

# Practical class 2

Methods for sociological research in medicine.

Questionnaire | Observation | Interview | Documents review

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Conspectus topics (32,33)

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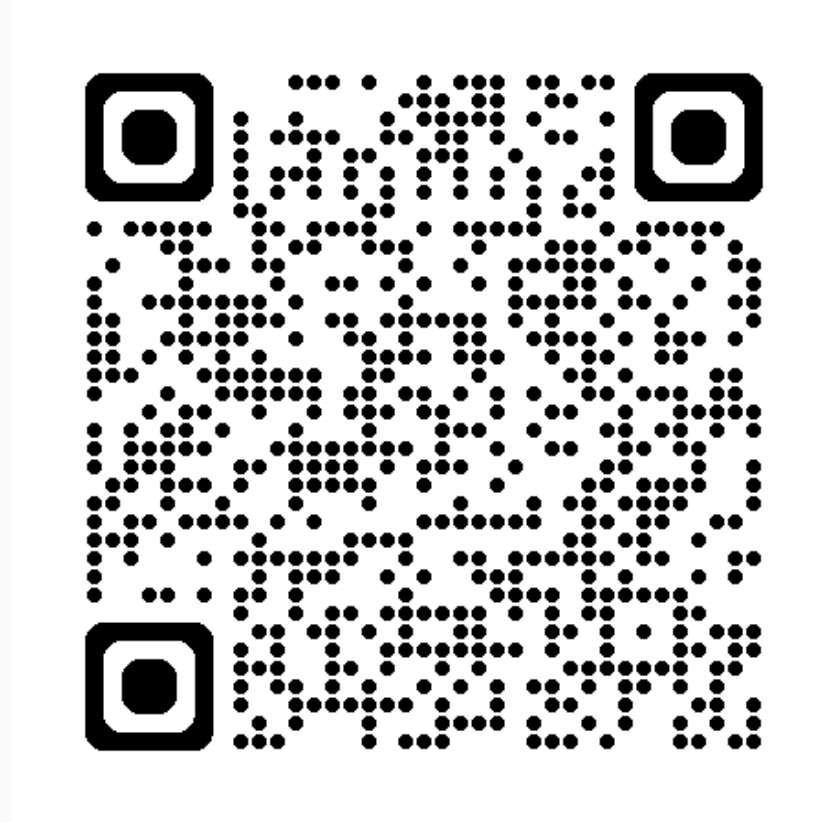
Academic Year 2025/2026

Department of “Social Medicine and Public Health”



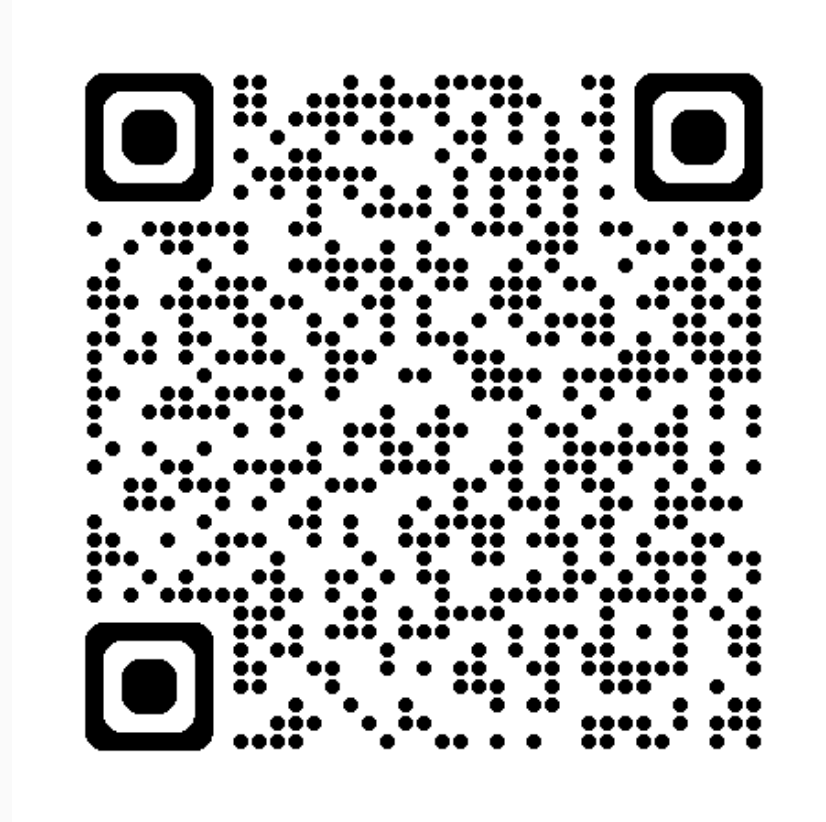
download the presentation from <https://tinyurl.com/social-med-class-02>

# 15-minutes reading assignment



<https://kostadinoff.github.io/learning.html>

# Group tasks



<https://kostadinoff.github.io/tasks.html>

# Sociological Research in Medicine

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# Medical Sociology — Definition

- Medical sociology is a branch of sociology that examines how **social factors influence health**, illness, healthcare delivery, and health outcomes.
- It studies the organization of healthcare systems, patient–provider relationships, health inequalities, and the social determinants of disease.

# Social vs Sociological Problem

- A social problem is a condition perceived by society as harmful or undesirable (e.g., poverty, violence, unequal access to healthcare).
- A sociological problem is an analytical question formulated by researchers to understand the social mechanisms producing that condition.

# Sociological Research — Foundation

- Sociological research constitutes an essential pillar for scientific management of healthcare systems and the advancement of social medicine.
- These investigations extend beyond data collection, serving to formulate and evaluate optimal managerial decisions while examining mechanisms through which policies shape human behavior and social relationships within healthcare organizations.

# Application Domains

## Health and Illness

Social determinants, illness behavior, health-seeking patterns

## Healthcare Organization

Delivery systems, professional relationships, institutional dynamics

## Knowledge Production

Medical theories, diagnostic categories, expert knowledge formation

## Social Dimensions

Inequities, disparities, access barriers, community needs

# Purposes of Social Research

- **Exploratory** — generating fresh insights in underresearched areas (telemedicine adoption, pandemic adaptation)
- **Descriptive** — thick descriptions of lived experiences (patient narratives, treatment navigation)
- **Explanatory** — establishing causation and correlation (vaccination attitudes, screening barriers)
- **Action Research** — community engagement and transformation (participatory health planning)
- **Evaluation** — assessing program effectiveness and policy impact (intervention outcomes, implementation fidelity)

# Empirical Sociological Research

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# Research Stages

**Preparation Phase** : Problem formulation, literature review, conceptual framework development, research design selection, sampling strategy, instrument development

**Data Collection (Fieldwork)**: Pilot testing, data gathering, quality control, documentation, ethical monitoring

**Analysis and Interpretation**: Data processing, pattern identification, theoretical integration, triangulation, reporting

# The Questionnaire

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# Questionnaire — Core Instrument

- The questionnaire represents a fundamental tool for collecting individual sociological information.
- It comprises **building blocks—questions reflecting specific characteristics of researched individuals.**
- Questionnaires serve diverse functions: gathering data on health status, behaviors, exposures, and experiences across populations.

# Question Typology

## Structural Position

- introductory
- filtering
- main
- identification
- control

## Expected Response

- categorical
- ordinal
- continuous
- multiple response

## Formulation Type

- open-ended
- closed-ended
- semi-structured

## Information Domain

- behavioral
- attitudinal
- knowledge-based
- demographic data

# Design Requirements — Essential Standards

- **Institutional Identity** — specify organizing institution and study purpose
- **Participant Briefing** — address explaining selection, purpose, procedures, anonymity assurance, gratitude expression
- **Logical Structure** — coherent question sequencing avoiding double negation
- **Educational Calibration** — tailored to respondent literacy and comprehension levels
- **Temporal Feasibility** — 30–40 minutes for self-administered surveys, maximum 1 hour for interviews
- **Realistic Data Requests** — avoid quantitative information respondents cannot provide at moment of completion

# Survey Method

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# Survey



# Survey — Definition and Forms

- A scientific research method gathering information through **written questions and written responses**, systematically organized in specially prepared questionnaires.
- Information collection occurs through **standardized instruments** enabling large-scale data acquisition.

# Survey Delivery Modes

- **Direct Group Survey** — simultaneous administration to assembled respondents (classroom, workplace settings)
- **Direct Individual Survey** — in-person questionnaire completion with researcher present
- **Mail / Online Survey** — remote completion without researcher presence (postal distribution, web platforms)
- **Structured Interview** — oral administration following standardized protocol

# Interview Method

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# Interview



# Interview — Direct Verbal Communication

- The interview represents inquiry through **direct verbal communication** between two or more individuals via oral questioning and responsive dialogue.
- Distinguished from journalistic interviews, employment interviews, legal consultations, and clinical history-taking by **research-specific purposes and protocols**.

# Interview vs. Clinical History-Taking

## Clinical Interview

Diagnostic categorization, treatment planning, fitting responses into predetermined medical categories, medico-legal documentation

## Research Interview

Open exploration of meaning and experience, discovering participants' own frameworks, avoiding imposed assumptions, systematic data collection

# Interview Requirements

- Interviewees should never **experience interaction as interrogation**. Researchers must gain trust through respectful engagement, transparent communication, demonstrated confidentiality commitment.
- During conversation, opinions and beliefs require **non-judgmental reception—avoid** criticism or lecturing.
- Progress **from general questions gradually deepening conversation** according to research objectives, allowing participants to guide thematic development.

# Interview Classification

## Questionnaire Structure

- Structured,
- Semi-structured
- Unstructured formats

## Interaction Mode

- Face-to-face
- Telephone,
- Online platforms

## Participant Number

- Individual
- Group interviews (focus groups)

## Data Depth

- Standardized scripts,
- Exploratory probes,
- Follow-up clarifications

# Focus Groups — Definition

- A focus group is a qualitative research method involving a structured discussion with a small group of participants led by a trained moderator (8-12 individuals).
- The method explores attitudes, perceptions, experiences, and social norms through interaction between participants rather than through individual responses alone.
- Data are generated not only from what people say, but from agreement, disagreement, and group dynamics.
- Widely used in public health, health promotion, and health services research.

# Focus Group Applications

- **Rapid Health Assessments** — 2010 Pakistan floods: assessment teams conducted informal focus group discussions with women and children gauging immediate health needs and risks in flood-affected districts. Qualitative data complementing quantitative resource counts.
- **Participatory Planning** — cervical cancer screening program design involving consumer and minority group focus groups identifying access barriers (facility hours, wheelchair accessibility).
- **Corporate Needs Assessment** — carotid endarterectomy rate study employing purchaser-provider workshops understanding low referral rates for surgery in certain districts.

# Observation Method

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# Observation



# Observation — Direct Behavioral Assessment

- Observation constitutes a method collecting information through **direct or indirect monitoring of individual or group behavior in natural environments.**
- Reduces reliance on verbal formulations potentially shaped by social desirability, limited articulateness, or theoretical unfamiliarity.

# Observation Dimensions

- **Researcher Involvement** — complete participant, participant observer, observer participant, complete observer
- **Participant Awareness** — overt observation (disclosed presence), covert observation (undisclosed presence)
- **Behavioral Focus** — verbal behavior, non-verbal behavior, combined analysis

# Observation Strengths

- **Systematic and Planned** — rigorous protocols enabling replicability
- **In-Depth Study** — prolonged engagement revealing behavioral nuances
- **Real-Time Documentation** — capturing events as they unfold
- **Technical Enhancement** — audio/video recording enabling repeated examination
- **Direct Access** — unmediated by verbal representation
- **Temporal Depth** — repeated observations distinguishing routine from exceptional

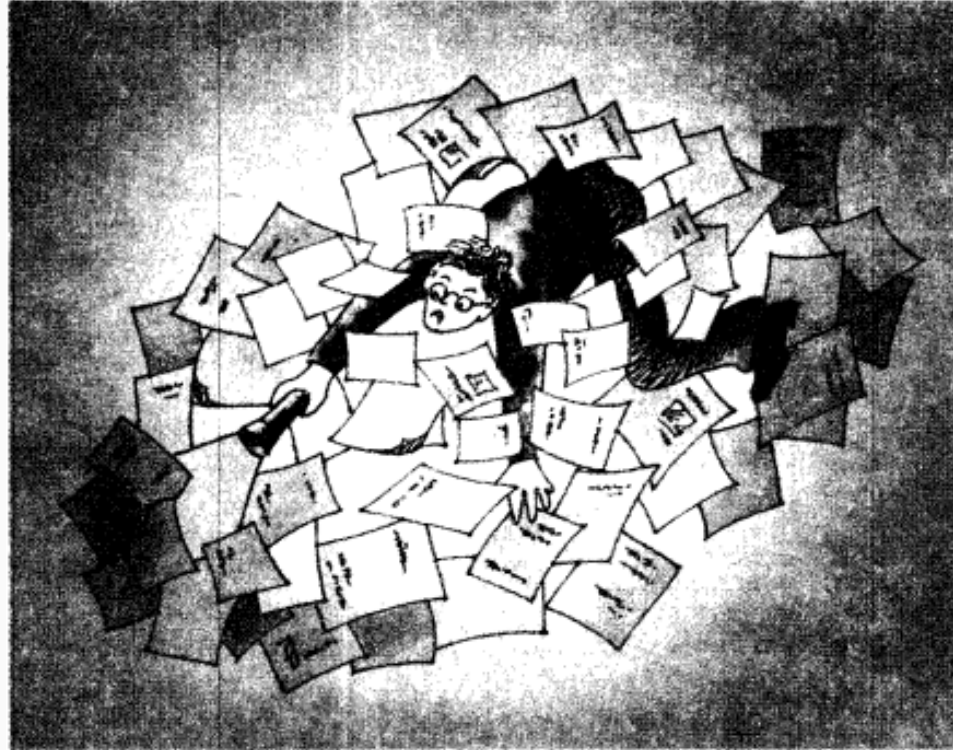
# Observation Limitations

- **Present-Focused** — documents current events, limited historical reach
- **Scope Constraints** — feasible for particular settings, challenging for population-level phenomena
- **Resource Intensive** — substantial personnel investment, extended field-work timelines
- **Subjectivity** — observer perceptions vary despite systematic protocols
- **Ethical Concerns** — recording creates permanent records requiring explicit consent
- **Time Demands** — analysis requires 5–10 times collection duration
- **Hawthorne Effect** — behavioral changes from awareness of observation

# Documentary Method

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# Documentary Method



# Documentary Analysis — Archival Inquiry

- Documentary method constitutes a procedure for collecting primary empirical information from documents, created for other purposes.
- Documents include **written sources** (official records, personal materials) and **non-written materials** (photographs, sound recordings, video documentation, physical artifacts).

# Document Classification

## Written Documents

- Official (public records, institutional documents, personal official materials)
- Unofficial (typically personal correspondence, diaries, memoirs)

## Non-Written Documents

- Visual materials (drawings, photographs, films)
- Audio materials (sound recordings, oral histories)
- Material culture (artifacts, built environment)

# Analysis Approaches

## Content Analysis

- Quantitative coding, qualitative interpretation

## Dissemination Analysis

- Distribution channels, audience reach

## Author Analysis

- Creator intentions, institutional positioning

## Audience Analysis

- Reception patterns, interpretive communities

**Effect Analysis** — documenting impact, behavioral changes, policy consequences

# Documentary Research Advantages

- **Objectification** — formal records document decisions, policies, actions creating audit trails
- **Retrospective Capacity** — historical investigation spanning decades or centuries
- **Developmental Trajectories** — revealing change patterns, turning points, transformation processes
- **Stability** — repeated analysis by different researchers using varied frameworks
- **Contradiction Detection** — exposing discrepancies between accounts and institutional representations
- **Typological Characterization** — revealing how particular groups get represented across contexts

# Documentary Research Limitations

## Representativeness Gaps

Routine activities, informal communications, marginalized perspectives escape documentation. Hospital records capture formal medical care, missing health management outside professional systems.

- **Information Context** — prepared for other purposes (medico-legal functions, regulatory compliance, billing) rather than research
- **Dual Selectivity** — creators filter what gets recorded; researchers filter what gets examined
- **Distortion Risk** — deliberate misrepresentation serving institutional interests, sanitized narratives

# Methodological Integration

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# Triangulation — Multi-Method Design

- Combining questionnaires, interviews, observation, and documentary analysis strengthens analytical conclusions. Each method addresses different evidence dimensions:
- Questionnaires capture population-level patterns
- Interviews reveal subjective meanings and experiences
- Observation documents actual behaviors in natural settings
- Documents provide historical context and institutional perspectives
- Focus groups expose collective sense-making and group dynamics

Thank you for your attention!