



Qualitative Description Research:

An Examination of a Method for Novice Nursing Researchers

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ABSTRACT

According to Bradshaw, Atkinson, and Doody (2017), a qualitative description (QD) design focuses primarily on describing and defining an often new phenomenon in order to provide basic information about the who, what, where, and why of the experience from the particular viewpoint from those involved. As a method, QD offers an accessible approach to qualitative research for many beginning nursing researchers but has been often overlooked or confused with other traditional descriptive methods such as case study, phenomenology, grounded theory, and ethnography. Given the value and applicability to the nursing profession, the two-fold purpose of this paper is: (a) to provide novice and student nursing researchers with a robust understanding of the QD approach to help guide their research activities and apply research findings within practice settings, and (b) to offer a comparative analysis of QD in relation to other qualitative approaches. Drawing from the literature, we present an in-depth overview of this QD approach by focusing on its purpose, guiding principles, and the steps of the research process.

Key Words: qualitative description approach; traditional qualitative methods; novice nursing researchers, including students

Multiple approaches support researchers to uncover answers to research questions. However, novice researchers may apply methods without understanding important components, such as theories, that underpin the approach. Uncertainty regarding the research approach may lead to findings that are incongruent with the underlying theoretical foundation, rendering a less

compelling study. Moreover, beginning researchers, such as students, may feel the need to align with traditional qualitative approaches, such as phenomenology or hermeneutics, and they may feel that they are conducting a study guided by the philosophies behind either approach, and may in fact, not be doing so (Neergaard et al., 2009). Thus, it is important to carefully explore and understand a research approach that one may potentially use in research. A method that is inadequately discussed and is often disregarded as a valid approach is qualitative description (Kim et al., 2016).

Sandelowski (2000, p.335) described qualitative description (QD) studies as “...basic or fundamental...”, distinct from other qualitative approaches. QD is an accessible research approach for novice nursing researchers, such as students, to explore diverse topics of investigations rooted in the description of participant experiences or perspectives. These experiences are learned from the unique interactions between the participants that experienced such phenomena and the researcher, with their theoretical and experiential predispositions (Bradshaw et al., 2017). QD produces emic knowledge that allow others (outsiders) a unique opportunity to learn how such individuals see their world (Bradshaw et al., 2017). While QD embodies many of the same principles, research phases, and methods of data collection of other qualitative research, such as phenomenology, there are some distinct differences. Within the paper, we will outline similarities between QD and other research methods and describe the differences, such as staying close to the data (direct words of participants) with minimal inferences, as well as being less theoretical than other qualitative approaches. The fundamentals of QD will be discussed, as well as the distinct differences between QD and other methodologies that make it particularly suitable for beginning nursing researchers, such as students (Turale, 2020).

Purpose of QD

Due to similarities with other qualitative approaches, QD can be confused with other methods. For example, phenomenology, grounded theory, and ethnography can be descriptive; however, such methods are not exclusively descriptive (Sandelowski, 2000). Explicating its purpose and features can help differentiate QD from other methodologies. Primarily, QD aims to uncover, understand, and describe a specific population’s perception and experience regarding a particular phenomenon or concept of interest (Bradshaw et al., 2017; Neergaard et al., 2009). Such a phenomenon can be thought of as any situation, behaviour, event, and context (Purdy & Popan, 2018), which may profoundly impact a population. The main objective is to produce a comprehensive, yet, surface-level summary, rooted in the description of the participants’ experience (Colorafi & Evans, 2016; Neergaard et al., 2009; Sandelowski, 2000; Willis et al., 2016); establishing causality is not the goal (Dulock, 1993). Researchers may identify the need for the study due to simple questions (Magilvy & Thomas, 2009) brought about by real-life issues or from a gap in the literature (Creswell & Poth, 2018).

Generally, QD focuses on answering who, what, and where questions (Dulock, 1993; Kim et al., 2016; Neergaard et al., 2009; Sandelowski, 2000; Swatzell & Jennings, 2007). Researchers may use QD to describe and define a new phenomenon, when there is insufficient research regarding that phenomenon (Cohen & Tarzian, 2017). For example, Lane et al. (2017)

conducted a QD research study due to a paucity of literature regarding the needs of family members when their aging relatives transitioned to nursing homes. QD research may be conducted to establish the foundation for interventional studies and to develop and refine interventions or questionnaires (Kim et al., 2016). For instance, Mc Auliffe and Hynes (2019) completed a QD focusing on individuals with multiple sclerosis and their occupations; this resulted in identifying a need for interventions that address daily issues stemming from cognitive challenges for people with multiple sclerosis. QD can also assist researchers to obtain a new perspective on a well-researched phenomenon (Cohen & Tarzian, 2017). This is because participants' views on a particular phenomenon can be dependent upon their profession or relationship to the healthcare system. To illustrate, nurses may have distinctive viewpoints compared to physicians, while recipients of care may view a phenomenon differently than care providers. Even within the same discipline such as nursing, the contextual background can lead to a unique perspective. For example, although self-care has been studied within nursing, the QD by Opore et al. (2020) provided a different insight on self-care, as the study sample of psychiatric nurses were situated in the community, rather than in the hospital. As such, the purposes of QD are varied and may overlap with other qualitative methods; recognition of its distinct features can separate it from other qualitative approaches.

Features of QD

Although QD researchers choose a phenomenon to study, they cannot know for certain what will emerge from the study. As with other forms of qualitative research, in QD, specific foci are usually not predetermined (Lambert & Lambert, 2012), and a hypothesis is usually not stated (Dulock, 1993). However, this does not prevent QD researchers from predicting elements of a phenomenon and hypothesizing based on previous studies, theories, or frameworks. The defining features of QD are utilizing less inference and being less theoretical than other qualitative approaches. Due to these features, the goals of QD are different from other qualitative methods. Unlike ethnography, which aims to produce thick descriptions of a culture, case study, which endeavours to acquire an in depth understanding of a problem from a unique case, and grounded theory, which intends to develop theory (Creswell & Poth, 2018), QD aims to produce rich description of an event or experience (Neergaard et al., 2009). Since these rich descriptions originated from staying close to participants' words, the amount of inference is reduced. Inference, applied during the data analysis and representation phase, is defined as the "...the amount of logical reasoning required to move from a data-based premise to a conclusion." (Colorafi & Evans, 2016, p.17). QD employs lower inference levels, unlike other qualitative studies like phenomenology (Colorafi & Evans, 2016). Lower levels of inference allow findings to be grounded closer to the participants' description and increases the likelihood that readers can rationalize the findings of the study (Colorafi & Evans, 2016; Seixas et al., 2018). Thus, QD applies inductive logic and bases findings from the data rather than theory (Creswell & Poth, 2018).

As previously mentioned, an important feature of QD is that they are less theoretical than other qualitative research approaches (Kim et al., 2017; Lambert & Lambert, 2012; Neergaard et al., 2009; Sandelowski, 2000). This means that it does not rely too heavily on theories and frameworks. This is a beneficial feature for novice nursing researchers, such as students, as they

are not obligated to make findings “fit” with the theoretical framework. Moreover, QD studies do not have intricate philosophical backgrounds which require understanding and explication. For example, phenomenology requires the discussion between which philosopher’s viewpoint (Husserl, Heidegger, Merleau-Ponty) is utilized for the study (Creswell & Poth, 2018; Willis et al., 2016). Thus, allowing results in QD studies to develop without figuring out how they fit with a specific framework or theory (Kim et al., 2017; Lambert & Lambert, 2012) inspires receptiveness for findings which depend on data, rather than previously established theories or interpretations. Although QD can adopt any theoretical or philosophical lens to guide the study, QD is not attached to lenses and readily alters these at any point in the study (Colorafi & Evans, 2016; Willis et al., 2016). For example, a researcher may focus on concepts from a theory related to the phenomenon; if the preliminary findings steer toward a different concept, the researcher should alter the focus of the study to fit the emerging data instead. Thus, QD utilizes emerging design, being flexible and adapting various parts of the research process to support the study (Creswell & Poth, 2018).

As will be outlined in the next section, however, is that QD studies share similarities with other qualitative methods. For instance, QD researchers use similar techniques for data collection as their counterparts utilizing other approaches; some differences can be overt. An example would be that case studies would examine multiple sources for data collection such as interviews, observations, documents, and artifacts (Creswell & Poth, 2018), whereas QD will usually gather data through only one data collection practice such as interviews (Kim et al., 2017). QD researchers may also borrow data analysis techniques from other qualitative approaches such as grounded theory (Lambert & Lambert, 2012; Sandelowski, 2000). For example, QD can use constant comparative analysis in data analysis, which is also used in grounded theory (Sandelowski, 2000). On the contrary, some approaches like case study utilize within-case analysis which is different from what QD will use in data analysis (Creswell & Poth, 2018). Researchers utilizing QD must be aware of the differences and similarities between QD and other qualitative methods and be able to articulate their rationale for using QD.

Data Collection

Sampling

When considering who will participate in a qualitative study, researchers consider types of sampling and sample sizes. Similar to other qualitative approaches, QD researchers may utilize purposive sampling. Purposive sampling is chosen as information is “...required directly from those experiencing the phenomenon under investigation...” (Bradshaw et al., 2017, p. 1). Within this sampling strategy participants have first-hand experience with the phenomenon, the ability to communicate with the researcher, and willingness to tell their story (Magilvy & Thomas, 2009).

Researchers should also consider the number of individuals to include in the study. In one systematic review of QD, Kim et al. (2017) reported sample sizes ranging from eight to one thousand nine hundred and thirty-two. However, larger sample sizes were utilized by open-ended surveys while smaller sample sizes were applicable to individual interviews and focus

groups (Kim et al., 2017). A consensus is that the sample size tends to be small as the importance is on what makes the experience unique rather than generalizability (Bradshaw et al., 2017).

Still, data saturation should be considered when thinking about sample size. Data saturation is the researcher's attempt to continuously interview participants until there are no new categories or information that arise from the interview (Creswell & Poth, 2018). Within QD, interviews can occur until saturation is achieved (Willis et al., 2016). However, researchers can find, that given each participant's unique perspective, data saturation may be unachievable (Bradshaw et al., 2017).

Data Collection Techniques

Similar to other qualitative research techniques, QD utilizes case studies, observations, and interviews for data collection (Bradshaw et al., 2017; Dulock, 1993; Purdy & Popan, 2018; Stangor & Walinga, 2014). Kim et al. (2017) found a majority of QD studies employed semi-structured individual interviews or focus groups. Interviewing is a helpful practice that gathers and relies on the participants' reports (Seixas et al., 2018). Moreover, this is where the researchers and participants interact to co-construct knowledge (Creswell & Poth, 2018). Utilizing focus groups is beneficial when potential interactions between participants produce the best information, when participants are similar and cooperative, when there are time limitations, or when participants may be hesitant to provide information individually (Creswell & Poth, 2018).

Although researchers can interview without some structure, it can be useful to have a guide to assist in the interview. When researchers engage in interviews without preparation, interviews can lead to more noise than data (Arsel, 2017). An interview protocol, a document that outlines a brief description of the study, the consent-gathering, critical points of exploration through over-arching questions, and potential probes and transitions, can support QD researchers (Arsel, 2017). Interview protocols can help researchers focus on the relevant concepts to discuss during the interview, giving a sense of control, and reigniting or redirecting conversations (Arsel, 2017). Questions in the interview protocol tend to be open-ended (Kim et al., 2017; Lambert & Lambert, 2012; Neergaard et al., 2009), which allows the researcher to capture broader viewpoints and minimizes restrictions. Questions can be constructed based on the researcher's intuition and curiosity; however, interview questions can potentially incorporate theoretical and conceptual ideas. Willis et al. (2016) outline that such theories and concepts can initially help guide the interview questions. However, depending on responses, QD researchers are not obliged to stay within such theories and frameworks, especially if data indicates a poor fit; they can thus make changes to their interview guide (Willis et al., 2016; Vaismoradi et al., 2013). For example, illuminating descriptions may be brought up by participants that researchers did not consider, and thus, researchers can utilize these descriptions and knowledge gained through interviews to guide and revise their questions. If theories are utilized for the conceptual framework, it is important to ensure that this is visible within a section of the paper. Contrastingly, revision of the interview protocol can also occur before data collection. Yin (2014, as cited in Creswell & Poth, 2018) argued that before data collection, researchers should pilot test their interview protocol to refine it. Generally, data collection and data analysis are intertwined in an iterative circle that

continuously reverts between each step; thus, researchers will continue to refine their interview protocol as they analyze data (Arsel, 2017).

Data Analysis

Researchers utilizing QD employ either Thematic Analysis (TA) or Qualitative Content Analysis (QCA) to complete their data analysis (Bradshaw et al., 2017). A profound distinction is that TA is interpretive and therefore employs a higher level of inference whereas, QCA tends to apply lower levels of interpretation, being less abstract (Vaismoradi & Snelgrove, 2019). As QCA is less inferential, it is generally preferred with QD studies (Kim et al., 2017). The aim and activities of the data analysis are similar regardless of the tool used (Vaismoradi et al., 2013). QCA and TA examine collected data by employing a systematic coding and categorizing approach, to illuminate themes (Vaismoradi et al., 2013). Colorafi and Evans (2016) proposed the following steps for data analysis: (1) create a coding framework; (2) format transcribed documents to include spaces for codes and memos; (3) apply the first level of coding; (4) categorize codes and apply the second level of coding; (5) revise and redefine codes; (6) add memos; (7) visualize data; and (8) represent the data. Contrastingly, the researcher can apply the first level of coding on the first few transcripts and develop a coding framework based on the codes. Data collection, and analysis occur simultaneously as part of an iterative and recursive process (Colorafi & Evans, 2016; Creswell & Poth, 2018).

Coding, core to qualitative data analysis, is the process of assigning a label to a portion of text that reflects an idea (Miles et al., 2014). Creswell and Poth (2018) suggested applying lean coding, starting with a shortlist, only expanding the list when necessary, and having no more than a final twenty-five to thirty code list. After applying the initial level of coding, the researcher reviews the codes, clusters similar codes, and applies a more abstract label, identified as a theme (Colorafi & Evans, 2016). While coding, researchers may find themselves revisiting, rechecking, and revising codes and definitions; this continues throughout the data analysis. Although QD researchers readily apply induction to ground the data's findings, coding requires inferences, which necessitates QD researchers to also apply deduction. The induction-deduction dependent role of researchers continues into the data representation.

Throughout the data analysis phase, the use of a coding framework can help clarify the thought process of the researcher. A coding framework can initially include a priori codes, codes based on theories, literature, and preliminary data (Creswell & Poth, 2018). However, a priori codes can limit the analysis to the pre-identified codes rather than the insights of the participants (Creswell & Poth, 2018). Researchers can also include the name, definitions, and examples of each code within a coding framework (Colorafi & Evans, 2016). This can rationalize the connection of data to the code to other researchers and readers. After a researcher transcribes the documents, Agar (1980, as cited in Creswell & Poth, 2018) outlined that it might be beneficial to read the transcripts multiple times to immerse oneself in the data. During this immersion, adding memos may be useful rather than after coding has taken place. Memos outline the researcher's insights that capture initial ideas, elucidate how concepts evolved and how insights were integrated (Creswell & Poth, 2018). Memoing clarifies the researcher's thinking process, acting as an audit trail throughout the research process (Creswell & Poth, 2018).

Reflexivity is important in all qualitative research, including QD (Vaismoradi et al., 2013; Willis et al., 2016). Reflexivity is a process whereby researchers engage in continuous critical reflection throughout the research process which document their thought process, actions, and choices taken (Orange, 2016; Ortlipp, 2008). While this will be discussed, in greater detail later in the paper, briefly, this involves researchers understanding how their background (work, history, culture) influences their interpretation of the data (Creswell & Poth, 2018), and involves documenting their thoughts in research diaries or memos (Woo, 2019).

Data Representation

QD presents its findings in a straightforward logical manner, usually through summarization (Kim et al., 2017; Lambert & Lambert, 2012). Summaries are presented in simple, easy to understand, everyday language (Sandelowski, 2000), encompassing the description of the participants' experiences and perceptions, and echoes the participants' language (Neergaard et al., 2009). The use of simple language and the participants' language make the findings easy to comprehend. Various ways to present the data are through the chronology, prevalence of themes, broad to a specific focus, timeline-based, or through multiple perspectives (Sandelowski, 2000). Overall, the synthesis of data representation varies depending on the findings of the study; however, this can also differ depending on the researcher conducting study. Hence, it is also essential to discuss how QD researchers can enhance trustworthiness.

Trustworthiness

The term rigor is normally used to describe quantitative research and uses terms such as internal validity and generalizability (Bhattacharjee, 2012). However, due to differing ontological and epistemological assumptions, internal validity, and generalizability do not apply (Bhattacharjee, 2012). As such, qualitative studies aim to establish trustworthiness by using confirmability, dependability, credibility, and transferability (Hanson et al., 2011; Morrow, 2005). Generally, QD strives to achieve confirmability, credibility, and transferability (Bradshaw et al., 2017; Vaismoradi et al., 2013).

Confirmability is the researcher's attempt to minimize subjectivity and acknowledge that objectivity is difficult to achieve (Morrow, 2005). Credibility is the establishment of how believable the findings of the study are (Colorafi & Evans, 2016). However, as QD bases the findings from the data gathered in the interview rather than conforming data to theory, it has a much easier time than other qualitative methods in establishing credibility. Transferability, the ability to apply findings of the study to other settings or studies, may be enhanced by providing detailed, thick descriptions of the participants and the setting (Colorafi & Evans, 2016). By providing this, readers can employ analytic generalization, identifying similarities and differences between their own and the study's context, and identify if the findings can be adopted in their areas of practice (Clark & Vealé, 2018).

Although qualitative researchers attempt to be neutral and bias-free, they cannot achieve full objectivity as each individual carries theoretical preferences and experiences, which impact

how we see and interpret the world (Arsel, 2017). Within QD, the researcher is the main instrument that collects, analyzes, and interprets the data (Clark, & Vealé, 2018). Their experiences and context concerning the research, impact how the study is completed. Thus, researchers can discuss their positionality, social position, experiences, beliefs and assumptions (Creswell & Poth, 2018).

Practices to Enhance Trustworthiness

There are practices to enhance the trustworthiness of the findings in qualitative research, including QD. These include researchers discussing their positionality, as well as practices used by researchers to enhance reflexivity.

Positionality should be revealed at the beginning of the study as it highlights ethical challenges such as accessing sites and participants. For example, researchers may not belong to the participant's culture or background and may have difficulties with building trust. Such factors may warrant the use of gatekeepers, individuals who can permit the connection between the researcher and participants (Creswell & Poth, 2018).

Practices to enhance reflexivity include addressing biases by maintaining a reflexive journal. Although biases cannot be entirely removed from a study, researchers can minimize this in QD through attentiveness to the perspectives of participants as well as the impact of the research process. Other things to consider within reflexive journals are what questions to ask participants and also, to identify interventions to use if adverse instances arise during the interviews. During data collection and data analysis, researchers may reflect on the impact of the interview questions on the participants (Pietkiewicz & Smith, 2014) and if the interview questions contribute or prevent answering the research question. When publishing and representing data, researchers can reflect on how the findings may influence the study site and participants (Creswell & Poth, 2018). Remaining reflexive can help produce solutions such as masking participants' identity due to confidentiality and reframing negative findings as challenges or areas of improvement (Creswell & Poth, 2018).

Besides journaling, there are other practices that can enhance reflexivity. Going back to the original data (e.g., transcripts) can also help the researcher remain true to the data to ensure that findings are consistent with participants' perspectives (Probst, 2015). Researchers can employ triangulation and member checking (Colorafi & Evans, 2016). Triangulation can be described as drawing from multiple sources, methods, and theories to ensure that findings are comprehensive (Creswell & Poth, 2018). Depending on the study, QD researchers may employ any of the four triangulation strategies: data triangulation, investigator triangulation, theory triangulation, and methodological triangulation (Salkind, 2010). For example, QD can involve multiple researchers in data collection and analysis through investigator triangulation; this helps audit the consistency of data, minimizing bias (Salkind, 2010). Another way to increase credibility is to utilize member checking to solicit participant feedback regarding the findings and interpretation (Creswell & Poth, 2018). Member checking is crucial as it allows the researcher to verify if the findings make sense or if there was a deviation from the participant's perspective. Overall, engaging in such activities can help increase confirmability.

Reflexivity also allows the researcher to consider the ethical implications throughout the research process (Creswell & Poth, 2018), especially when working with vulnerable populations. This can be challenging for researchers, but important. Dahlke et al. (2015) engaged in participant observation of nurses working with older, hospitalized adults. Reflexivity involved remaining or exiting difficult situations with patients. For instance, changes in a patient's comfort level or in the physical health of an older patient, required reflexivity on the part of the researcher to respond ethically and sensitively to situations. Although these patients had provided consent to participate, she withdrew in one situation, and in another, moved to the background of the situation. Reflexivity also involved navigating complexities of securing informed consent among patients, family members and frequently changing health care providers. When patients would choose to give verbal consent but not written consent, nurses' work with them was not included in the data.

Other challenges to enhancing reflexivity involve the time invested in this activity; the time required may not work with professional timelines to finish a project. Also, while researchers may value reflexivity in theory, both the practice and evaluation of reflexivity remains challenging (Probst, 2015). The ability to assess a researcher's reflexive practice leads to other critiques that QD faces within the research community.

Limitations

QD is often criticized for its lack of credibility, as well as its similarities with other qualitative approaches (Neergard et al., 2009). Sandelowski (2000) described that descriptive research is often considered one of the lesser forms of research design. Yet even with these concerns, Neergard et al. (2009) supports the use of QD as an appropriate method for researchers, especially those who are interested in establishing a clearer phenomenological description. Thus, these critiques are not limitations or a reason to not pursue QD research. Instead, they serve as a reminder for researchers to clearly articulate methodological underpinnings and to remain attentive to trustworthiness.

Conclusion

QD is a reliable qualitative descriptive approach that novice nursing researchers, such as students, can employ to study phenomena, experiences, and perspectives. It differentiates itself from other qualitative methods, such as phenomenology, by being less inferential and less theoretical. QD focuses on describing the who, what, where, and why of the experience which is different from the aims of grounded theory (to develop theory), ethnography (to understand and describe culture), phenomenology (to comprehensively describe lived experiences), and case study (to explore process). By not being caught up in the complexities of theories, philosophies, and deduction, beginning nursing researchers can easily initiate a QD study. By limiting the need to learn and employ time-intensive complex research approaches, nurses in multiple specialties, such as psychiatry, obstetrics, pediatrics, and education have utilized QD. Furthermore, in addition to QD being an easy approach to use, it is applicable to numerous research questions, makes the findings easy to connect with the data, and offers flexibility with the application of

theory. QD often utilizes purposeful sampling and semi-structured interviews. QD can adopt either TA and QCA for data analysis and represent findings in simple, straightforward language. Lastly, it employs strategies based on confirmability, credibility, and transferability to establish trustworthiness. The examination of varying components of QD can help ensure congruence throughout the research process, making a case for a more effective research study. Overall, novice nursing researchers, such as students, should not abstain from QD as it is a valid qualitative research approach that offers multiple benefits for those new to research.

References

- Arsel, Z. (2017). Asking questions with reflexive focus: A tutorial on designing and conducting interviews. *Journal of Consumer Research*, 44(1), 939-948.
<https://doi.org/10.1093/jcr/ucx096>
- Bhattacharjee, A. (2012). *Social science research: Principles, methods, and practices* (2nd ed.) Textbooks Collection.
https://scholarcommons.usf.edu/cgi/viewcontent.cgi?article=1002&context=oa_textbooks
- Bradshaw, C., Atkinson, S., & Doody, O. (2017). Employing a qualitative description approach in health care research. *Global Qualitative Nursing Research*, 4, 1-8.
<https://doi.org/10.1177/2333393617742282>
- Clark, K. R., & Vealé, B. L. (2018). Strategies to enhance data collection and analysis in qualitative research. *Radiologic Technology*, 89(5), 482CT–485CT.
- Cohen, M., & Tarzian, A. (2017). Descriptive Research. In J. Fitzpatrick (Ed.) *Encyclopedia of Nursing Research* (4th ed). Springer Publishing Co
- Colorafi, K. J., & Evans, B. (2016). Qualitative descriptive methods in health science research. *Health Environments Research and Design Journal*, 9(4), 16–25.
<https://doi.org/10.1177/1937586715614171>
- Creswell, J., & Poth, C. (2018). *Qualitative inquiry & research design: Choosing among five approaches* (4th ed.). Sage Publications.
- Dahlke, S., Hall, W., & Phinney, A. (2015). Maximizing theoretical contributions of participant observation while managing challenges. *Qualitative Health Research*, 25(8), 1117-1122.
10.1177/1049732315578636
- Dulock, H. L. (1993). Research design: Descriptive research. *Journal of Pediatric Oncology Nursing*, 10(4), 154–157.
- Gephart, R. (1999). Paradigms and research methods. *Research Methods Forum*, 4.

- Hanson, J. L., Balmer, D. F., & Giardino, A. P. (2011). Qualitative research methods for medical educators. *Academic pediatrics, 11*(5), 375–386.
<https://doi.org/10.1016/j.acap.2011.05.001>
- Kim, H., Sefcik, J. S., & Bradway, C. (2017). Characteristics of qualitative descriptive studies: A systematic review. *Research in Nursing & Health, 40*(1), 23–42.
<https://doi.org/10.1002/nur.21768>
- Lambert, V. A., & Lambert, C. E. (2012). Editorial: Qualitative descriptive research: An acceptable design. *Pacific Rim International Journal of Nursing Research, 16*(4), 255–256.
- Lane, A. M., Hirst, S. P., Hawranik, P., Reed, M. B., & Rokhman, A. (2017). What do family members really want when older adults transition to a nursing home? *Journal of Gerontological Nursing, 43*(11), 9–14. <https://doi.org/10.3928/00989134-20170523-03>
- Loiselle, C., Profetto-McGrath, J., Polit, D., & Beck, C.T. (2011). *Canadian essentials of nursing research*. Wolters Kluwer
- Magilvy, J. K., & Thomas, E. (2009). A first qualitative project: Qualitative descriptive design for novice researchers. *Journal for Specialists in Pediatric Nursing, 14*(4), 298–300.
<https://doi.org/10.1111/j.1744-6155.2009.00212.x>
- McAuliffe, A., & Hynes, S. M. (2019). The impact of cognitive functioning on daily occupations for people with multiple sclerosis: A qualitative study. *Open Journal of Occupational Therapy, 7*(3), 1–12. <https://doi.org/10.15453/2168-6408.1579>
- Miles, M., Huberman, M., & Saldana, J. (2014). *Qualitative data analysis: A methods sourcebook* (3rd ed.). Sage
- Morrow, S. L. (2005). Quality and trustworthiness in qualitative research in counseling psychology. *Journal of Counseling Psychology, 52*(2), 250-260. <https://doi.org/10.1037/0022-0167.52.2.250>
- Neergaard, M.A., Olesen, F., Andersen, R.S., & Sondergaard, J. (2009). Qualitative description - the poor cousin of health research? *BMC Medical Research Methodology, 9*(1), 52–56.
- Opare, F. Y., Aniteye, P., Afaya, A., & Glover-Meni, N. (2020). “We try our best to offer them the little that we can” coping strategies of Ghanaian community psychiatric nurses: A qualitative descriptive study. *BMC Nursing, 19*(1), 1–8. <https://doi.org/10.1186/s12912-020-00449-3>
- Orange, A. (2016). Encouraging reflective practices in doctoral students through research journals. *The Qualitative Report, 21*(12), 2176-2190.
<https://nsuworks.nova.edu/tqr/vol21/iss12/2>

- Ortlipp, M. (2008). Keeping and using reflective journals in the qualitative research process. *The Qualitative Report*, 13(4), 695-705. <https://nsuworks.nova.edu/tqr/vol13/iss4/8>
- Pietkiewicz, I., & Smith, J. (2014). A practical guide to using interpretative phenomenological analysis in qualitative research psychology. *Psychological Journal*, 20(1), 7-14. <https://doi.org/10.14691/CPPJ.20.1.7>
- Plack, M. M. (2005). Human nature and research paradigms: Theory meets physical therapy practice. *Qualitative Report*, 10(2), 223-245. <https://nsuworks.nova.edu/tqr/vol10/iss2/3>
- Probst, B. (2015). The eye regards itself: Benefits and challenges of reflexivity in qualitative social work. *Social Work Research*, 39(1), 38-48.
- Purdy, E. R., & Popan, E. M. (2018). Descriptive research. *Salem Press Encyclopedia*.
- Salkind, N.J. (2010). *Encyclopedia of research design*. Sage.
- Sandelowski, M. (2000). Whatever happened to qualitative description? *Research in Nursing and Health*, 23(4), 334-340.
- Seixas, B. V., Smith, N., & Mitton, C. (2018). The qualitative descriptive approach in international comparative studies: Using online qualitative surveys. *International Journal of Health Policy and Management*, 9, 778-781. <https://doi.org/10.15171/ijhpm.2017.142>
- Stangor, C., & Walinga, J. (2014). *Introduction to psychology: 1st Canadian edition*. Retrieved from <https://opentextbc.ca/introductiontopsychology/chapter/2-2-psychologists-use-descriptive-correlational-and-experimental-research-designs-to-understand-behavior/>
- Swatzell, K.E., & Jennings, P.R. (2007). Descriptive research: The nuts and bolts. *Journal of the American Academy of Pas*, 20(7), 1-2.
- Turale, S. (2020). A brief introduction to Qualitative Description: A research design worth using. *Pacific Rim International Journal of Nursing Research*, 24(3), 289-291.
- Vaismoradi, M., Turunen, H., & Bondas, T. (2013). Content analysis and thematic analysis: Implications for conducting a qualitative descriptive study. *Nursing and Health Sciences*, 15(3), 398-405. <https://doi.org/10.1111/nhs.12048>
- Vaismoradi, M., & Snelgrove, S. (2019). Theme in qualitative content analysis and thematic analysis. *Forum: Qualitative Social Research*, 20(3). <http://doi.org/10.17169/fqs-20.3.3376>.
- Willis, D. G., Sullivan-Bolyai, S., Knafl, K., & Zichi-Cohen, M. (2016). Distinguishing features and similarities between descriptive phenomenological and qualitative description research. *Western Journal of Nursing Research*, 38, 1185–1204. <https://doi.org/10.1177/0193945916645499>

Woo, K. (2019). *Polit & Beck Canadian essentials of nursing research* (4th ed.). Wolters Kluwer.