

Qualitative research in the area of health: the whys and wherefores

Researchers in the area of health, in which the hegemony of clinical trials prevails, still look askance upon the idiosyncrasies of qualitative research. The uncertainty regarding what qualitative research really is, and what its contribution to this area represents, still persists. It is often said “One cannot generalize,” “It lacks substance,” “Few individuals are studied” and, even disparagingly, “This is very subjective.” These criticisms have contributed to the evolution of qualitative research and highlight the rigor behind well-conducted studies. Although statistical generalization has not been established, there has been a marked focus on internal validity that measures the specificities of the group/phenomenon/case studied. The contributions to the construction of knowledge are undeniable, since what is eventually lost in scope is gained in depth and understanding. The detailed description of phenomena and their subsequent deconstruction and reconstruction, enhance the mobilization and critical transferability of knowledge, thereby enabling analytical generalization.

The inseparability of the phenomena from their context underpin qualitative research, as it is impossible to discern opinions, perceptions and the significance of individuals by silencing the context. It is the contextualized specification that makes it possible to aspire to higher levels of understanding.

After this “eye-opener” on qualitative research, the question arises: *Why conduct qualitative research in the area of health?* The answer is that qualitative methods have much to offer to those who study the health services. Firstly, the growing credibility of mixed studies today will gradually break down the quantitative-qualitative dichotomy, either by using qualitative investigation as exploratory for the quantitative research or, conversely, by clarifying, based on questionnaires, opinions and behavior in the natural environment in which the phenomenon studied occurred.

Secondly, because qualitative studies focus on people, namely on that which makes them have recourse to the care and personal experiences that have an impact on their health status. The essence of qualitative investigation focuses on the search for significance, to the extent that the phenomena, manifestations, occurrences, facts, events, thoughts, feelings and subjects are all formative aspects of human experience. The meanings that are lasting also become culturally shared and are incorporated as a structuring element of the social group that orbits around these representations and symbolisms.

Knowing the significance of the health-illness phenomena can contribute greatly to enhance the quality of the relationship between consumers and healthcare providers; foster greater adherence to health measures individually and collectively; and acquire a more profound understanding of the emotions and behavior of patients, families and health professionals. Undoubtedly, health is *of* the people, *for* the people and *by* the people, therefore, in-depth scrutiny of “subjectivity” enables greater knowledge and consequently provides answers tailored for the people, users and health professionals.

This special issue brings together thirty-one quality articles, including nine from the 4th Ibero-American Congress on Qualitative Research. The works published here are the essence of the premises presented, by means of which the authors scrutinize the experiences and the quality of life of those who use the services and the experiences of those who deliver them. It also highlights the importance of the relationship between health professionals and clients and, last but not least, the assessment of professional and personal intervention and training programs of future health technicians and the community per se that is the recipient and subject of health services and care..

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