

# SAGE Research Methods Cases

## Sociology Submission for Consideration

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### Case Title

In-Depth Qualitative Interviewing: Lessons Learned from Interviewing Vulnerable and Hard-to-Access Groups as Part of a Study into the Inquest Process.

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**Discipline: D3 [please do not alter]**

### Sub-discipline

Crime and Deviance [SD-Soc-4]

### Academic Level

Postgraduate

### Contributor Biographies

Melanie Pearson is a postgraduate research student at the University of Essex. Her work focuses specifically on the impact of the UK inquest on bereaved families, particularly with regard to cases of road death. She lives in Colchester, Essex with her husband and two children.

## **Published Articles**

[insert an APA-style reference for any publications resulting from this research]

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## **Abstract**

The aim of this case study is to provide a snapshot of my experiences of conducting in-depth qualitative interviews with bereaved families and coroners, as part of the fieldwork needed for my doctoral thesis. My thesis is concerned with the purpose of the UK inquest today and its emotional impact on the people touched by the process, with specific regard to the families of those killed on the roads in the UK. In considering my use of the in-depth interview, I highlight problems encountered along the way and the lessons I learned.

## **Learning Outcomes**

By the end of this case study students should be able to:

- Explain why it is necessary to plan qualitative fieldwork with vulnerable and/or hard-to-access groups so far in advance, including the identification of potential pitfalls;
- Describe the impact (emotional and otherwise) that this type of research might have on the researcher themselves, and recommend ways that this impact might be minimized;
- Discuss how any emotional impact on the researcher might actually be beneficial to the research project; and
- Recognise and relate the importance of the balance between tenacity and compassion when interviewing people about sensitive and highly confidential topics.

## **Case Study**

### **Project overview**

### **Study background**

Researchers have long identified 'stages' of grief which are common for those caught up in the grieving process (Kubler-Ross, 1969; Worden, 1991). Whilst people can and often do suffer intensely from the loss of a significant person in their lives, it seems that most are nonetheless able to come to terms with it. Sudden bereavement is a different experience, however, and can follow a very different trajectory, particularly if the person's demise is violent and traumatic. Indeed, the impact of sudden bereavement following a traumatic loss may be so enormous that it can change lives forever (Mastrocinque et al., 2015).

One such type of sudden bereavement is when a life is lost through a road traffic collision. In a circumstance such as this, and where no-one is deemed to be culpable for the death of a person on the road, the families and friends of the deceased person or persons face a part of the Criminal Justice System that is little known to the majority of the general public; the inquest. Potentially, the impact of facing the inquest system at a time of such intense personal loss is twofold: families must deal with the emotionality of the loss itself whilst at the same time navigating their way through a system which has the potential to further compound their grief.

What has been discussed at length in the literature pertaining to those suffering this type of bereavement – sudden, violent and traumatic – is their status as 'secondary victims'. Zedner (2002) purports that those bereaved because of violent crime for example, and despite not being the primary victim, often suffer the most abject trauma; words such as 'overwhelming' and 'soul-destroying' abound in the literature on traumatic grief. A second use of the term 'secondary victim' has been used by commentators who suggest that the Criminal Justice System can have a deleterious impact on the families and friends of primary victims who find themselves caught up in that process (Sanders & Jones, 2007). Scholars suggest there are various reasons for this sense of victimisation in the criminal court system, ranging from feelings of the process being a 'contest' (Parsons & Bergin, 2010), through loss of control

over the body of the loved one (Casey, 2011), having no control over or input into the cases presented, to criticism of the portrayal of events with regards to what happened in the perpetration of the crime itself (Thiel, 2013). What is less clear is whether the system has a similar impact on families when their loss is not deemed to have been the result of a criminal act and where they face an inquest rather than an adversarial court process.

### **Study aims**

My doctoral research considers the impact of the inquest when a collision on the road has led to someone's death. In doing so, my overall aim is to ascertain the impact and purpose of today's inquest, including contrasting the inquisitorial (fact-finding) nature of the inquest with the adversarial (opposing 'sides' debate the evidence) system of the criminal court. In terms of data collection and through the use of in-depth, unstructured qualitative interviews with coroners and bereaved families, I sought to:

- understand the emotional impact that the system has on the families who take part;
- investigate the emotions that result from enduring the 'no-blame' system of the coroner's court; and
- assess the adequacy of the system from the perspective of those who find themselves engaged in it.

More specifically, I asked bereaved families to elucidate the impact of such a loss on them, in terms of both the emotional experience of the death itself and the impact of their subsequent involvement with the inquest process. In pursuing the answer to these questions, I also sought the views of the professionals involved in the process so as to deduce whether the 'secondary victimisation' thesis put forward by commentators exists in the coronial setting as well as the criminal court.

In total, I conducted in-depth, qualitative interviews with seven bereaved families (four of whom I interviewed both pre- and post-inquest as well as attending the inquests themselves), seven coroners, a Family Liaison Officer, a barrister and two charity workers. I also attended and undertook observations at nineteen inquests and a crown court trial.

## **Laying the foundations for fieldwork**

### **Gatekeepers**

To gain access to bereaved families it was necessary for me to enlist the help of gatekeepers in the form of the leading national charities in the UK dealing with death from road collisions, namely Brake and Roadpeace. These institutions exist to provide practical and emotional support to the bereaved families who are their members, as well as campaigning for changes both in laws about driving, and to what they perceive to be an inadequate inquest system. I had, in fact, contacted these groups prior to the commencement of my research degree; indeed, I felt it was going to be difficult to define the parameters of my research, and more specifically my fieldwork, without doing so. I wrote a letter, outlining what I was hoping to achieve through my research and explaining that I was applying for research funding to do this. Thus when I re-established contact with them having been awarded funding, the case for allowing me access to their members was stronger; not only had I been allocated funding for the project but I had ‘passed the test’ in terms of my sincerity.

As expected, these groups were extremely helpful in terms of introducing me to bereaved family members. The relationship between the researcher and the gatekeeper is of utmost importance and I felt that it took some time for me to gain the trust of those working within these organisations. To aid these relationships, I ensured I provided regular updates to them

in terms of which families I had spoken to and when, and where in the inquest process they were. Whilst this may have been a duplication of information for them, I felt it added to the overall impression of professionalism and ability that I was attempting to convey; once I had conducted two or three family interviews, gatekeepers could assess my probity through direct feedback from families, which resulted in access to other families becoming more straightforward.

### **Gaining consent**

Bereaved families fall within the 'vulnerable' grouping for the purposes of interviewing. As such, and as a researcher, it was important to acknowledge the 'duty of care' that one has when dealing with such individuals. Crucial to the success of this study was the commitment to communicating sensitively, professionally and effectively with individuals and families who were often in the depths of despair. Clearly a consideration of ethics and consent was paramount before individuals were even approached, using a language that conveyed an appreciation of the delicacy and enormity of their situation.

Prior to the commencement of interviewing I made a submission to the University of Essex Research and Enterprise Office for ethical approval of my research. My intention was to provide gatekeepers with participant information sheets which explained the purpose of the research and which they could then pass onto bereaved families prior to any interviews taking place. Once respondents had agreed to being interviewed and, at the interview stage, I would provide them with a Certificate of Consent. This hardcopy remained on file as evidence of consent. Verbal consent would also be sought at the commencement of each interview and recorded as part of the interview itself.

The participant information sheet outlined that I would be asking participants if I could record interviews, and this request was made again verbally prior to an interview taking

place. In such an event, none of the respondents were identified by name on the tape and I used a bespoke digital audio device which I felt professionalised and formalised the interview more than if I had used a mobile phone (which may also ring etc). It was acknowledged, both on the information sheet and again at the beginning of interviews, that the information that I recorded was confidential, and that no-one else except myself and my research supervisor had access to the information documented. The information sheet also explained that digital voice recordings were to be kept as electronic files and coded and secured using password protection, and that any recordings would be destroyed when the research project is completed. I took written notes of those interviews where respondents preferred not to be tape-recorded, although in practice this was only one participant interview out of a total of nineteen.

I outlined to interviewees that I would be happy to return transcripts of tapes for comment to ensure they accurately reflected our conversations. Finally, I assured participants that real names or addresses would not be used in any project reports, or given out to any members of the public, but ensured that they were aware that the content of the interviews may be used as part of my thesis or in academic published papers. I explained that pseudonyms would be used in place of both people and places, to ensure identity and privacy was protected.

### **Engaging hard-to-access groups**

Gaining access to coroners (an inherently difficult group to reach due to the limited access the public has to such individuals) proved rather more difficult than I had anticipated. My initial, face-to-face encounter with one coroner prompted suspicion about the work I was doing and I was subsequently refused an interview. After a short period of feeling disheartened, I set off down the networking road, approaching a Justices' Clerk whom I knew from my time as a Magistrate some years hence. He subsequently put me in touch with a

local coroner he had a relationship with, which led directly to an interview. This access was invaluable in terms of provoking a 'snowball' effect; not only was my credibility with other coroners enhanced as each one vouched for me to the next, but I could take advantage of the leverage that having now spoken with a 'colleague' provided me.

This was a steep learning curve with an important lesson attached. It would have been easy to assume that an initial negative response was going to eventuate with all coroners.

However, not only does tenacity reap rewards, but when it comes to hard-to-access professional groups, outside links, however tenuous they may appear, can prove invaluable.

### **Location and timing considerations**

It is easy to underestimate the time commitment involved in the data collection part of a project such as this, whereby lengthy, in-depth and unstructured individual and group interviews are central to the fieldwork. It became clear that I would need to be prepared to travel to any location to interview a bereaved family or a coroner, given the reduced emotional capacity of the former and the demands on the time of the latter. This meant that I was reluctant to turn any offer of contact with either group down, and also meant travelling between 200 – 300 miles on many occasions to collect data. When possible, I attempted to group visits together, including attempting to interview more than one coroner on a visit to a court where there were several available. I learned never to make assumptions about whether people would actually be available when I arrived, how amenable they would be to being interviewed (despite often having agreed in the first place), and how long interviews would take. As a qualitative researcher, flexibility and patience are paramount.

### **Research methodology**



## **In-depth interviews**

My wholly qualitative research design required the collection of in-depth, unstructured interviews. These differ from survey research (whereby exactly the same questions are asked of each participant in a set format) or semi-structured (also known as ‘focused’), interviews, which are more specific in terms of the questions they ask and require more preparation by the researcher (Rubin & Rubin, 2011; Seidman, 2006). In-depth unstructured interviews commence with an open, very broad question, which enables the interviewee to talk about their experiences, explain how they feel or what they mean, and provide examples to enhance this explanation. This type of interviewing is particularly useful in studies researching some vulnerable populations, as they can provide a form of therapy (or ‘give voice’) to the interviewee, who feels that they are being listened to and taken seriously (Liamputtong, 2006; Ragin & Amoroso, 2010). This was very much the case with my research.

In my fieldwork, the in-depth interviews I conducted with bereaved families, coroners and other support workers, lasted between twenty minutes and four hours and twenty-two minutes in length, and provided a wealth of rich information about the effect on, and impact of, the death and the inquest system upon these families. My intention is that for one chapter of my doctoral thesis, I will use the data I collected to write a case study based on the experience of *one* of the bereaved families. In the case of this individual, I was able to follow their journey from shortly after the death of their family member, interviewing them ten weeks after the death, attending the inquest with them, and then interviewing them again ten days after the inquest.

It is important to recognise, and not to underestimate, the emotional effect that interviews such as these can have, not only on the interviewee but also on the person conducting the

interview, something Morse et al. (1998) call the ‘compathetic response’. I very much found that I was ‘carrying around’ a lot of the sorrow that my participants had expressed. In one way this was positive, and showed that I was able to feel some level of empathy with the families with whom I was engaging. However, it was also problematic on occasion when I was unable to access support soon after the interview had taken place. Ensuring support is available on a regular and sustained basis throughout this type of fieldwork would be a recommendation I would most definitely make to researchers embarking on a study involving vulnerable groups, but it should be recognised that this isn’t always easy. Unlike with therapeutic or ‘care worker’ type roles whereby therapeutic/emotional support is often provided as standard, there is no formal support of this nature available for researchers (Hubbard et al., 2001). In my case I was able to speak with my supervisor and two friends who are therapists on an informal basis, which necessitated my acceptance that I may need to live with my emotions until I was able to access these people.

### **Inquest observations**

Throughout my fieldwork I took notes of all conversations undertaken with all involved parties, from professionals such as coroners and the police, to bereaved families and the groups who support them (Emerson et al., 2011). In addition, I undertook observations at nineteen inquests and a crown court trial, making fieldnotes of all events (Phillips & Earle, 2010). It took some time before my fieldwork notes became less ‘factual’ and more ‘reflective’ in terms of incorporating my thoughts on what I was hearing and seeing around me, rather than simply documenting what was actually happening. Whilst recognising this very early on in the process and feeling concerned that my fieldnotes were not reflective enough, I now understand that this is very much a case of experience and technique, which will develop over time. From this perspective, hindsight is a wonderful thing.

## **Practical lessons learned – a summary**

Summarily, it is important to realise that collecting data through the use of in-depth interviewing, particularly with regards to vulnerable and hard-to-access groups, is an inherently uncertain and to some extent, all-consuming process. The following points highlight the lessons I learned over the course of my data collection period:

- Finding the right balance between making early enquiries of gatekeepers whilst ensuring everything is in place ethically, is very important. In the same vein, and once one has a ‘foot in the door’, I would recommend letting authority figures know in advance what you want to talk about. This can allay suspicions and allows time to build up more of a relationship, which can prove useful.
- Networking is king! Take advantage of the fact that people will have a multitude of links within the world you are investigating; ask contacts you make early on in the process whether they know anyone else whom you might speak with or contact, and contact them, even if you do not return to them until much later on.
- Do not underestimate: time, distance or emotional impact. Interviews like mine can be exhausting for all concerned, and this needs to be taken into account when planning a fieldwork trip several hours away. Expect that it may be necessary to invest twenty four hours to get three hours of data and that these interviews are inherently tiring and stressful to undertake; two lengthy interviews in a single day is likely to be ample.

## **In conclusion**

The in-depth interview, particularly when undertaken with vulnerable groups like bereaved families, and the different challenges of difficult-to-access groups, are an unpredictable and often onerous task. However, the rewards in terms of the richness of the data that can be achieved and the knowledge of the emotional benefit (however temporary) that participants who are suffering can gain from you as a researcher, more than make up for the intractability of the effort in the field.

## Exercises and Discussion Questions

1. How far does the 'duty of care' extend to a researcher, when interviewing vulnerable groups?
2. What are the 'pros' and 'cons' of using an unstructured, narrative interview approach as against a semi-structured interview approach?
3. In what ways might hard-to-access groups such as coroners 'block' a researcher's access to them, and why?
4. How many in-depth, qualitative interviews can be deemed to be 'enough' in research such as this?

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## Further Readings

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## **Web Resources**

[insert links to any relevant web resources here]

## **References**

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