

*Methodological Paper*

## Reflections on health promotion fieldwork in Nepal: Trials and tribulations

Preeti Mahato<sup>1</sup>, Pasang Tamang<sup>2</sup>, Bibha Simkhada<sup>2</sup>, Sharada P. Wasti<sup>3</sup>, Bhimsen Devkota<sup>4</sup>,  
Padam Simkhada<sup>2</sup>, Edwin R. van Teijlingen\*<sup>5</sup>

<sup>1</sup> Royal Holloway, University of London, UK

<sup>2</sup> University of Huddersfield, Huddersfield, UK

<sup>3</sup> University of Greenwich, London, UK

<sup>4</sup> Faculty of Education, Tribhuvan University, Kathmandu

<sup>5</sup> Bournemouth University, Bournemouth Gateway Building (5th floor), St Paul's Lane, Bournemouth, BH8 8GP, UK

\* Correspondence: [evteijlingen@bournemouth.ac.uk](mailto:evteijlingen@bournemouth.ac.uk)

### Abstract

Fieldwork is often a crucial part of community-based public health studies. However, few researchers write about this, often challenging, process. This paper highlights various occasions where fieldwork in the area of public health, health promotion or community health was more difficult than expected or did not go as planned. Our reflections on working in the field will help less experienced health researchers, or those new to conducting research in Nepal, in their research development. Moreover, this paper is also calling upon health promotion researchers to share more details about the process of doing fieldwork and its trials and tribulations. Our key advice is to be inquisitive and open-minded around fieldwork, followed by: be prepared for your fieldwork, conduct a risk assessment of what might go wrong and consider your options to overcome such trials and tribulations. Fieldwork is unpredictable; therefore, it is important to share practical lessons from the field which helps other to better understand these tribulations, and learn from them. Moreover, sharing such information may guide new researchers and help them identify strategies that can address those issues and challenges in their future health promotion studies.

### Introduction

Many methods papers have been published about a wide range of primary and secondary data collection methods, including qualitative, quantitative, and mixed-methods approaches. Qualitative research can involve data collection in the field; hence Polit and Tatano Beck (2010, p. 55) define fieldwork as the "activities undertaken by qualitative researchers to collect data out in the field (i.e., in natural settings)." It is worth noting that a natural setting for fieldwork can be in a rural community in Dang, but also in a factory in Pokhara or a school in Lumbini. Fieldwork can be outside 'in the field', but also inside in the home or in an institution, such as a hospital, an office, or an education establishment. Few health promotion researchers have written up their fieldwork experiences for publication, unlike anthropologists or sociologists who do write more about the process of doing fieldwork. A recent example of an account of sociological fieldwork in Nepal is by Basnet (2022), who studied political activists and leaders

in the aftermath of Nepal's People's Movement II against King Gyanendra's direct rule in the period 2005–2006. He writes about interviewees making assumptions about his own political views, interestingly "Monarchists and the Maoists asked about my political position more often than the pro-movement leaders and activists" (Basnet 2022: p. 142). Often fieldwork accounts are published in books, but not always (see: Barley, 1986; Bloor et al., 2010; Sharma, 2018).

Researchers in health promotion write about their research methods and analyses, but usually not about the process of doing fieldwork. In this paper, our aim is to share our fieldwork experiences, between us we have over 50 years of fieldwork experience in Nepal and elsewhere. The reason is partly to help early career health promotion researchers in their fieldwork planning and data collection, and partly to encourage others to publish more detailed insights into their fieldwork experiences so that other researchers can learn.

Recording fieldwork observations and experiences is an important part of fieldwork in social science disciplines, but this is perhaps seen as less important in health disciplines. Learning to take useful fieldnotes is essential to qualitative research: "without these, it will be impossible to make your case about what you found" (Green & Thorogood, 2018, p. 193). Being inquisitive and open-minded will expose health promotion researchers doing fieldwork to many different events, phenomena, views, people, experiences, and ideas. One of the obvious side-effects of fieldwork, as Barley (1986) highlighted, is that you don't quite know where it leads. Of course, this unpredictability can make hard to plan your fieldwork or get funding. There is the additional risk that an inexperienced researcher starts focusing during the fieldwork on an interesting but fairly unimportant finding. There is a certain kind of questioning skill set that health promotion researchers require to work in this kind of challenging environment and to stay focused. One of our unexpected, and hence unintended, consequences of conducting fieldwork in Nepal was a paper we wrote on the specific variant of English, spoken by English-speaking Nepali, which we called 'Nepenglish' (Sharma et al., 2015).

There are exceptions, as some health researchers have written about their fieldwork experience in Nepal, for example, Devkota and van Teijlingen (2020). In this paper, the first author (BD) gives a personal account of his PhD fieldwork experience with Maoist health workers in Nepal, highlighting several dilemmas the first author was confronted with whilst in the field (Devkota and van Teijlingen, 2020). Whilst a report on public health research fieldwork in South Africa showed the gap between desk-based planning and the vast difference that occurred during the actual fieldwork (Casale et al., 2011). Another example of reporting on the experience of working in the field is the paper called 'Doing focus groups in the health field: Some lessons from Nepal' published by van Teijlingen et al., (2013). Most of the case studies based on the authors' fieldwork experiences in this paper are based in Nepal, but not all.

### **Fieldwork Case Studies and Lessons Learnt**

Our case studies based on fieldwork in Nepal are presented under eight issues or themes, which are presented below: (1) Fieldwork not going entirely to plan; (2) Reliance on gatekeepers; (3) Long waiting time (4) Translation challenges; (5) Local travel; (6) Privacy and confidentiality; (7) Finding potential study participants; and (8) Rapport building and power relationship.

### **Fieldwork not Going Entirely to Plan**

One of the authors (EvT) once interviewed the wrong child for a qualitative study in Scotland. This mishap is, of course, not recorded in any of the publications, the recorded interview was simply discarded. EvT was evaluating an intervention programme aimed at teenagers. His task was to interview young people who had recently attended the programme. The ethical approval for the study stipulated that one of the parents needed to consent to their child taking part before the child could be asked if they wanted to participate. The researcher phoned the parent and arranged to visit the family home to interview Prakash (not the child's real name) at home. At the agreed time, the parent welcomed the researcher and signed permission to allow Prakash to be interviewed and brought in the child. The parent went to the kitchen to let the child be interviewed. The researcher asked the child if he was happy to be interviewed, and he agreed. After a few questions, it became clear the child knew nothing about the intervention. However, he said his brother Prakash was part of it. It turned out that Prakash was not at home and that the parent did not want to waste the researcher's time as he had travelled all the way to his home, so he put their other son Aaron forward. Needless to say, the interview data went in the bin! The lesson here is to double-check that you are speaking to the person you think you should be speaking to. It is also important that we let the participants know that we are flexible on re-arranging the interviews if required and that is normal to do so. The importance of both the study and interviewing the right child could have been made clearer to the parents.

Similarly, it is worth remembering that not all research participants have the same level of understanding or even mental capacity. BS is involved in a qualitative study on dementia care in Nepal. Often the person living with dementia is recruited with the help of gatekeepers or family members as they know that person well. BS found that in Nepal, gatekeepers (family members, carers or health workers) sometimes assume people living with dementia have the mental capacity to participate in the fieldwork. The gatekeepers are happy to provide access to the researcher to start the fieldwork. We were recently invited in our fieldwork to interview a person living with early onset of dementia through a gatekeeper who assured us that the relevant person had the capacity to understand the purpose of the research and could therefore participate. The researcher explained the purpose of the research. The participant said she was happy to participate and understood the purpose of the research. However, a few minutes later, the researcher found that participant kept repeating the same answer to very different questions. The researcher understood she may not have the capacity to participate in the fieldwork, stopped the interview, and discarded the audio recording. One lesson is to be prepared to simplify the questions if you notice that participant is not understating the original questions. The second lesson here is to learn to think on the spot, and adjust the way of asking questions and adapt to the different and difficult situations occurring in the field. Moreover, be prepared to spend more time to reach out to key stakeholders and seek additional participants to achieve your study aim.

Moreover, we need to address ethical considerations to assess whether a person has the capacity to participate or not, or even when this capacity occurs. It could be challenging to understand the capacity is difficult where some conditions are recognised at a later stage, and gatekeepers do not see this problem from the researchers' perspectives. Dementia is not a disease it is an umbrella term to describe decline in cognitive function such as thinking,

remembering, and reasoning. Therefore understanding this concept is very important to see how it affects people differently and how societal factors can play a big role in data collection (WHO, 2022). The concept of dementia and its care is still new in Nepal, and participants living with dementia may struggle to understand the context enough to be able to explain whether or not there is a lack of appropriate care and services. Using lay language, for example talking about memory loss, to explain the study and when answering questions could help people in the community to understand dementia better.

### **Reliance on Gatekeepers**

One of us (PM) organised a focus group discussion (FGD) for her PhD study with mothers in a rural village in southern Nepal (Mahato et al., 2018). Many babies and small children attended the FGD as it was difficult to organise childcare while mothers participated. Consequently, the group was noisy, and the audio recording of the discussion was difficult to hear and transcribe. The researcher had depended on a local female health community volunteer (FCHV) to invite participants for the FGD (Crowhurst & Kennedy-Macfoy, 2013; Dempsey et al., 2016). The discussion was also relatively short (22 minutes) and dominated by a few prominent participants. Although the researcher had conducted FGDs before, this was a reminder that conducting it in a rural community setting is even more challenging. The key message here is that conducting FGDs requires more thorough planning and preparation than individual interviews. This problem could have been overcome by providing childcare facilities for the participating mothers or by conducting the FGD on a weekend when the children might have stayed with their father or other relatives while the mothers participated in the study. In either case it needed thinking about such potential problems beforehand and be prepared for them before arranging for the FGD.

A similar problem occurred during fieldwork in Scotland. EvT needed a gatekeeper in the health department to book a room to run a FGD with busy community health workers. When EvT arrived ten minutes before the interview, he found out that the FGD was being held after work hours in the open-plan office of the health workers. The researcher asked if there was another room available, but there was not. This turned out to be a major disturbance. A few minutes after the FGD started, the telephones started ringing with after-hours enquiries. Not only that, but you could also hear the caller recording their message. All this we recorded during the focus group making some of the health workers' conversations very hard to transcribe and analyse. The lesson here is that the place of data collection in fieldwork for an interview or FGD is vital. As a researcher, it is important to identify the potential situations like this and plan well ahead for the field work.

### **Long Waiting Time**

While collecting data during her PhD research (PT), it was difficult for the research participants in government offices to commit to an agreed time for the research, even though they had prior arrangements. So, the researcher needs to keep in mind that time management can be challenging if you plan to do two or more interviews in a very short interval of time on the same day. The lesson learnt was that it is important to have some space between the interviews or any form of data collection so that the other research participants' time is respected. Also, it gives the researcher time to make field notes which are very valuable during writing up.

## Translation Challenges

Lack of understanding of the local language while planning data collection was the experience of one of the co-authors (BD). When he conducted FGDs in a Maithili-speaking Terai community without a proper understanding of the local language, he had to postpone the FGD halfway through. After providing training to a Maithili-speaking facilitator recruited from the local community, he conducted the FGDs from the next day.

Most fieldwork data in Asia are collected in the national language (Smith et al., 2008). Not all the research participants can speak English or even Nepali. Hence, most of the time, the researcher must collect data in either national or local languages depending on the study participants preference. According to the Central Bureau of Statistics (2011), there are 123 languages spoken in the country as the first language. Most people in rural areas do not speak or understand the Nepali language, the national language. Even though we hire local enumerators/interpreters to support us during fieldwork, it is very difficult to translate back the local dialects into English, which might have a risk of losing the actual meaning (Pitchforth & van Teijlingen, 2005). It is costly and time-consuming to translate back and forth from the local/national language to English and vice versa. One of the lessons of this is to plan to hire someone with knowledge of local language so that the original meaning are not lost during the translation. However, be aware that hiring good translators can be costly and not all researchers have funds to do so.

## Local Travel

Suppose the data collection site is in rural areas where there are limited or no access to communication or transportation. In that case, it is better to research the study site with multiple sources as sometimes one hour travel for local people might be a good three hours for an outsider. The local people know the area well, and they are aware of the shortcuts too. However, we as an outsider will be in the unfamiliar setting with little or no knowledge about the place. It is always worthwhile to research with multiple sources prior to the actual fieldwork.

BD had an experience of insecurity of the research participant and himself from the government security forces while interviewing the former Maoists who were outlawed as "terrorists". Thus, protecting the participants from any such risk was a challenge under challenging circumstances. Here the political environment can affect the quality of the data collected (Devkota & van Teijlingen, 2020). In situations such as this where certain problems are hard to avoid, the best lesson we can give is to make extensive field notes which can be used to help analyse and the qualitative data and defend the limitations of the research in future publications.

## Privacy and Confidentiality

Conducting interviews in an open space can bring difficulties, especially if it is impossible to keep non-participants out of the research. On several occasions, we found that collecting data in rural Nepal through focus groups was complex (van Teijlingen et al., 2013). SPW had an experience with the cancellation of the FGD event due to too many outsiders from the local community wanting to participate, and there was no way of keeping them at bay. The people who were desperate to take part believed that only those who took part in the session would benefit from the research. The researchers conducting the fieldwork tried to convince the

community this was not true, but that was not possible. Consequently, the final session was cancelled and rescheduled in another community. The lesson here is not to be shy and take decisive actions, if required, to cancel or postpone aspects of fieldwork to maintain standards.

### **Finding Potential Study Participants**

There was also the issue of identifying participants in study sites, as strict inclusion criteria can impede the fieldwork as planned. SPW had an experience in identifying the study participants in one of the qualitative research on sexual and reproductive health issues among adolescent girls due to the closed inclusion criteria. We have learnt to be flexible and work with local partners as well as being flexible with inclusion criteria, which should be pragmatic with enough research of the local context rather than rigidly adopting them from global scenarios. The lesson here is to choose your local partners wisely. Good local partners can review your inclusion/exclusion criteria, as well as approach potential participants for you or simply do the advertising your forthcoming research.

### **Rapport Building and Power Relationship**

It is important to consider how the researcher approaches study participants before, during and after the fieldwork. Suppose the researcher knows the position and characteristics of participants, the power and positions they hold and how formal or informal they would like to be. In that case, it can help to ease the fieldwork. But if we fail to establish a balance in status, the interview may end up either with poor or no useful information.

In one research on maternal health, BD was a team member for fieldwork led by an ex-pat who had interviewed many top government bureaucrats in Nepal. This ex-pat leading the research was very confident in interviewing them. In one district, he went to interview a doctor while BD interviewed another health worker in the same location. They started their respective interview around the same time. But BD received a phone call after 5 minutes from the ex-pat informing him that the doctor was a bad officer. He did not respond well and that the interview was a disaster.

Since he was a key informant for the fieldwork, he had to be interviewed. The following day, BD went to the doctor's office, had an informal discussion showing him respect. As a result, he was happy to be interviewed in the evening, not in his office but at his residence. All of us have experience researching high-level officials in Nepal who may consider in their reply to questions: (1) who is the interviewer?; and (2) whether the researcher treats them with the respect that goes with their position in society. One of the authors (PS) also experienced that the rural participants in Nepal responded differently to the same research question depending on whether the researcher was a local or an international researcher.

### **Final Thoughts**

We don't want to give the impression that many things go wrong during fieldwork or that data collected through fieldwork is somehow less reliable. However, we want to remind all health promotion researchers that what is written in the method section of qualitative papers on the fieldwork is a summarised and often sanitised version. Fieldwork is unpredictable. Therefore, sharing practical lessons from the field is important to better understanding those tribulations in different settings and methods as well as helps to identify the potential strategies

to address them. It is worth remembering that the researcher doing the fieldwork should always be their own first critic, since they are closest to the data collection process and analysis (Preissle & Grant, 2004). Adapting to the fieldwork situation is important but requires careful consideration when capturing data ethically and sharing the experience and learning could be valuable for other researcher working in a similar area. Last, but not least, researchers should consider whether they have the required skill set as well as the attitude and personality to conduct fieldwork in perhaps a challenging environment. Learning from other researchers' experiences and mistake may prevent you from making such mistakes in your own fieldwork.

### Acknowledgements

We like to thank the anonymous reviewers for the *Journal of Health Promotion* for the insightful comments and suggestions to help improve our paper.

### References

- Barley, N. (1986). *The innocent anthropologist: notes from a Mud Hut*, Harmondsworth, UK: Waveland Press, Inc.
- Basnet, C. (2022). Reflexivity and field research experience during Nepal's political transition. *Studies in Nepali History & Society* 27(1), 131–150.
- Bloor, M, Fincham, B, & Sampson, H. (2010). Unprepared for the worst: risks of harm for qualitative researchers. *Methodological Innovations Online* 5(1), 45–55. doi: 10.4256/mio.2010.0009
- Casale, MA., Flicker, S., & Nixon, SA. (2011). Fieldwork challenges: lessons learned from a North–south public health research partnership. *Health Promotion Practice*, 12(5), 734–743. doi: 10.1177/1524839910369201
- Central Bureau of Statistics. (2011). *National population and housing census 2011*. Kathmandu, Nepal: Central Bureau of Statistics.
- Crowhurst, I., & Kennedy-Macfoy, M. (2013). Troubling gatekeepers: methodological considerations for social research. *International Journal of Social Research Methodology*, 16, 457–62. doi:10.1080/13645579.2013.823281
- Dempsey, L., Dowling, M., Larkin, P., & Murphy, K. (2016). Sensitive interviewing in qualitative research. *Research in Nursing & Health*, 39(6), 480–490. do: 10.1002/nur.21743
- Devkota, B., & van Teijlingen, E. (2019). Surviving research between two guns: lessons learnt from Nepal. *Journal of Health Promotion*, 7, 77–82. doi:10.3126/jhp.v7i0.25517
- Green, J., & Thorogood, N. (2018). *Qualitative methods for health research (4th edn.)*. SAGE.
- Mahato, P.K., van Teijlingen, E., Simkhada, P., Angell, C., Ireland, J., for the THET team. (2018). Qualitative evaluation of mental health training of auxiliary nurse midwives in rural Nepal. *Nurse Education Today*, 66, 44–50. doi:10.1016/j.nedt.2018.03.025
- Pitchforth, E., & van Teijlingen E. (2005). International public health research involving interpreters: a case study approach from Bangladesh. *BMC Public Health*, 5, 71. doi:10.1186/1471-2458-5-71
- Polit, D.F., & Tatano, B. C. (2010). *Essentials of nursing research: appraising evidence for nursing practice (7th edn)*. Wolters Kluwer/Lippincott Williams & Wilkins.

- Preissle, J., & Grant, L. (2004). Fieldwork traditions: Ethnography and participant observation, In *Foundations for research methods of inquiry in education and the social sciences*, deMarrais, K., & Lapan, S, (Eds.). Lawrence Erlbaum Associates, Publishers
- Sharma, J.R. (2018). *Crossing the border to India: Youth, migration and masculinities in Nepal*. Temple University Press.
- Sharma, S., Joshi, P., van Teijlingen, E.R. (2015). 'Nepenglish'or 'Nepali English': A new version of English? *Asian Journal of Social Sciences & Humanities*, 4(2): 188-193. [http://www.ajssh.leena-luna.co.jp/AJSSHPDFs/Vol.4\(2\)/AJSSH2015\(4.2-21\).pdf](http://www.ajssh.leena-luna.co.jp/AJSSHPDFs/Vol.4(2)/AJSSH2015(4.2-21).pdf)
- Smith, H.J., Chen, J., & Liu. X. (2008). Language and rigour in qualitative research: problems and principles in analysing data collected in Mandarin. *BMC Medical Research Methodology*, 8(1): 44. doi:10.1186/1471-2288-8-44
- van Teijlingen, E., Simkhada, P. & Stephen, J. (2013). Doing focus groups in the health field: Some lessons from Nepal. *Health Prospect*, 12(1): 15-17. doi:10.3126/hprospect.v12i1.8722
- WHO. (2022). *Dementia*. [Online] <https://www.who.int/news-room/fact-sheets/detail/dementia>. Accessed on Oct 2022.