

What is qualitative evidence synthesis & what is meta-ethnography?

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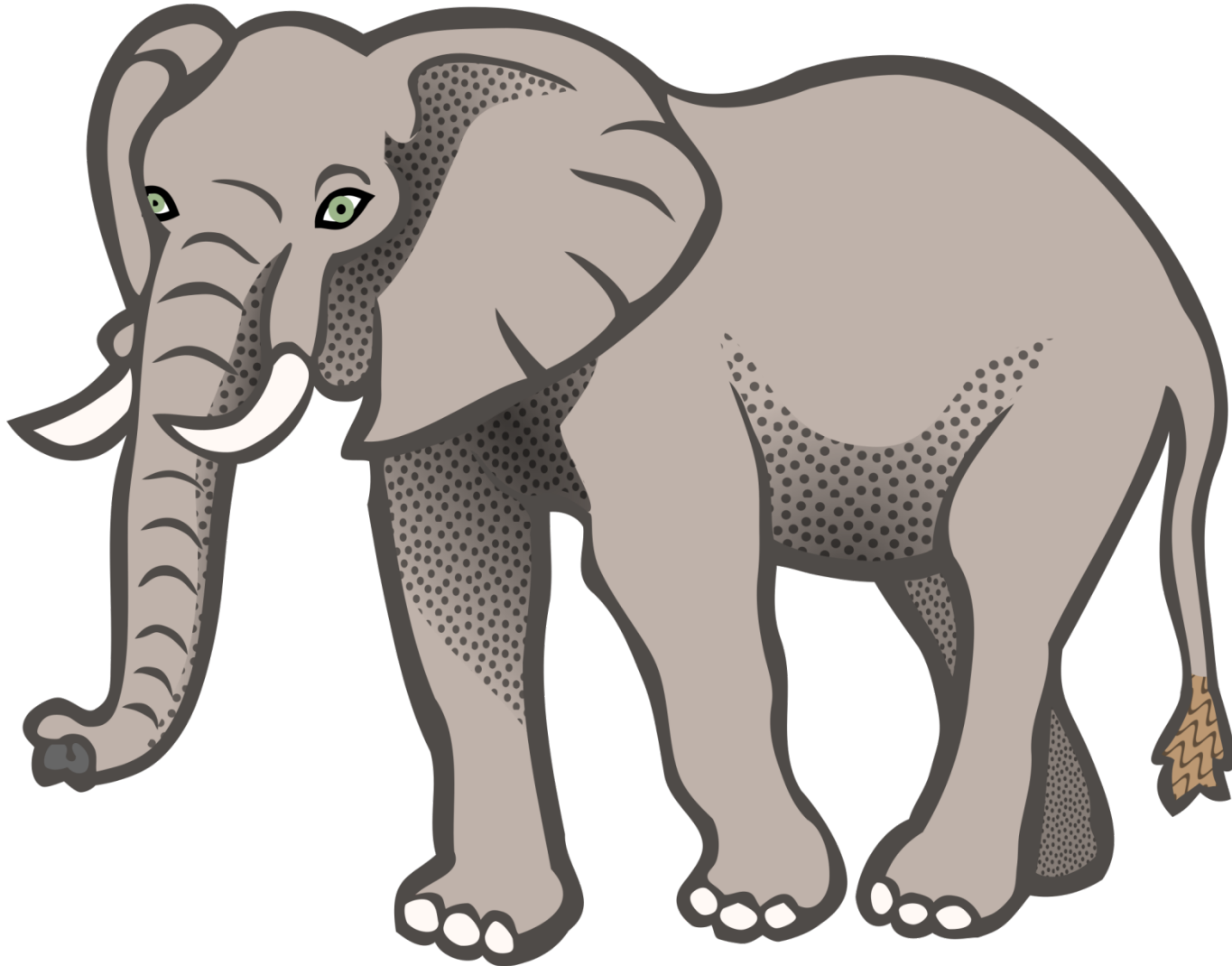
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What is qualitative evidence synthesis?



Methods for qualitative evidence synthesis

Meta-ethnography

Narrative synthesis

Critical Interpretive Synthesis

Meta-study

Realist synthesis

Meta-summary

Thematic synthesis

Content analysis

Grounded theory synthesis

Meta-interpretation

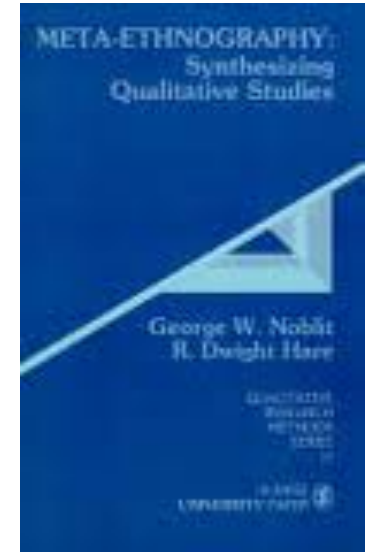
Meta-narrative

What is meta-ethnography?

Meta-ethnography developed by George W. Noblit and Dwight Hare, in the USA, in the field of education.

Noblit & Hare (1988). Meta-ethnography: synthesizing qualitative studies. Beverly Hills: SAGE Publications.

‘Making a whole into something more than the parts alone imply’ (p. 28).



George W. Noblit

The 7 phases of a meta-ethnography

Phase 1: Getting started

Phase 2: Deciding what is relevant to the initial interest

Phase 3: Reading the studies

Phase 4: Determining how the studies are related

Phase 5: Translating the studies into one another

Phase 6: Synthesising translations

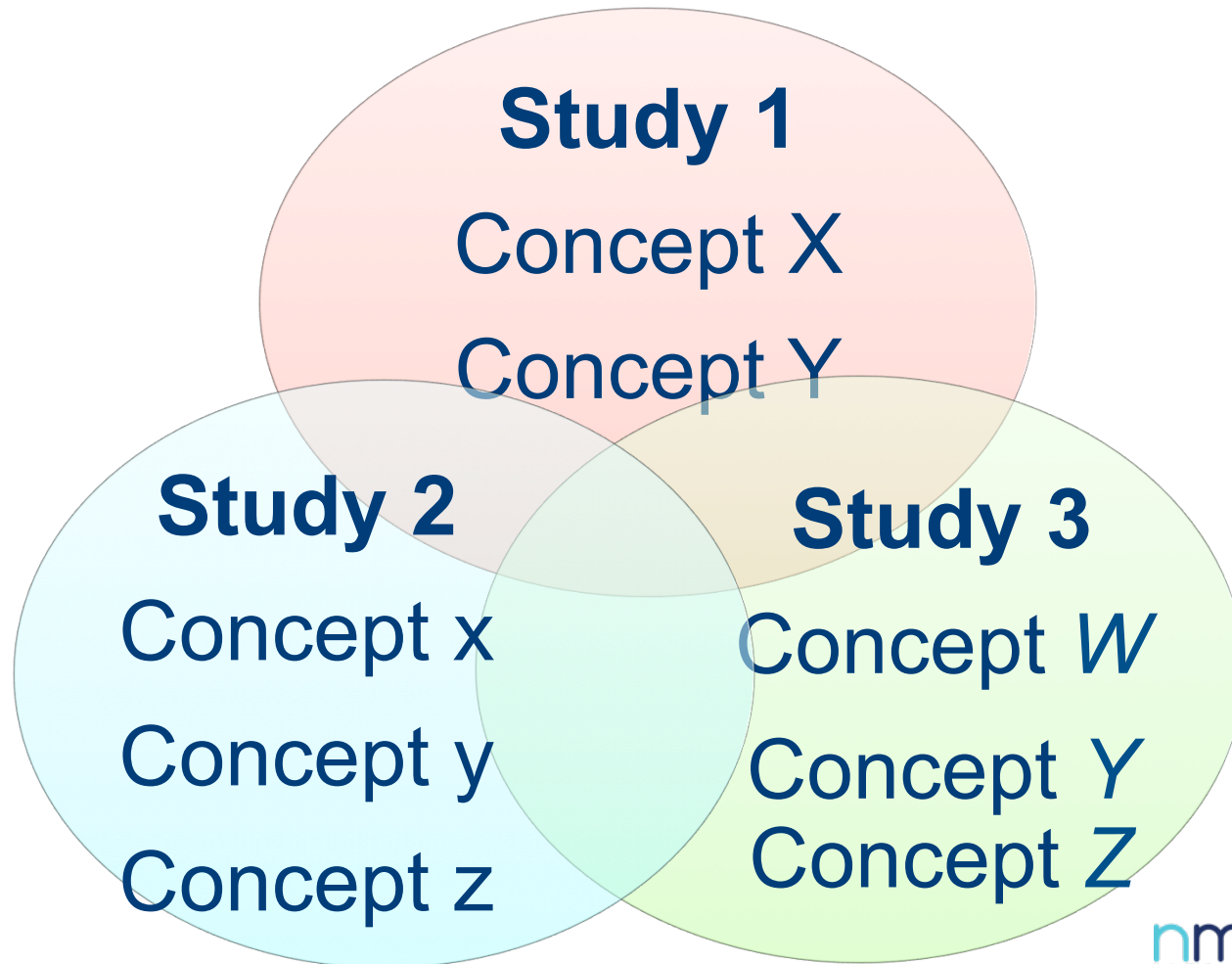
Phase 7: Expressing the synthesis

Phase 5. Translating the studies into one another

- Reciprocal translation
- Refutational translation
- Line of argument synthesis

Phase 5. Translating the studies into one another

Reciprocal translation



Phase 5. Translating the studies into one another

Refutational translation

Study 1

Chronic pain
life changing

Study 3

Chronic pain
is imagined

Study 2

Chronic pain
not life
changing

Phase 5. Translating the studies into one another

Line of argument synthesis



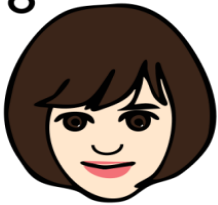


Research participants' experiences

1st order constructs



Researcher interprets these experiences



2nd order constructs



Meta-ethnographer re-interprets the researcher's concepts

3rd order constructs

AN EXAMPLE OF DOING A META-ETHNOGRAPHY

Phase 1. Getting started

Using research about lay meanings of medicines as an example

Research question:

how do the perceived meanings of medicines affect patients' medicine-taking behaviour and communication with health professionals?



Phase 2. Deciding what is relevant to the initial interest



- Identified published qualitative studies
- Selected studies

Concepts from the individual studies

Study 1

concept A – detailed concept description

concept B - detailed concept description

concept C - detailed concept description

concept D - detailed concept description

Study 2

concept a - detailed concept description

concept c - detailed concept description

Study 3

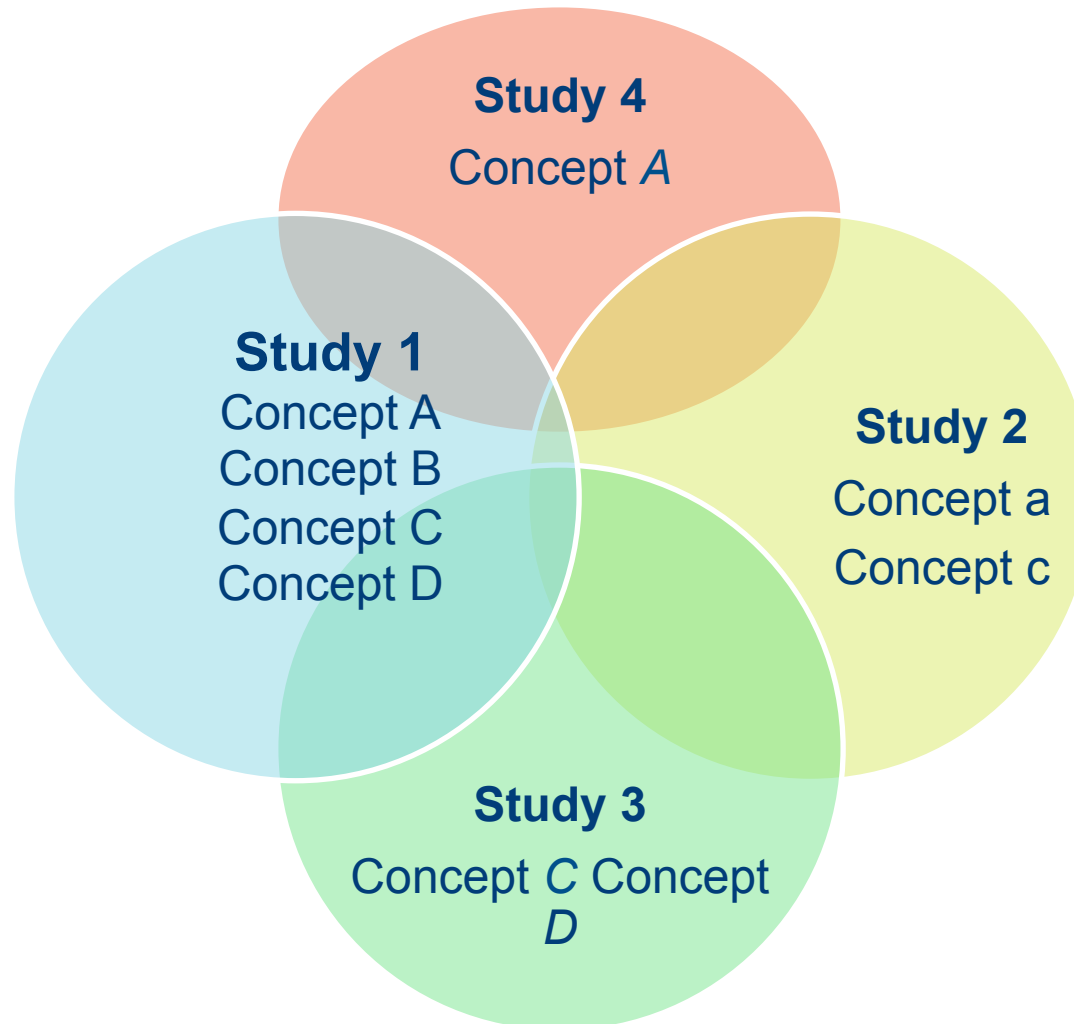
Concept C - detailed concept description

Concept *D* - detailed concept description

Study 4

Concept A - detailed concept description

Phase 4. Determining how the studies are related



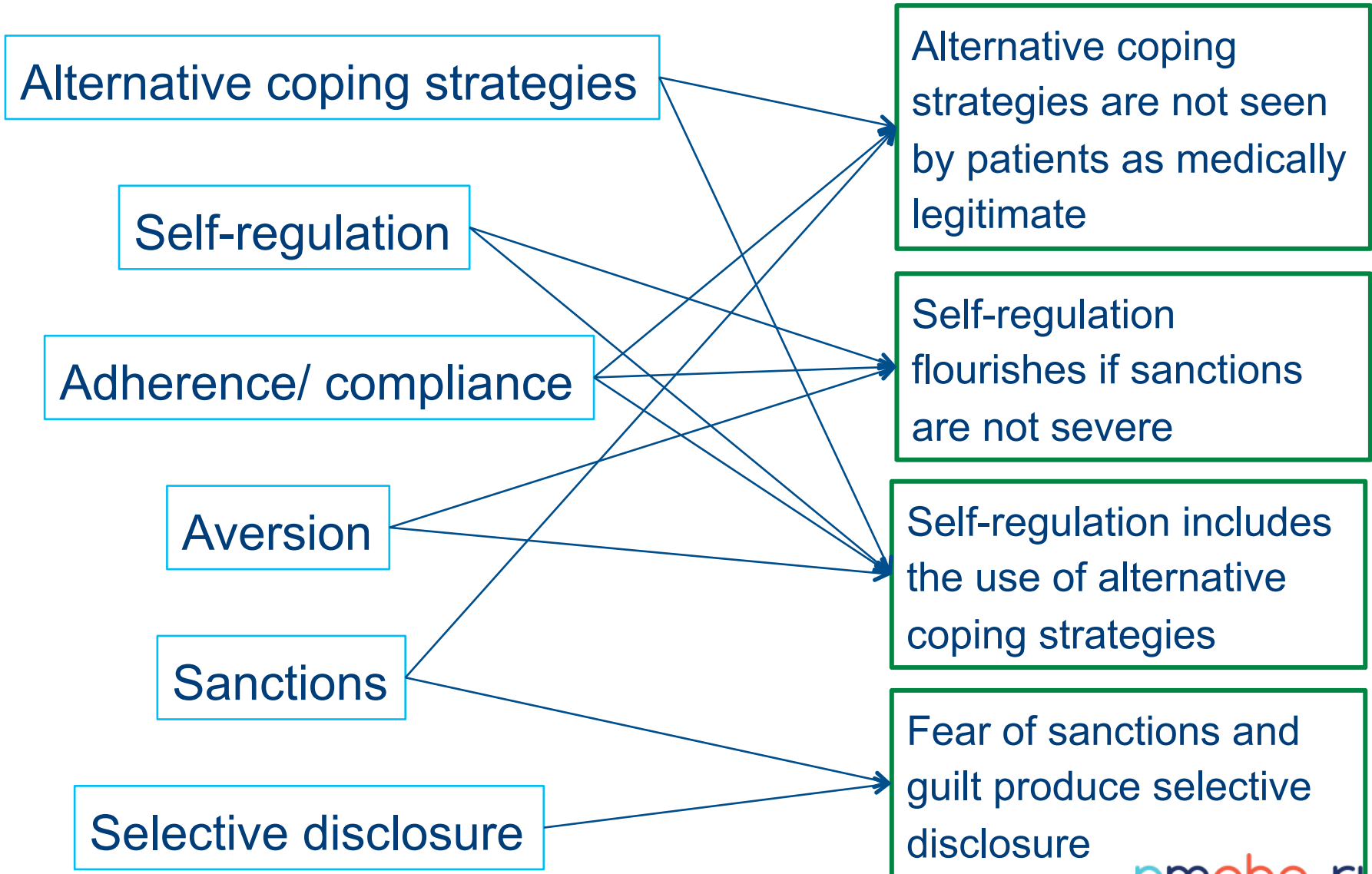
Phase 5. Translating the studies

<u>Common concepts</u>	Lay meanings of medicines			
	Study 1	Study 2	Study 3	Study 4
Adherence/ compliance		✓	✓	
Self-regulation	✓	✓	✓	✓
Aversion	✓	✓	✓	✓
Alternative coping strategies	✓	✓	✓	✓
Sanctions		✓		✓
Selective disclosure	✓			✓

Phase 6. Synthesising translations

Concepts from studies

New interpretations



Phase 7. Expressing the synthesis

The NICE Guideline Development Group:

“.....considered the Pound synthesis provided the type of evidence they were looking for. The description of patient behaviours and factors influencing patients medicine-taking behaviours were used to inform the recommendations about exploring patients’ beliefs and concerns, the type of information that patients’ may require and to describe common medicine-taking behaviour that healthcare practitioners might wish to discuss with patients.”

Thank you for listening.



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