



Review

Methodological and ethical challenges in violence research



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ABSTRACT

Violence is a relevant public health issue. It is recognized as a sensitive topic to research and introduces challenges not usually found when dealing with other research topics. Researchers face a major challenge that is how to identify and measure violence as it occurs in the general population. This paper intends to discuss and raise awareness to some of the main methodological and ethical challenges related to violence research.

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Introduction

Violence is an extremely diffuse phenomenon and therefore its definition is also complex to operationalize. Notions of what is acceptable and unacceptable in terms of behaviours and what constitutes harm are culturally influenced and constantly under review as values and social norms evolve.¹ Therefore, the definition of violence is not the result of an exact scientific approach but probably a matter of judgement. The wide diversity of moral codes throughout the world, makes the topic of violence one of the most challenging and politically sensitive to address. However, an effort must be made to reach consensus and set universal standards of behaviour based on human rights in order to protect human life and dignity in our fast-changing world.

As far as public health is concerned, the challenge is to operationalize violence in such a way that it captures the range of perpetrated acts and the subjective experiences of victims, without becoming so broad that it loses meaning. In order to find a global consensus that would allow comparisons between countries, the World Report on Violence and Health defined violence as the intentional use of physical force or power, threatened or actual, against oneself, another person, or against a group or community, that either results in or has high likelihood of resulting in injury, death, psychological harm, maldevelopment or deprivation.¹

This definition covers a diversity of acts, going beyond physical acts to include threats and intimidation, whether they are public or private and whether they are reactive or proactive. However, the complexity and the variety of violence behaviours require an analytical framework to emphasize the common features and linkages between different types of violence, leading to a holistic approach of violence. For that reason, the typology of violence proposed by the World Health Organization includes three broad

categories according to the characteristics of those involved in the violent act: self-directed violence; interpersonal violence and collective violence with intention being the common ground.¹ In brief, this categorization differentiates between violence that a person inflicts upon themselves, violence inflicted by another individual or a small group of individuals, and violence inflicted by larger groups such as organized political groups, militia groups and terrorist organizations.¹

Thus, the typology proposed by the World Health Organization¹ provides a useful framework to understand the complex definition of violence and provides some clues for its study. It highlights, for instance, that interpersonal violence may take various forms and occurs most often among known and close people. However, the assessment of the magnitude of interpersonal violence in population-based studies comprises some challenges to researchers. This paper intends to discuss and raise awareness to some of the main methodological and ethical challenges related to violence research.

Assessment of interpersonal violence

Violence is recognized as a sensitive topic to research and a multifaceted problem that introduces challenges not usually found when dealing with other topics of social or health studies. Although there are systems for monitoring non-fatal violent injuries, these are typically restricted to violent injuries presenting to hospital emergency departments,² or to individuals' reports to authorities or support services. These systems do not detect unreported violence. For that reason, researchers face a major challenge that is how to identify and measure violence as it occurs in the population.

Most of this violence is not possible to measure objectively without asking those involved, directly or indirectly. The evolution of research methods, specific measures and thorough ethical reflections have contributed to the establishment of violence as a global issue, although many challenges remain in the measurement of its

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scope and nature.³ Therefore, the process of research on violence still raises specific methodological and ethical challenges. Given the stigmatizing nature of violence, over reporting is not common, and thus we expect that prevalence estimates tend to underestimate the true magnitude of interpersonal violence. Nevertheless, the World Health Organization specifically suggested undertaking epidemiological research on these issues; with the major focus being the collection of rigorously sound and internationally comparable quantitative data on interpersonal violence which is the first step taken when adopting a public health approach.

In the research process, data on violence experiences depends on the availability and willingness of the individual to recognize their involvement in a violent situation, which may depend, among other factors, on culture, on how the questions are asked, interviewer training, sensitivity and the setting in which data are collected. All of these factors need to be accounted for and respected by researchers aiming to assess violence.

In countries with strong cultural pressure to keep violence *behind closed doors* or simply to accept it as *natural*, non-fatal violence is likely to be underreported. Individuals may be reluctant to discuss violent experiences because of shame, taboos or even fear. Admitting some abusive experiences such as rape may in some countries result in death.¹ In some cultures, the preservation of family honour is a traditional motive for killing women who have been raped.

In epidemiologic research, numerous factors have been shown to influence participation rates and response quality.⁴ The methods for contacting eligible participants, the modes of questionnaire administration and the interviewer characteristics are likely to influence research results.^{5–7} Thus, when planning the collection of information on abuse, researchers face critical design decisions that include options on the sampling frame, the structure and the mode of questionnaire administration and also the setting where information collection takes place. There are several recommendations developed in order to assess interpersonal violence, in particular, using structured questionnaires that enable greater consistency in the way questions are asked, the training of interviewers, the development of a research protocol to guide interviewers in problem solving and supervision during data collection.⁸

A systematic review of the instruments used in the assessment of domestic violence, including violence in intimate relationships, shows that researchers tend to choose the instrument according to the method and setting of administration. The variability of instruments used in the evaluation of violence implies additional difficulties in collecting data on the extent of this phenomenon and the respective comparison between results from different studies.⁹ However, most researchers are in agreement that direct questioning about experiences of specific acts of violence over a particular period of time should be used rather than using more open-ended and generic questions.

Regarding the context that frames the conduct of the interview, researchers often opt for the interviews to take place at the participant's home, in order to improve participation rate, as they do not have to move out of an environment that is familiar to them.⁸ However, home interviewing involves greater costs, the possibility of interruptions by telephones or family members, and may put the interviewer, and eventually the respondent, in a situation of greater vulnerability, especially when the abuser lives with the victim.¹⁰ These concerns are especially relevant when addressing violence but few methodological information is available reporting the effect of place of interview on participation and response rates.^{11,12} A previous study showed that the interview setting has no influence both in participation rate and in the prevalence estimates of different types of violence in the elderly, at least when describing the reality of a social context similar to the ones found in southern European countries, like Portugal.¹²

The mode of questionnaire administration has been described to influence participation and also disclosure of abuse.⁵ It is possible to choose between face-to-face interview, post mail/self-administered questionnaires or telephone questionnaires, or using some combination of these.¹³ The self-administered questionnaire generally has more advantages than face to face administration or by telephone.⁸ However, the absence of responses tends to be higher in self-administered questionnaires and the participant does not have the opportunity to ask for clarification. Moreover, if the self-administered questionnaire is mailed, it is more likely to get a low response rate.

The least burdensome method is probably the personal face-to-face interview as this only requires the respondent to speak the same language in which the questions are asked, and to have basic verbal and listening skills.⁵ Compared to other modes of data collection, questionnaires administered by interviewers have the advantage of reducing missing items and there is the possibility of helping participants to better understand the items.¹⁴ However, this is a more expensive option and interviewer-interviewee interaction potentiates the effect of the interviewer on the results^{8,15–17} which worsens in the evaluation of sensitive topics¹⁸ such as violence. In general, the performance of each method of collecting information depends on the context in which it is administered.

Also, the attributes of the interviewers may affect the participants' disclosure. There are some recommendations for the recruitment process of interviewers in violence research.^{10,19–23} Gender may be one of the most identifiable interviewer characteristics and it is likely that respondents invoke gender-based stereotypes when editing their responses.¹⁸ All of the guidelines for violence research recommend the recruitment of female interviewers²¹ claiming that female interviewers are more likely than males to rate respondents as frank and honest.¹⁸ In fact, some studies show differences in results when interviews were performed by female or male interviewers.²⁴ However, it is still unclear whether there are gender differences in the validity of data collected. Further, the influence in participants' disclosure of interviewers' attributes such as gender, personality traits or attitudes is even less known.

Regardless of their attributes, to improve data quality on violence, special attention should be given to interviewer training. All research requires substantial investment in interviewer training in order to provide a common questioning frame and similar strategies to handle unusual or unexpected circumstances during the interviewing process.⁸ Violence research requires particular attention to this process. A two-stage approach is advisable for preparing interviewers to work in violence research. First, interviewers must learn about interpersonal violence and training must include consciousness raising about the topic, causes of violence, myths and facts, diversity and cultural sensitivity, crisis intervention, skills, safety planning, and community resources and supports.^{21,22,25} If interviewers are familiar with these topics, they will be better prepared to handle unanticipated situations. Similarly, discussing violence issues during training would increase sensitivity to violence.²⁶ The second stage involves teaching how to conduct the interview. At this stage, interviewers may work through a successive series of practice exercises, including watching model interviews and conducting mock interviews with other team members.²² After this two-stage approach, some of the selected interviewers would not be prepared for fieldwork and therefore the researcher would have to decide who they would be entrusting with this responsibility.²⁵

In the multinational World Health Organization (WHO) study on domestic violence, team-members invested considerable effort training local, lay community women to be interviewers.²¹ However, because of time constraints, they also brought in a group of professional interviewers to help complete data collection. When

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