

Editorial

A Qualitative Research of Perception Investigations in Caregivers Under the COVID-19 Pandemic

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We enthusiastically read the article entitled “The experiences of health-care providers during the COVID-19 crisis in China: a qualitative study” by Liu and colleagues [1]. Although this study highlights the support needed to protect the physical and mental wellness of caregivers in the COVID-19 pandemic, the potential limitations that existed in its qualitative research methods may undermine the accuracy of data collection indicated by our previous work [2,3].

First, the information gleaned from the participants could have been more productive if the authors used focus group as it leverages the power of the group dynamics to encourage back and forth conversation leading to fully exploring and expanding participant’s true feelings, thoughts, and experiences toward the COVID-19 compared to the in-depth interviews [4]. Even though some researchers claim that in-depth interviews (e.g., phone interview) are better to investigate a sensitive subject like the COVID-19 crisis that participants may feel uncomfortable to share their thoughts in front of a group of people, the recent study confirms that 1) sensitive and intimate disclosures are more likely to occur in the focus group; 2) some certain sensitive themes only happen in the focus group; and 3) neither sensitive themes emerged exclusively nor frequently in in-depth interviews compared to focus group [5].

Second, ensuring the homogeneity of interest is way more critical than the general heterogeneity like the demographics of the recruited participants [6,7]. Specifically, the desirable combination of interest consensus and common ground with diverse experience is important to generate rich information. However, the perceptions of the COVID-19 pandemic may be different between physicians and nurses based on the duty of these two different professional roles. This is because nurses are more likely to interact with COVID-19 patients directly and more frequently than physicians. Therefore, according to the primary research interest that investigates the experiences of fighting the COVID-19 pandemic, the participants should have been limited to nurses as the frontline caregivers to maintain the homogeneity of interest.

Third, considering that all participants were recruited from one local hospital, convenient sampling appears better than snowball sampling as the authors can recruit participants based on their availability and accessibility [8]. This is because scheduling participants at a time when they have more energy may yield richer information data than reaching out to them through phone interviews.

These suggested changes in data collection and participant enrollment should be implemented in future qualitative research for the investigation of global pandemic crisis to reach more convincing conclusions.

Contributors

Xiang Gao was the primary author of the letter. Aurelian Bidulescu reviewed, edited, and revised several drafts of this letter. All authors contributed equally to this letter.

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