Co-researched by

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1. Background and context

1.1 Background

Liverpool is the point of initial accommodation for asylum seekers in the North West and currently accommodates almost 23 percent of all asylum seekers in the region (Citysafe's Annual Plan 2013 – 2014). In 2012-13 there were 153 female asylum seekers dispersed to Liverpool (source: Refugee Action). An estimated 500 asylum seeking and refugee women live in Liverpool (extrapolated from Home Office data); 61 (estimated 12 percent) were seen by Spinning World in 2012-13 and 92 (estimated 18 percent) were surveyed in this research project.

The North West Strategic Migration Partnership (2011) asserts that better services in mental health would mitigate the risk of destitution among asylum seekers; those destitute in Merseyside in 2011 numbered over 300.

PSS (Person Shaped Support) is a charity offering a wide range of personal support to people in need. One of the programmes with PSS is Spinning World, a specialist psychological therapy service working with trauma and recovery. The aim of the service is to improve the mental and emotional wellbeing of migrants and refugees.

Clients have experienced Human Rights abuses and trauma or the impact of traumatic events that may have happened to other members of their family. Issues may be around trauma and post traumatic stress disorder, sexual violence and pregnancy torture or bereavement. Clients bring issues about living in exile such as depression, anxiety, racism and sexuality. Spinning World specialises in psychological therapies that are sensitive to differences in culture and diversity and the majority of its sessions include trained interpreters.

Spinning World was funded by Comic Relief to work specifically with women over 18. A requirement of the project was to evidence the needs of women asylum-seekers in Liverpool both as a rationale for the work and to enable PSS to scale the project in future.

The investigative project was awarded to Cernis Limited, a small company established in 2008 with the aim of improving public services through applied research and focused action.

1.2 Co-production

The nature of both asylum seeking and mental health required a particularly careful and sensitive approach to conducting this work. It was agreed early on between PSS and Cernis that a coproduced research project would not only promote more reliable and valid findings, but would also provide a valuable opportunity and experience for a small number of asylum seeking women who would become the co-researchers.

PSS recruited four asylum seeking women with an interest in the project, a willingness to learn new skills and good communication. The co-researchers spoke English confidently, but were also able to communicate in their own languages, including French, Yoruba and Broken English/Pidgin.

1.3 Research training

There were three research training sessions, taking the co-research group through the basics of methodology and ethics, to co-design of the questionnaire and finally using the live data to analyse and interpret the findings.

The initial one day intensive training programme, led by Cernis, aimed to raise awareness of methodological and ethical issues in research, as well as introducing new skills in question writing and survey design. A copy of the Co-Researcher Handbook is given in Appendix 2.

Co-production started early on, with Cernis providing the methodological expertise while the coproducers used their extensive knowledge of the research population (ie refugee and asylum seeking women). PSS was on hand to offer systems knowledge and insights about local organisations and individuals that could support the research.

Method

In addition to face to face meetings, virtual working was brokered by the PSS team and resulted in several iterations of the survey questionnaire, until all the researchers were satisfied that it was ready.

The aim was to survey 100 refugee and asylum seeking women through a number of identified community groups and establishments, all from the voluntary and community sector, each with a specific focus, whether health, housing, human rights, etc. The contact person at each organisation functioned as a gatekeeper and could either facilitate or effectively block the contact with potential respondents. The co-researchers also visited women at home where they felt more comfortable. Each co-researcher was allocated 25 questionnaires. The questionnaire is provided in Appendix 1.

The questionnaire was paper based on two sides of A4, comprising 10 substantive questions and five demographic items. It was designed to be interviewer administered, face to face. The coresearchers' knowledge of the population in question determined that where there was reluctance or hostility to revealing the answers verbally, the respondent would be encouraged to self-complete, assuming their ability to read English was sufficient. Every question gave an explicit option not to answer.

While the survey's purpose was to discover mental health need and ways of meeting it, on the advice of the co-researchers the questionnaire did not in fact mention "mental health". Respondents were asked instead about their feelings, hopes and experiences.

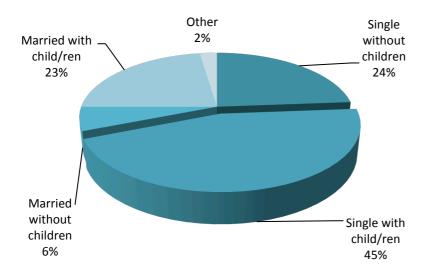
The majority of questions were fixed response type, deliberately chosen for ease of completion and to minimise any bias caused by language differences. These mostly used rating scales 1-4. To offset these questions there were three free text options and in addition every closed question had an "Other" option.

The research task was to gain evidence of the mental health needs of refugee and asylum seeking women in Liverpool.

2. Sample

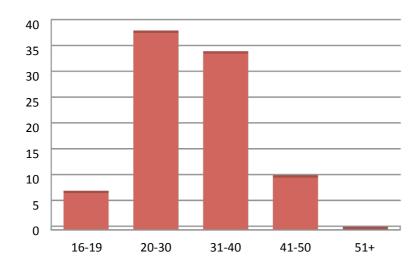
The final number in the sample was 92, estimated to be about one fifth of the total population of refugee and asylum seeking women in Liverpool. Those with children accounted for 68 percent of the sample, this included 45 percent of the sample who were single with children.

Figure 1. Marital status



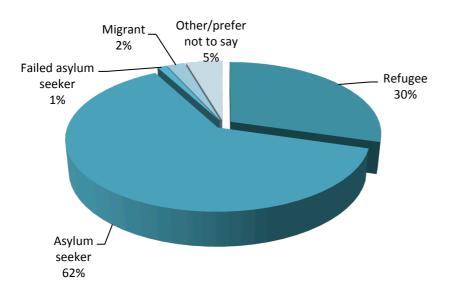
The majority of respondents (81 percent) were aged between 20 and 40, with none over 50. (Note: not all those with children were united with them in this country.)

Figure 2. Age



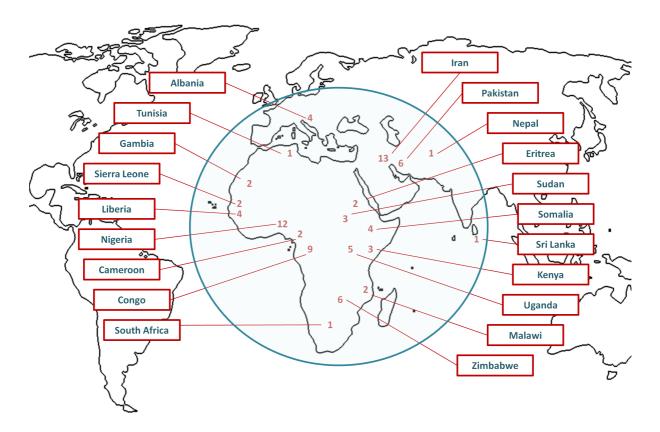
The majority of respondents who answered (91 percent) were refugees or asylum seekers, with asylum seeker accounting for 62% who answered

Figure 3. Legal status



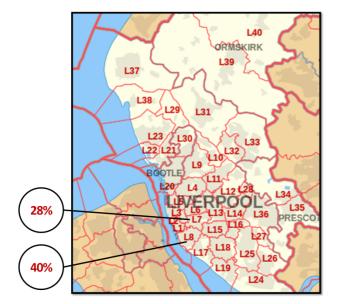
The respondents gave 20 countries of origin, the majority falling within Africa. The highest concentrations were from Iran (13) and Nigeria (12), followed by Congo (9), Pakistan (6) and Zimbabwe (6). Nine respondents chose not to reveal their country of origin.

Figure 4. Country of origin



Now living in Liverpool, the two postcodes in which the majority of respondents who answered this question (68 percent) lived were L7 and L8, inner city areas with high levels of deprivation. Twenty seven women chose not to disclose the first part of their postcode.

Figure 5. Postcode areas



L4	5
L5	0
L6	4
L7	18
L8	26
L13	5
L14	0
L15	3
L16	0
L17	2
L18	2

4. Results

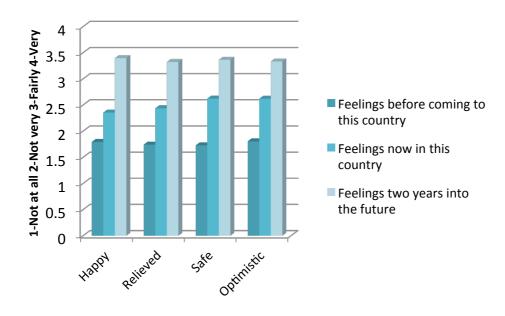
4.1 Positive and negative feelings

Respondents were asked to: "Think about what happened to you before you came to this country – and how it made you feel". Then, "......what has happened to you in this country and how it makes you feel." And finally, "......In two years' time how do you think you will be feeling?"

The fixed responses were a mix of positive and negative feelings. Overall the positive feelings started low in the past and showed an upward trend. Conversely the negative feelings started high and showed a downward trend.

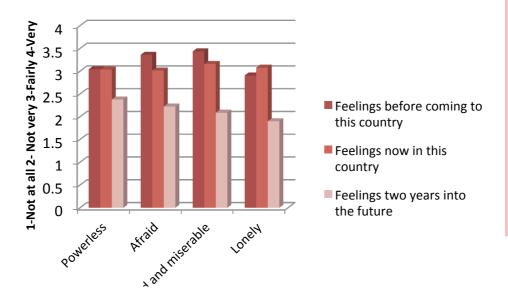
One quite striking finding is that feelings of powerlessness did not diminish once in this country and that loneliness actually increased. Sadness and fear only reduced slightly between being in the old country and coming to the UK. However respondents were optimistic for the future and predicted all their negative feelings to improve.

Figure 6. Positive feelings



50 percent thought they would be "Very" happy and 46 percent thought they would be "Very" optimistic in two years time.

Figure 7. Negative feelings



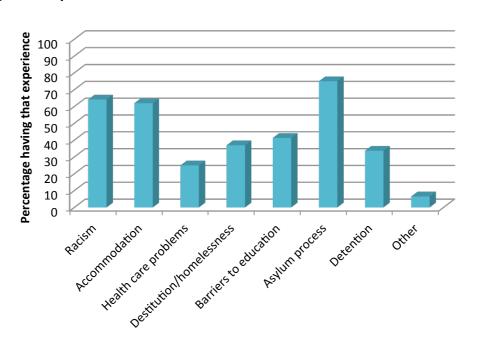
47 percent felt "Not at all" safe and 58 percent felt "Very" sad and miserable before coming to the UK.

4.2 Experiences in the UK

The survey asked: "How many of these experiences have you had in the UK?"

There were 7 fixed responses and an "Other" option. The average number of experiences per respondent was 3.5. The most common experience was of the asylum process (75 percent) followed by racism (64 percent).

Figure 8. Experiences in the UK

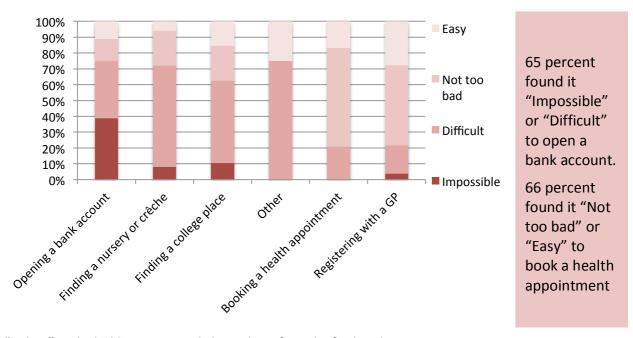


"Other"
experiences
included

I was
attacked by
some group
of kids simply
for covering
my face on
the road. I
told some
people about
it but they did
nothing to
help me.

Respondents were asked to rate a range of experiences they have in the UK, as Impossible, Difficult, Not too bad or Easy. The hardest task overall was opening a bank account.

Figure 9. Functioning in the UK



[&]quot;Other" included learning English, making friends, finding housing.

4.3 WOMEN'S VOICES: Asylum process

Being in the UK was reported by some asylum seeking women as very hard:

Asylum process is worse than slavery. It is a nightmare. Can they treat people at least like humans?

One day a man pushed me on Holt Road because I was covering my head and then shouted at me "Monkeys".

I was made homeless for almost nine months sleeping rough and very hungry when my asylum case was turned down.

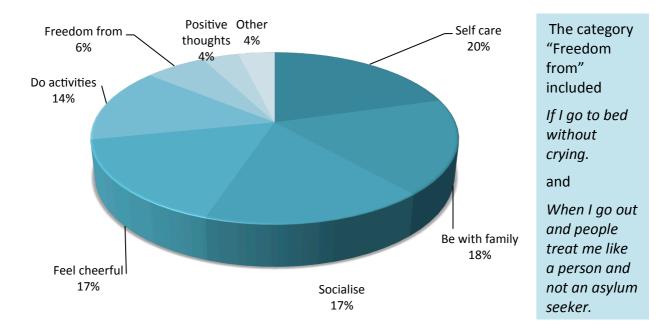
4.4 Feeling good

Free text responses to the question, "How do you know when you are feeling good" were coded into eight categories, described below:

Table 1. Categories of "Feeling good"

Category	Description	Responses
Self care	Taking care of themselves, especially their appearance, having interest in fashion and how they look	16
Be with family	Playing with their children enjoying time with their husbands, being in the family unit	14
Socialise	Going out, talking to people, seeing friends, general socialising	13
Feel cheerful	Smiling, laughing, being happy and cheerful	13
Do activities	Going shopping, doing hobbies, watching TV	11
Freedom from	Not feeling miserable, freedom from fear	5
Positive thoughts	Feeling calm, peaceful, relaxed, optimistic	3
Other	Religious practices, being treated properly	3
	Total	78

Figure 10. Feeling good



4.5 WOMEN'S VOICES: Feeling well

How asylum seeking women knew they were feeling well

I sleep well at night

When I can laugh

When I get up in the morning and get dressed

I don't remember good

I do a lot of window shopping

I start having hope for the future

My physical appearance changes, I look more cheerful and beautiful

I talk a lot with my husband and hugs him a lot

I feel less sick

I sing a lot when I am feeling good

I dance a lot with my kids and their father

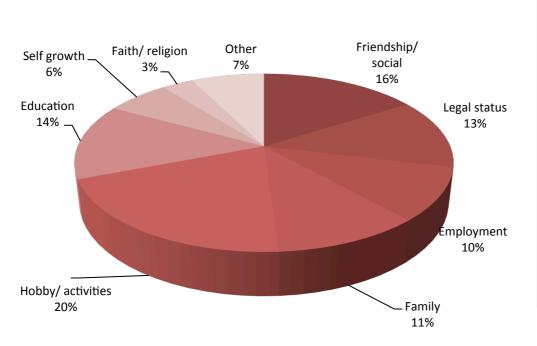
4.6 Ways to feel better

Free text responses to the question, "What would you like to do that would make you feel good" were coded into ten categories, described below:

Table 2. Categories of how to feel better

Category	Description	Responses
Hobby/ activities	Physical activity, simple things like relax and watch TV, go shopping	19
Friendship/ social	More opportunities to mix with people, with other women	15
Education	General desire for education but especially to learn English	13
Legal status	Wanting permanency through asylum seeker status	12
Family	Being reunited with family members including husband/children, just spending more time with family	10
Employment	Finding work	9
Other	Eg Being treated like a person	7
Self growth	Self confidence, esteem, image, efficacy	6
Faith/ religion	Practising religious faith	3
	Total	94

Figure 11. Ways of feeling better



Purposeful, meaningful activity sums up what respondents want, which is only truly attainable with legal status. Also: to be treated like a human

Compared with asylum seekers, women whose legal status was refugee were

- Almost twice as likely to experience racism and destitution
- Twice as likely to have accommodation issues
- Four and a half times as likely to have experienced health problems or detention
- Five times as likely to have had a poor experience of the asylum process.

4.7 WOMEN'S VOICES: Feeling better

What asylum seeking women do to feel good

I will love to have some new dresses since the ones I have now are so old Getting my asylum seeker status and safe accommodation

I like going to swimming pool also like to go to Zumba classes

Help people

I will like to keep myself busy sometimes just window shopping, pretending I can also shop

I want to get education and get job

All my family together in the UK

Going to women's groups

I like to buy some new things for my child like play toys and clothes. This makes me happy

I like having someone to talk to when I feel low

4.8 Talking about mental health

Respondents were asked how comfortable they feel in talking to people about their moods and feelings. The results were very evenly spread, with 30 percent (28) feeling Very comfortable, 34 percent (31) Not at all comfortable and 29 percent (27) having No strong feelings. Seven percent (6) declined to answer.

4.9 What would enhance mental health

Respondents were offered a checklist of seven items, with the additional option of Other, to rate how well different aspects would help them feel emotionally well. Having a job was the most commonly rated as helping "A lot" or "A huge amount", followed by More counselling and Women's groups.

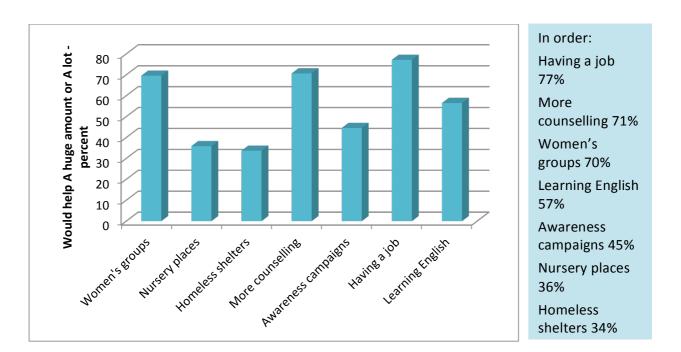


Figure 12. What is wanted to improve emotional wellbeing

4.10 Additional comments

There were 21 additional free text comments at the end of the questionnaire. These were coded into three categories as shown below.

Table 3. Categories of additional responses

Category	Description	Responses
Request/ plea	To be treated better, know outcomes of this research, more counselling, better accommodation. Need bus fares to get to women's groups	11
Feedback/ complaint	Difficult experiences, eg with NASS houses, destitution, racism, loneliness, asylum process	7
Thanks	Thank yous both to PSS and Comic Relief	3
	Total	94

5. Discussion

5.1 Findings

The findings from this study make compelling reading. It is likely to be the only survey of its kind, specifically of asylum seeking women in a major UK city, which has been co-researched with asylum seeking women themselves. This alone is a strong indication of the validity of the findings.

The major countries of origin in our sample were (in order) Iran, Nigeria, Congo, Pakistan and Zimbabwe. There are known human rights abuses in these countries and additional evidence of widespread sexual violence and mass rape of women by police and militia in the (Democratic Republic of) Congo and mass victimisation of women opposed to the ZANU-PF regime in Zimbabwe. ¹

What we learned from our 92 respondents is that after fleeing such regimes asylum seeking women in Liverpool have commonly experienced racism, problems with accommodation or destitution and issues with the asylum seeking process. It is painful for them to talk about these topics. It is very difficult for them to open a bank account but moderately straightforward to book a health appointment. They live predominantly in the L7 and L8 postcode areas of Liverpool, where many neighbourhoods, characterised by poor housing stock, are in need of regeneration.

When asked about their feelings, hopes and fears, before and after coming to this country, most report an overall improvement in mood, optimism and hopefulness, However feelings of powerlessness do not diminish once the women are living and seeking asylum in this country and their feelings of loneliness have actually increased. Sadness and fear among asylum seeking women in Liverpool have only reduced slightly between being in the old country and coming to the UK. Some find it very difficult to live in the UK, feeling misunderstood and stigmatised.

Our respondents know when they are emotionally well because they look after themselves and their appearance better, they are able to enjoy being with family or friends, they dance, they sing. Appearance is important not just for self esteem reasons, but because it enables the women to pass unnoticed in society – to wander through shops just looking like other people. They are compromised in their ability to be mentally well not only by the experiences that led them to seek asylum in the UK, but also by poor accommodation, the threat of destitution and poverty – material, social and cultural. What they would really like to increase their emotional well being is employment, the chance to buy a new dress, the ability to buy toys for their children (remembering that many are separated from their children). Their legal status is critical – if and when the status of asylum seeker is attained it becomes much easier to join in and benefit from education and employment opportunities.

The above might be termed self help measures – being able to be a participating citizen, employed and/or educated, socialising and playing a part in the community – these are all known to improve self esteem and self efficacy. But many asylum seeking women, because of their traumatic experiences and extreme life events, need and want more support to enable them to participate and the clear finding from this study is that asylum seeking women in Liverpool want more counselling and more women's groups to help their emotional well being.

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¹ Refugee Council (2012) Between a rock and a hard place: the dilemma facing refused asylum seekers

5.2 Reflecting on the process

Based on what the respondents told them, the co-researchers were vital to the volume, accuracy and honesty of asylum seeking women's responses. They were told many other stories and experiences that respondents did not wish to be recorded, but which reinforced the findings described above. Some respondents said clearly they were only participating to the survey because it was being conducted by one of them – they did not trust the wider system.

Conducting the survey re-opened old psychological wounds – both for some of the respondents and for the co-researchers. One co-researcher withdrew after the data collection phase because it had brought back too many traumatic memories. Another stayed to complete the coding and data entry phase, but had to withdraw subsequently because her own situation was so precarious.

Gatekeepers were an important aspect of the process – if the person running a facility was not welcoming, access to the women using the facility was extremely limited. The co-researchers overcame this by visiting women in their homes as well. In some cases the gatekeepers were at least as suspicious as the potential respondents and the co-researchers, despite being badged as "PSS" needed official support from the organisation.

Overall the co-research team found it a very worthwhile endeavour, learning new skills and, as one co-researcher said, feeling proud because it was "about helping all of us". Each phase took longer than anticipated and planned. The lesson from that is twofold – co-production always needs time to work and gaining access in any meaningful way to marginalised people is hard work – but the quality of the results repays the effort.

5.3 Learning from the co-researchers

Two co-researchers were able to stay with the project until the end, helping to shape the content of this report. Their testimony is given in their own words below and speaks for itself.

Two others were unable to complete but both made a valuable contribution in designing and conducting the survey – without them the findings would not have been as convincing.

5.3 WOMEN'S VOICES: the last word

PAULINE

My Names are PAULINE N ALOBWEDE I am25 yrs old. I was born in CAMEROON a country between WEST and CENTRAL AFRICA. I speak English which is my first language, French, Broken English, and my native language Bakossi. I came in the UNITED KINGDOM IN 2005 as an asylum seeker.

I am still waiting for my status.

As a matter of fact the purpose of the research was to improve the emotional wellbeing of women asylum seekers in Liverpool. As a service user myself I felt so proud to be part of this volunteer research team of PSS. Spinning world which is a therapy service working with migrants and refugees to help with recovery around trauma. And the research program was sponsored by COMIC RELIEF; I then decided to actively participate in order to share my own experience with the women, which may boast their confidence when questioned about their experiences. And at the same time help spinning world gain a wider knowledge of personal issues migrants and asylum seeker women are encountering in Liverpool.

WHAT WE DID AND WHERE WE VISITED

To start with, training was offered to us by a well trained researcher who came from London known as YVONNE, along with the members of spinning world team. The training took place on Tuesday 20th November 2012 at 9:30-3pm at PSS gate way project Princes Park. Later on we started the research on the 7th of January 2013. We were four women in numbers and all of us had been or are still service users of PSS. All of us also came from ethnic groups and asylum seeker women as well. A research mentor was allocated to us known as Sue Newell. She worked hand in hand with us, and also provided every necessary assistance we needed during the work.

We started by making phone calls to various organizations and booking appointments with heads of the organizations. Most of them responded positively and gave us a date to visit them example SAHIR House I contacted a lady called Lulu* who allowed us to visit. She told us the research could only be conducted on one condition, if we allow her to conduct the research herself. The reason being that the people or nature of their clients was so sensitive, being HIV patients, they preferred to deal with them themselves.

We later visited VOICE OF NATIONS organisation four of us, we introduced the whole idea and we were later asked to come back and conduct the research.

We later went to Kensington Methodist women groups, as a former member of this group myself we were well

received, but were never allowed to conduct the research because they found the surveys too long and sensitive for their clients.

This motivated me to start visiting some of the clients in their homes since I was familiar with some of them. Many of them lived in L7, L8. They accepted to be interviewed without a problem, and were so open. I also interviewed those I was sharing NASS accommodation with them.

The problem most of them had was language problem but it was easy to deal with them because I do speak more than one language myself. Those who came from French speaking countries spoke French with me. And those who spoke Arabic or Somali I used their friends who could understand English to explain the whole idea to them so the whole thing went well. I completed the forms myself while they were answering and telling their stories.

During this period a confidence and wellbeing class was also organized by Faran Ebi - me and other three girls seized this opportunity to conduct more research with the women which also worked out well many forms were filled that day I don't know the amount.

Personally I succeeded to complete a good number of survey forms. We went to Morang, Asylum link, Red Cross etc.

HOW THE RESEACH MADE ME FEEI?

Personally I did not find the research easy, firstly due to my own personal stuffs I was going through. My health wasn't the best mentally, physically and physiologically so I found myself struggling, but by the special grace of God everything went on well.

I was also not very comfortable with certain questions, because I am also going through the same experiences, sometimes I found it hard asking certain questions. Many times I found myself having flashbacks.

At the same time I felt happy doing this research because it gave me the opportunity to share some of my experiences at the same time.

The fact that I was allowed to participate in this research also made me proud of myself, I felt I was useful and I could also be entrusted with a task. I felt my self esteem being boosted and I also felt lifted.

This research gave me the chance to excise my volunteer experiences I have had all this years and some other skills I believe could be very useful to the society and emigrant population as a whole.

* Name has been changed

SUSAN

My name is Susan Oshin. I am from Nigeria in the western part of Africa, I speak and understand Yoruba and English language the former being my local dialect. I have been in the UK for over six years now and my asylum process is still on going. I am in on going therapy at PSS.

When I was asked to become part of the research work, I was really happy because I needed something to do to complement my therapy and to challenge me and build my confidence. The asylum process is a very disturbing and fearful process, a distraction from it, is a blessing.

We started the research work with a comprehensive training by a professional researcher (Yvonne) who explained everything we needed to know and the necessary steps required for the work.

We visited the following groups; MRANG, Voice of Nations (VON), Sahir House, Kensington Methodist church and also did one to one with refugee women in our neighbourhood. Most of the group were accommodating.

We worked in twos and unfortunately my partner couldn't cope when we got to MRANG, it brought back really bad memories that she's been through during her asylum process, so she had to withdraw from the research work.

I went to MRANG again with a member of staff of PSS who serves as our mentor and one of the other ladies. This was a fruitful experience because it was very busy and the women were willing to talk to us after we were introduced to the group.

Since the research is a sensitive piece of work, it was easy for us to speak to the women since we were also part of them and that we could be trusted but I must say its quiet sad listening to some of them but rather than getting discouraged from continuing it helped me to realise that I have moved on and this was because of the important support I got from PSS(Spinning World). I believe if most of the women have access to this kind of support, they will move on with their lives too.

Big thank you to PSS for this great opportunity and for making me enjoy living again.

Thank you

ACKNOWLEDGEMENTS

The whole team made this happen — our two lead co-researchers Susan and Pauline and their partners Miriam and Nang. Lynn, Susan and Faran-Ebi from PSS were ever in the background, supporting people and process.

We would all like to thank all the women who took part by answering questions and divulging sensitive information and we acknowledge that for many of them that was a difficult thing to do. Also we thank the refugee and asylum seeking facilities and organisations in Liverpool that welcomed us.

Grateful thanks to the continuing work of Comic Relief in funding projects like Spinning World that do so much for those suffering trauma and loss.

Yvonne Anderson Cernis Limited November 2013

Let's start by finding out about some of your ex	perience	es, con	siderii	ng the p	ast, p	resent	and 1	future.
1. Think about what happened to you before you caeach row	ame to th	nis cour	ntry – a	and how	it ma	de you f	eel. 7	Tick one on
How much did you feel	VER	Y	FAI	RLY	NOT	VERY	١	OTATALL
Нарру								
Relieved								
Safe								
Optimistic								
Powerless								
Afraid								
Sad and								
miserable								
Lonely								
2. Now think about what has happened to you in the row	nis counti	ry – and	d how	it makes	s you 1	feel. Tick	one	on each
How much do you feel	VEF	RY	F.A	AIRLY	N	OT VERY		NOTATALL
Нарру								
Relieved								
Safe								
Optimistic								
Powerless								
Afraid								
Sad and miserable								
Lonely								
3. What about the future? In 2 years' time, how do	you thin	k you w	vill be	feeling?	Tick o	ne on ed	ich ro	w
How much will you feel	VEF	RY	F.A	AIRLY	N	OT VERY		NOTATALL
Нарру								
Relieved								
Safe								
Optimistic								
Powerless								
Afraid								
Sad and miserable								
Lonely								
4. How many of these experiences have you had in	1							
	TICK	COMI	MENTS	(if any,	contir	nue over	page)
Racism								
Accommodation issues (eg unsuitable,								
unsafe, insanitary)								
Problems getting health care								
Destitution/homelessness								
Barriers to getting education								
Asylum process Detention								
Other (say what)								
5. How do you experience these things about the U	K? Tick o	ne on e	ach ro	W/				
You find		Impos		Difficu	lt	Nottoob	ad	Easy
Opening a bank a					-			1
Registering w								
Booking a health appointment (doctor, nurse, midwi								
Finding a college								
Finding a nursery or	-							
Other (sa								

6. How do you kno	w when you ar	e feeling goo	od? (What is di	fferent about	you – the v	vay you think, I	ook or act?)		
7. What would you	7. What would you like to do that would make you feel good?								
8. How do you feel	about talking t	o people ab	out your mood	ds and feelings	? Tick one				
			Very	No st	- 1	Not a			
			comfortable	feeli	ngs	comfor	table		
9. How much would	d any of the fol	lowing help	vou feel emoti	ionally well? 7	ick all that	annly			
J. How made to day	a any or the for			Δ huge		Quite a	Not much		
			would help	amount	A lot	lot	Not much		
		W	omen's groups Nursery place						
		Ho	meless shelter	_					
More counsell	ing (talking cor								
	Awaren	ess campaig	ns/ information	n					
			Having a jol						
			earning Englisl Other, say wha	_					
really helps us to has services. What is your	Single			Married		arried	Other,		
marital status?	without	Single child,		without		with	say		
Tick one	children	Ciliu,	Tell	children	chi	ld/ren	what		
Which age group									
are you in?	16-19	20-	30	31-40	4	1-50	51+		
Tick one									
			[Don't want to	say your a	ge? Tick here:			
What is your UK sta	atus? (eg refugee)				Don't w	ant to say? Tic	k here:		
What is your country of origin? Don't want to say? Tick here:									
						•			
What is your postco	ode? (Just the f	irst part eg l	.8 and not L8 7	'BY)	Don't v	vant to say? Ti	ck here:		
Anything else you w	vould like to tel	I me about?							

Thank you very much for your help.

Research training Handbook for Spinning World service users to co-research the:

Mental health needs of women asylum-seekers in Liverpool









1. Introduction

Type of research

First we start with your own experience. Think about all the times you have been asked for your views, opinions and experiences. Then we will share with the group.

Tick one or more of the boxes below.

Online poll (eg agree disagree, like)	
Online survey or pop-up marketing quiz	
Postal questionnaire	
Census or household survey	
Telephone survey "just a few questionsfew minutes of your time"	
Focus group – about a new product, or about your experiences	
Interview 1:1	
How were you asked?	
What were you asked about?	
What happened to the information you gave?	
Any other comments?	

Tick

2. What do we mean by "research"?

Is it different/special, or is it just asking questions?

In different respects, researchers ask questions in special ways in order to find:

Accuracy or truth

- If research is not carried out properly, accuracy and truth can be distorted or biased.
- There are many ways in which research can be biased. Biased findings are not accurate or true.
- Research is planned, systematic and impartial (ie not leaning one way or another, not prejudiced for or against any viewpoint)

Ways the research can become biased

The researcher:— Age

		0
	—	Gender
	_	Ethnicity
	_	Social/family background
	_	Occupation
	_	How the researcher sees the world; how the world sees the researcher
•	Tho	ose being researched:
		Is it the right population
	_	How many of that population will be researched (sample)
	_	How the sample is obtained
	_	Are they the right people, in the right mixture, in the right numbers?

- The questions:
 - How they are worded
 - How they are presented
 - Whether they ask what the researcher thinks they ask
 - Do people understand what they are being asked and how to answer?
- Where the research is done:
 - If solely online
 - Postal surveys
 - Street interviews, office, shop, home....
 - Where do people feel comfortable, private and confidential?
- When the research is done:
 - Same or different day of week
 - Weekdays or weekends
 - Daytime or night

THE KEY QUESTIONS

- WHY the research is needed
- WHAT it is that the research is trying to find out, or WHAT it is testing
- WHO are the researchers and WHO are the research population
- HOW the research will be carried out and HOW the questions will be asked
- WHEN the research will be taking place
- WHERE the research will be taking place

3. Ethics

The moral principles – values, rights and wrongs - that govern the way we conduct research are referred to as research ethics.

Honesty

Strive for honesty in all communication about the research. Honestly report data, results, methods and procedures. Do not fabricate, falsify, or misrepresent data. Do not deceive colleagues, granting agencies, or the public.

Objectivity

Do everything to avoid bias in the research design, data analysis, data interpretation, peer review, personnel decisions, grant writing, expert testimony, and other aspects of research where objectivity is expected or required. Avoid or minimise bias or self-deception. Disclose personal or financial interests that may affect research.

Integrity

Keep your promises and agreements; act with sincerity; strive for consistency of thought and action.

Carefulness

Avoid careless errors and negligence; carefully and critically examine your own work and the work of your peers. Keep good records of research activities, such as data collection, research design, and correspondence with agencies or journals.

Openness

Share data, results, ideas, tools, resources. Be open to criticism and new ideas.

Confidentiality

Protect confidential communications, such as papers or grants submitted for publication, personnel records, trade or military secrets, and patient records. Keep the identities of your research participants anonymous and private.

Responsible Publication

Publish in order to advance research and scholarship, not to advance just your own career. Avoid wasteful and duplicative publication.

Respect for colleagues

Respect your colleagues and treat them fairly.

Non-Discrimination

Avoid discrimination against colleagues or students on the basis of sex, race, ethnicity, or other factors that are not related to their scientific competence and integrity.

4. Choosing the right method for the job

We need to address the following questions:

Satisfaction

•	What is the purpose of the research
	 What knowledge or understanding do you aim to have when the research results have been analysed How will it add to existing knowledge?
•	How will it be reported (do you propose to:)
	 Tell a story Show numbers and graphs Educate and inform the audience Stimulate and provoke the audience?
•	Different types of research method:
	 Experiment (eg clinical trials) Survey (eg Census) Individual interview Group interview Observation
•	Ways to do a survey
	 — Interviewer-recorded (Face to face, Telephone) — Self-completed (Post, Online, Face to face)
•	Types of question:
	 Demographic (personal details) Open ended Fixed choice One of many Many of many Rating scale

• Demographic questions

Strengths

- We need to know the characteristics of the sample so we can check they are similar to the population being researched
- It helps us to break down the results to see what different types of people say

Weaknesses

- People are suspicious and don't always like to answer
- · Open questions

Strengths

- Richness, detail, real world answers
- You get surprises

Weaknesses

- Creates a lot of data
- Difficult to analyse with confidence
- Fixed choice questions

Strengths

- Quick and easy to complete
- Quick and easy to analyse
- Consistent findings

Weaknesses

- May not allow for what the participant really wants to tell us
- Don't give a full picture (not real life)

5. Survey design checklist

Research population	
How many in the research population	
Age, gender, ethnicity, postcode etc of research	
population (demographics)	
Other characteristics	
Research sample	
How many in the sample	
How will it reflect the demographics	
How will it reflect the other characteristics	
Access	
How will we get to the sample	
Do we need special resources like interpreters,	
signers, etc	
Chosen approach	
Is it self complete or interviewer complete?	
Is it face to face, phone, online or post?	
	······································

What do we want to know?	
Question	Question type