

Short title (for running head): A rejoinder

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It's not all bad: A rejoinder to "Collecting qualitative data during a pandemic" by David Silverman

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David Silverman's reflections on collecting qualitative data during a pandemic provide an important and timely prompt on the issues affecting all qualitative researchers regardless of position and academic seniority. He rightly points to the gendered impact on research productivity, although the impact of the pandemic on research could easily be extended and further categorised as relating to those with caring responsibilities (for both older and younger people – and in the case of the 'Sandwich generation' (Ro 2021) responsibilities for people at both end of the life course). In a similar vein, it is also important to reflect on the impact of circumstances of living. Impacts are likely to be felt to a greater extent by those living in multi-generational households or flat shares in which there may not be the space or privacy to work, let alone move data collection online. At the other extreme are researchers who live alone who lack face-to-face contact with people and have become reliant on online interactions for discussion and planning of research as well as data collection, and for whom this may more easily shift into a notion of a 'new normal'. In this way, we can see how the personal circumstances of researchers themselves are to an even greater extent than usual dictating what is possible in terms of research. Or, is it that this has just become more visible?

I would take some issue with Silverman's point in relation to tenured staff being able to shift their focus and delay their field projects. This may be the case, but project leads are at

the behest of their funders and funding may need to be spent within a specified timeframe or else returned to the funding body. Funders may offer a 'no cost extension', but that will reduce the overall budget in real terms, affecting what can be achieved from the original funding while still needing to deliver on the original promises. I would also argue that for tenured staff the need to convert face-to-face teaching to an online format has reduced the time and energy they have left for rethinking research. Moreover, for those who lead courses on qualitative research methods they are left to debate whether (1) to try and teach the established course about how to conduct qualitative research in 'normal' times when we can meet/interact with people face-to-face, albeit with the teaching itself delivered online; (2) to embrace the brave new world and shift to teaching about online methods; or (3) to attempt some hybrid of teaching about both face-to-face and online research. Finally, tenured staff are also likely to feel responsible for contract research staff coming to the end of their contract with prospects for work diminished by the pandemic.

Silverman points to an apparent seamless movement from face-to-face to online equivalents:

However, for the majority of researchers who prefer to use manufactured research data, minimal adjustments have been necessary. Face to face interviews can usually readily be replaced by online equivalents (James and Busher 2016). And online focus groups can provide good quality, recorded data.

I believe this argument is simplistic and fails to acknowledge the thought associated with such a shift. Parallels can be made with the shift to virtual medical appointments. In a speech given at the Royal College of Physicians last summer, the UK's Secretary of State for Health and Social Care, Matt Hancock, proclaimed that in the future remote medical appointments

would be the norm, with physical appointments coming second and only if absolutely necessary:

So from now on, all consultations should be tele-consultations unless there's a compelling clinical reason not to. Of course if there's an emergency, the NHS [National Health Service] will be ready and waiting to see you in person, just as it always has been. But if they are able to, patients should get in contact first, via the web or by calling in advance. That way, care is easier to manage and the NHS can deliver a much better service. (Hancock 2020: 25.54–26.23)

This statement fails to take account of what is lost in medical consultations in a shift away from face-to-face, focusing only on what are perceived to be the gains, with little account for the complexity involved (Shaw *et al.* 2018, Mroz *et al.* 2021). I would argue this is the same for shifting to online interviews and focus groups. Online qualitative research in the shape of interviews or focus groups should not be judged as equivalent, nor in terms of good or bad, but rather as different, and as such decision making about the approach to be taken requires considerable thought.

There are many advantages that can be seen in the shift to online methods of data collection. One relates to availability, as someone could fit a 30-minute interview in between other meetings with no fear of it overrunning, as they could simply leave the meeting. Another key advantage is the lack of travel, which not only saves time, money and effects on the environment but also provides access to people around the globe. So, for my PhD students they can connect with people across the country and indeed the world to do their research. After some discussions in relation to information governance and negotiation with ethics committees, data from research interviews and focus groups can be collected using a

secure online platform. This has the advantage of providing visual data that can be used to enhance the depth of analysis. Students of mine for whom English is not their main language have found the addition of visual data helpful in interpreting their linguistic data. Some students are even using the automated transcript function as the basis for their own transcriptions, again saving time and money (although I have to say the quality is questionable).

Online research also allows some visual access to a person's surroundings; however, it is important to note that what can be seen by the researcher is determined by the participant to a greater extent than is the case when face-to-face. The reflections Silverman shares in his discussion piece are important and thought provoking; as researchers, we may see what is happening around the participant, but viewing by screen cannot create the same connection or access into people's worlds as visiting someone's home and meeting partners, children and pets in person. Silverman's example also raises the issue that we cannot be sure who is also in the house/room with participants in research and how this might affect interactions.

Crucially, when research is remote, this reduces opportunities for initial building of rapport, potentially making research more of a transaction than a shared discovery in relation to a topic, albeit that the topic is chosen by the researcher.

When we consider naturalistic data, although the opportunity to observe settings in person is not possible, the pandemic has created a number of opportunities for the collection of other naturalistic data. Now that meetings are held online on platforms which provide recordings at the touch of a button, then once ethics and information governance permissions have been granted data can be collected easily and unobtrusively with no need for cameras or audio recorders, the recording being delivered directly and securely to one's computer. This gives access as a participant or non-participant to a range of decision-making bodies providing rich data for analysis.

It is also important to consider other sources of online data including as Silverman points out, written communication that may provide a window into the world of people and the institutions they are part of. This can be material that is simply distributed online, such as uploads of meeting notes, discussion papers and policies, or content that is native to online platforms such as online forums or social media (e.g. Twitter or Facebook). However, it should be noted that research using online communications requires careful consideration of ethical concerns (Woodfield 2018).

Just as the pandemic has provided an impetus toward remote medical consultations, it is possible that continued calls for secondary analysis of qualitative data may gain greater traction. This is to be celebrated if it leads to more complete analysis of existing data, aspects of which can be neglected when researchers' contracts end and grant holders feel under obligation to focus on attracting further funding for the next new project.

The pandemic has hopefully made researchers think more about what data they collect, and how and why and to be innovative in formulating and answering their research questions. A positive outcome of the challenges of the global pandemic would be greater engagement in the planning and use of qualitative research techniques. Interaction between people is at the heart of qualitative research, whether this be mediated via an online platform, a written document, an interview, a conversation or a formal meeting. Such sources can be mined using qualitative analytic techniques with the advantages and limitations of online research assessed just as they are for face-to-face observations, interviews and focus groups. The hope is that we as a research community that employs qualitative research techniques will emerge from this pandemic with a richer toolkit, having reflected on what we can learn from a range of qualitative methods, both face-to-face and online, so leaving qualitative research stronger from increased reflexivity.

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