_a_National_Survey
- 3. George, Binu (2010): "Polling Booth Survey: A solution to assess the behavioral impact of targeted interventions in condom usage among FSWS and MSMS," Community Life Competence, The Constellation, website accessed on 31 May 2016, http://aidscompetence.ning.com/profiles/blogs/pollingbooth-survey-a
- 4. Lowndes CM, Jayachandran AA, Banandur P, Ramesh BM, Washington R, Sangameshwar BM, et al. (2012): "Polling booth surveys: a novel approach for reducing social desirability bias in HIV-related behavioural surveys in resource-poor settings," Pubmed 16(4): 1054-62. DOI: 10.1007/s10461-011-0004-1, web page accessed on 26 May 2016, http://www.ncbi.nlm.nih.gov/pubmed/21811840
- Evans, R., Avery, P., & Pederson, P. (2000). Taboo Topics: Cultural Restraint on Teaching Social Issues. The Clearing House, 73(5), 295-302. Retrieved June 13, 2021, from http://www.jstor.org/stable/30189601

- Cambridge University Press 978-0-521-71823-3 -Undertaking Sensitive Research in the Health and Social Sciences: Managing Boundaries, Emotions and Risks Virginia Dickson-Swift, Erica Lyn James and Pranee Liamputtong Excerpt
- Grünkemeier, E. (2013). Breaking the Silence: South African Representations of HIV/AIDS. Woodbridge, Suffolk; Rochester, NY: Boydell & Brewer. Retrieved September 13, 2021, from http://www.jstor.org/stable/10.7722/j.ctt3fgn82
- El-Gawhary, K. (1998). Breaking a Social Taboo: AIDS Hotline in Cairo. Middle East Report, (206), 18-19. doi:10.2307/3012475
- Browning, M. (2012). Listening to the Particular through Action Research on HIV and AIDS. Journal of Feminist Studies in Religion, 28(2), 133-137. doi:10.2979/jfemistudreli.28.2.133
- 10. Béhanzin L, Diabaté S, Minani I, Lowndes CM, Boily MC, Labbé AC, Anagonou S, Zannou DM, Buvé A, Alary M. Assessment of HIV-related risky behaviour: a comparative study of face-to-face interviews and polling booth surveys in the general population of Cotonou, Benin. Sex Transm Infect. 2013 Nov;89(7):595-601. DOI: 10.1136/sextrans-2012-050884. Epub 2013 May 30. PMID: 23723251; PMCID: PMC3800174.
- 11. Wu P, Zhou C, Zhou Y, Ren X, Chen X, Zhao J, Deng X, Rou K, Wu Z. [Comparison between methods as polling booth survey and face-to-face interview in understanding the high-risk behavior among HIV-positive clients of female sex workers]. Zhonghua Liu Xing Bing Xue Za Zhi. 2015 Apr;36(4):340-3. Chinese. PMID: 25975546.
- 12. Falola, T., & Heaton, M. (Eds.). (2007). HIV/AIDS, Illness, and African Well-Being. Rochester, NY; Woodbridge, Suffolk: Boydell & Brewer. Retrieved September 13, 2021, from http://www.jstor.org/ stable/10.7722/j.ctt81pdq
- Higher Levels of Risky Sexual Behavior Reported in Polling Booth Surveys Than in Face-to-Face Interviews. (2014). International Perspectives on Sexual and Reproductive Health, 40(1), 46-46. Retrieved September 13, 2021, from http://www.jstor.org/stable/ 10.1363/intsexrephea.40.1.46

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