

The NCRM wayfinder guide to *in-situ* methodologies in a Covid-impacted uncertain world



In-situ methodologies are broadly described as multi-sensory qualitative approaches immersed in place and time. Unsurprisingly, the Covid-19 pandemic has dramatically impacted how, and even if, *in-situ* research can be conducted. Despite constraints, we argue that such methodologies are needed now more than ever because of their utility in understanding inequities in health and place. In this guide, we present a set of reflective questions to guide adaptation of *in-situ* methodologies for research conducted during the global pandemic and beyond, and provide a working example of how we adapted go-along interviews in practice.

Why *in-situ* methodologies?

Using *in-situ* methodologies researchers collect data with participants as they move together through places and spaces relevant to the research question. Researchers can use diverse mobilities such as walking, rolling, and driving with participants while gathering data via interviews, photographs, and videos. *In-situ* methodologies are typically conducted in-person. Examples include go-along and photo-elicited interviews¹⁻⁴.

Covid-19 has elevated crises of inequities in health and highlighted their relationship to place⁵. *In-situ* methodologies can provide a rich, contextually-resonant, and embodied understandings of a dramatically changing world. The immersive, participatory, and anti-oppressive nature of *in-situ* methodologies render them of specific utility for investigating environments that are marginalising or exclusionary⁶.

In-situ methodologies emphasize participant leadership. Since they prioritise context, situatedness, and lived experiences, they help shift power from the researcher to participants. They can be particularly useful for research involving children, youth, and people for whom conventional seated interviews do not resonate with how they share their understandings of the world, their expertise, and the stories of their lives. Communication or linguistic barriers can also be mitigated because *in-situ* methodologies prioritise multi-sensory ways of knowing, showing, and telling^{7,8}.

Can we use *in-situ* methodologies during Covid-19?

Covid-19 has rendered in-person sharing of time and space potentially risky, unethical, and in some cases, illegal. This has presented practical and moral challenges for researchers and participants using *in-situ* methodologies. These methodologies have historically relied on a physical closeness between researchers and participants, which is part of their unique design. Since the onset of the Covid-19 pandemic, we have had to ask ourselves: Can they be safely adapted to a world with Covid-19? How can their unique contribution of shared space and time be preserved while respecting our changing relationship to each other and the environments where we interact?⁹

There is much to consider as we reflect on how, or even if, *in-situ* methodologies have a place in our research practices now and into the future. Technology may offer some possibilities for methodological adaptation. We frequently used technology to facilitate *in-situ* methodologies prior to the pandemic. For example, Global Positioning System (GPS) devices recorded walking routes, we took photographs with smartphone cameras, and captured our conversations with digital recorders as we moved through space with participants. Technology also helped us compile and analyse these diverse data. There is potential to expand our uses of technology to enable data generation at a distance, across time and space.

The pandemic has also shown the limits to what technology can meaningfully facilitate. There are challenges inherent to over-reliance on technologies that require careful consideration, notably the potential for technology to exacerbate inequities. For example, people have unequal access to high-speed Internet based on social and physical locations. Age, among other socio-demographic factors, can also impact people's comfort with using smart devices. There are also ethical quandaries related to technology use, such as privacy. Participants may be wary of sharing sensitive information over the Internet. Challenges related to building rapport and trust at a distance also warrant consideration.

Reflective questions to guide adaptation

To facilitate the reimagining of *in-situ* methodologies while preserving their unique contribution, we suggest researchers reflect on the following questions:

- Q1. How can the added value of *in-situ* methodologies (e.g., immersion in context, embodiment, sounds, smells, emotions, playfulness) be preserved?
- Q2. How can the closeness and reduced hierarchical divide between researcher and participant that characterises *in-situ* methodologies be preserved?
- Q3. What are the equity impacts of an adapted approach and how can we prevent reproducing social and health inequalities?⁹

An example of adaptation in action

Pre-Covid-19 we designed the CentrÉS study to evaluate the impacts of a downtown renewal project on health inequities among young adults in Sherbrooke, Québec (Canada)¹⁰. We planned to conduct go-along interviews. Walking side-by-side, the participant would lead the interviewer through the downtown area and respond to questions about its health-promoting and health-detering features and their meaning for everyday life.

Then in March 2020, just as we were set to begin, our world changed. The new restrictions around Covid-19 meant we needed to rethink our approach. Using the reflective questions, we considered our options. We outline our responses below. These adjustments are not

exhaustive, but rather illustrate the thought exercise in adapting. We end this guide with a description of how the study proceeded.

Q1. How can we preserve the added value of *in-situ* methodologies?

- Maintain an in-person activity at an increased distance, outside, and/or masked. Use a phone, if needed, to communicate clearly at the increased distance.
- Capture experiences of a place led by a participant in 'real-time' using remote (virtual) video- or photo-sharing with audio, such as video chat.
- Use photo- or video-elicited interviews. The interviews can happen virtually or in-person outside, masked, and/or at a distance. The approach is asynchronous rather than 'real-time'.
- Consider adapting to a time of day and/or context that is less busy or crowded.
- Record a solo, participant-only go-along session using audio, video, and/or imagery. Use GPS to map the walk and the participant can note points of interest. In this asynchronous approach the researcher can follow the walk at a later time, while taking notes and developing follow-up questions.

Q2. How can we preserve the closeness and reduced hierarchical divide between researcher and participant?

- Prioritise participant leadership. Regardless of adaptation, ensure they lead.
- Take a flexible approach to the adaptation chosen. Take the time to listen to participants' preferences, comforts and worries. Consider the use of technology, synchronicity, time of day, place, etc.

Q3. What are the equity impacts of an adapted approach and how can we prevent reproducing social and health inequalities?

- Co-create the methods drawing on participants' feedback to facilitate the use of methodologies and ensure they are a good fit.
- Be creative and flexible. Respond to the changing context and people's diverse needs. There is no 'one-size-fits-all' approach.
- Know that immersion in context can look like many different things. It can involve mobility, but

it can also be stationary. It may be virtual, or in-person, or a hybrid approach.

- Build relationships with participants. This may take significant time. Meet them 'where they are.'

Where we landed and lessons learned

Reflecting on these questions, in the CentrÉS study we opted for an adaptation that was a mix of go-along and photo-elicited interviews. In order to be flexible, we gave participants the choice between two main scenarios, which could be modified as per their preferences. The Institutional Review Board readily approved both scenarios. Interviews were conducted in the Summer and Fall 2021.

The first scenario involved the interviewer providing participants with three written prompts. They were asked to go on a solo walk downtown on a route of their choosing and to take photographs with their smartphones in response to the prompts. This allowed for the leadership of the participant to be maintained. They then selected five photographs which they emailed the interviewer and which served as springboard for a semi-structured interview held either in-person or virtually within one week of the walk.

The second scenario also involved the interviewer providing participants with three written prompts and asking them to go on a walk of their choosing downtown and take photographs with their phones. Here, however, the interviewer followed at a safe distance behind the participant to observe, take notes and record the walking route on a GPS. Participants again selected five photographs which they emailed the interviewer and which served as springboard for a semi-structured interview held in-person, outside (weather permitting) immediately after the walk.

After discussion with the participants, the second scenario emerged as most popular, and this could be explained in several ways. First, the study was conducted in a mid-size city with a downtown area which, albeit relatively small geographically, is not usually densely packed, especially not during the pandemic. Following at a distance was therefore feasible. Second, the warm weather meant we could generally easily conduct the interviews outdoors, at a safe distance without wearing a mask. Finally, participants mentioned they were tired of virtual

meetings and were more than happy to meet in person and share their neighbourhood experiences with us in real-time as per the second scenario. Although our sample included both more and less marginalized young adults, smartphone ownership and literacy was not a problem, and so the concern about the use of technology was absent.

To conclude, we are learning that several adaptations may need to be made within a single project - clearly, a 'one-size-fits-all' approach is not the way forward. Being flexible and responsive to participants can elicit more equitable, anti-oppressive and ultimately richer research. Regardless of the adaptation, we should always implement appropriate safety measures and strive for adequacy between data collection tools, context (e.g., indoor or outdoor, crowded or not), and participant characteristics, including their tech-savviness and potential fear of leaving their home or of engaging in interactions in public spaces.

Useful links

[The NCRM wayfinder guide to adapting participatory methods for Covid-19](#)

Walking Borders, Risk & Belonging
<https://www.walkingborders.com>

<https://walkinglab.org/>

References

1. Foley R, Bell SL, Gittins H, Grove H, Kaley A & McLauchlan A, et al. 2020. Disciplined research in undisciplined settings: Critical explorations of *in situ* and mobile methodologies in geographies of health and wellbeing. *Area* 52(3): 514–22.
2. Alexander SA, Frohlich KL & Fusco C. 2014. Problematizing "Play-for-Health" Discourses Through Children's Photo-Elicited Narratives. *Qualitative Health Research* 24(10): 1329–41.
3. Carpiano RM. 2009. Come take a walk with me: The "Go-Along" interview as a novel method for studying the implications of place for health and well-being. *Health Place* 15(1): 263–72.
4. Glenn NM, Lapalme J, McCready G & Frohlich KL. 2017. Young adults' experiences of neighbourhood smoking-related norms and practices: A qualitative study exploring place-based social inequalities in smoking. *Social Science & Medicine* 189:17–24.

5. Bambra C, Riordan R, Ford J & Matthews F. 2020. The COVID-19 pandemic and health inequalities. *Journal of Epidemiol Community Health* 74(11): 964-968
6. Finlay JM & Bowman JA. 2017. Geographies on the move: A practical and theoretical approach to the mobile interview. *The Professional Geographer* 69(2): 263–74.
7. Alexander S, Shareck M & Glenn NM. 2022. Capturing the lived experience of place in health promotion research: *in-situ* methodologies. In: *Global Handbook on Health Promotion Research Knowledge Production and Sharing*. Eds. Didier Jourdan and Louise Potvin. Published by the UNESCO Chair and WHO Collaborating Centre “Global Health & Education” and the Canada Research Chair on Community Approaches and Health Inequalities.
8. O’Neill M & Hubbard P. 2010. Walking, sensing, belonging: ethno-mimesis as performative praxis. *Visual Studies* 25(1): 46–58.
9. Shareck M, Alexander S & Glenn NM. 2021. *In-situ* at a distance? Challenges and opportunities for health and place research methods in a post-COVID-19 world. *Health Place* 69: 102572.
10. Etude CentrÉS Study [Internet]. Available from: www.etudecentres.ca

This guide was produced in 2021 by Martine Shareck, Stephanie Alexander, and Nicole Glenn on behalf of the Changing Research Methods for Covid-19 Research Project. Shareck is an Assistant Professor in Community Health at the Université de Sherbrooke, Canada, and a Canada Research Chair on Urban Health Equity Among Young People. Alexander is a researcher at the Fondation d'Entreprise MGEN pour la Santé Publique, France. Glenn is a Knowledge Mobilization & Relationship Specialist at PolicyWise, Canada.

National Centre for Research Methods
 Social Sciences
 University of Southampton
 Southampton, SO17 1BJ
 United Kingdom.

Web <http://www.ncrm.ac.uk>
Email info@ncrm.ac.uk?
Tel +44 23 8059 4539
Twitter @NCRMUK