

Focus on Qualitative Methods

Qualitative Metasynthesis: Issues and Techniques

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Abstract: There has been an accumulation of qualitative studies in recent years, but little cumulation of the understandings gained from them. Qualitative research appears endangered both by efforts to synthesize studies and by the failure to do so. Techniques used have included reciprocal translations of key metaphors and concepts and qualitative and quantitative comparative analyses to produce narrative and theoretical integrations. The major problem yet to be resolved is developing usable and communicable systematic approaches to conducting metasynthesis projects that maintain the integrity of individual studies. © 1997 John Wiley & Sons, Inc. *Res Nurs Health* 20: 365–371, 1997

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There has been an unprecedented accumulation in recent years of qualitative studies in the health sciences and practice disciplines, but, as yet, little accumulation of the understandings gained from these studies. The relative inattention toward integrating qualitative findings stands in sharp contrast to the considerable attention given to the development of techniques for conducting syntheses of quantitative research, and the proliferation of integrative reviews and syntheses of quantitative research in a variety of substantive fields (Brown & Hellings, 1988; Chalmers, 1993; Cooper, 1982; Ganong, 1987; Glass, McGaw, & Smith, 1981; Jackson, 1980; Light & Pillemer, 1982; Lynn, 1989).

The relative lack of effort to “put together” (Noblit & Hare, 1988, p. 7) the findings from qualitative studies has important implications for both knowledge development and the utilization of qualitative research in nursing. For these findings

to have impact, they must be situated in a larger interpretive context, and they must be presented in an accessible and usable form in the real world of practice and policy making. Knowledge must be conceptually and/or instrumentally useful (Larsen, 1981) and assimilable into the “personal modes of knowing, valuing” (Noblit, 1984, p. 95) and/or doing of a variety of potential users, including theorists, researchers, practitioners, policy makers, and patients. Yet, the goal of creating synthesized knowledge for utilitarian purposes is an older modern ideal that contradicts more recent post-modern challenges to the commodification of knowledge and the truth value of any grand knowledge syntheses (Holmes, 1995).

In this article, we consider the appropriateness and feasibility of attempting qualitative metasyntheses, briefly review several efforts to create such syntheses, and discuss methodological issues in conducting such projects. We define qualitative

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metasynthesis as the theories, grand narratives, generalizations, or interpretive translations produced from the integration or comparison of findings from qualitative studies. We do not consider here qualitative (or narrative) syntheses or reviews of quantitative studies, or the findings created from secondary analyses of data pooled from separate qualitative studies (e.g., West & Oldfather, 1995).

CAN YOU SUM UP A POEM?

By its very nature and purposes, qualitative research appears resistant to, and endangered by, efforts to synthesize studies. Just as it goes against the nature of poetry to attempt to summarize even one poem about love, so it seems both epistemologically and ethically inappropriate to attempt to summarize findings from one or more qualitative studies about human experiences of health and illness. By virtue of their emphasis on idiographic knowledge, or the complexities and contradictions of particulars, qualitative studies resist "summing up" (Light & Pillemer, 1984).

Turning idiographic knowledge into data for synthesis seems to represent an unconscionable loss of the uniqueness of individual projects and a departure from the larger pedagogic and emancipatory aims of qualitative research. Indeed, it is precisely this knowledge that offsets the recurring failure of generalizations from quantitative studies to fit individual cases. To summarize qualitative findings is to destroy the integrity of the individual projects on which such summaries are based, to thin out the desired thickness of particulars, to undermine the "function and provenance" (Davis, 1991, p. 12) of cases, and, ultimately, to lose the vitality, viscerality, and vicariism of the human experiences represented in the original studies.

Moreover, the sheer diversity of practices within the domain of qualitative inquiry seems to work against efforts to synthesize the findings of qualitative studies. Qualitative researchers include inquirers with vastly different disciplinary, philosophical, theoretical, social, political, and ethical commitments, and they often have very different views of how to execute ostensibly the same kind of qualitative research. There are postpositivists and constructivists, feminists and Marxists, and nurses, educators, and anthropologists conducting grounded theory, phenomenologic, ethnographic, and narrative studies. Given the wide variety of presentation styles for disseminating qualitative research, and the deliberate blurring of what are

perceived as the artificial lines drawn in research reports among method, results, and discussion, even finding the findings can be a challenge.

Furthermore, these diverse inquirers have correspondingly diverse opinions concerning what a "good" qualitative study is. Although the issue of whether to include all or only good studies in integrations of quantitative research has yet to be resolved, there appears to be greater consensus concerning what a good correlational or experimental study is. There can be little consensus, however, concerning the good in qualitative research, as there are no "in principle" arguments that can adequately address goodness in the varieties of practices designated as qualitative research (Engel & Kuzel, 1992, p. 506). Indeed, even using the term *qualitative research* serves to trivialize significant differences among research practices designated as qualitative (Atkinson, 1995).

In addition, criteria of goodness (for any human endeavor) are historically and culturally context-dependent. Different communities of knowledge makers and users have sanctioned different criteria of goodness, and these criteria have changed over time. For example, nursing standards for conducting qualitative research have tended to emphasize methodological rigor and conformity. In contrast, there are other standards that emphasize such factors as the real-world significance of the questions asked and the answers found, the practical value of the findings, and the extent of involvement with, and personal benefit to, the participants of the research (Lincoln & Reason, 1996). Indeed, in the most recent explorations of quality criteria for qualitative research, scholars have described them as "emerging" (Lincoln, 1995), and the quest for validity as an obsession interfering with quality (Kvale, 1995). They have even suggested moving beyond "criteriology" (Schwandt, 1996).

In summary, the very emphasis in qualitative research on " $N = 1$ experiences" (Eisner, 1991, p. 197) seems to preclude adding up these experiences. Like a poem, a novel, or a painting, even one qualitative study cannot be summarized.

"ANALYTIC INTERRUPTUS"

Yet, qualitative research also appears endangered by the failure to sum it up. A recurring concern is that qualitative researchers are engaged in a cottage industry: working in isolation from each other, producing "one-shot research" (Estabrooks, Field, & Morse, 1994, p. 510) and, therefore, eternally reinventing the wheel. Qualitative re-

searchers in nursing too often fail to situate their work in larger programs of research or fields of scholarship. The “open-mindedness” of qualitative research is often confused with the “empty-mindedness” of researchers (Coffey & Atkinson, 1996, p. 157) unprepared to conduct their studies. Glaser and Strauss (1971, p. 181) warned that the continued failure to link local grounded theories into formal theories (a type of qualitative metasynthesis) would relegate the findings of individual studies to “little islands of knowledge,” separated from each other and doomed ultimately never to be visited. Statham, Mauksch, and Miller (1988, p. 6) used Lofland’s concept of “analytic interruptus” to refer to the failure of qualitative researchers to go far enough in their work: that is, to reveal the “subtle, sometimes opaque connections” among findings and, specifically, among “apparently disparate findings” (Statham, Miller, & Mauksch, 1988a, p. 11).

Efforts to synthesize existing qualitative research studies are seen as essential to reaching higher analytic goals and also to enhancing the generalizability of qualitative research. Qualitative research is still falsely characterized as ungeneralizable, when *generalization* is narrowly conceived in terms of sampling and statistical significance. Yet, qualitative research is directed toward naturalistic or idiographic generalizations, or the kind of generalizations made about particulars (Stake & Trumbull, 1982). As Donmoyer (1990, p. 176) observed, it is undefensible, dysfunctional, and out of touch with contemporary views of science not to recognize and value these kinds of generalizations. Schofield (1990) conceived of qualitative metasyntheses as cross-case generalizations created from the generalizations made from, and about, individual cases.

KINDS OF QUALITATIVE METASYNTHESSES

At least three kinds of syntheses of findings from qualitative studies have been attempted. One kind of effort involves the integration of findings from multiple analytic paths taken within a program of research by the same investigator(s). An example is Sandelowski’s (1993, 1995) narrative and theoretical syntheses describing the transition to parenthood of infertile couples. These syntheses were produced from the *results* of completed individual lines of analysis concerning such experiences as couples’ responses to technological intervention in conception and childbirth, their strategies for

decision making, and their management of ambiguity.

A second kind of effort involves the synthesis of findings across studies conducted by different investigators. Examples of this approach are the Jensen and Allen (1994) synthesis of qualitative research findings on wellness–illness, the Field and Marck (1994) synthesis of studies on uncertain motherhood, the Noblit and Hare (1988) meta-ethnography of several educational studies, and the Statham, Miller, and Mauksch (1988b) synthesis of studies on women’s work. In these projects, investigators produced narrative or theoretical combinations of studies in the same topical area, using such techniques as reciprocal translation of key metaphors and concepts and qualitative comparative analysis.

A third strategy involves the use of quantitative methods to aggregate qualitative findings from cases across different studies. (These techniques are used also to create findings from individual cases in the same study.¹) In one quantitative approach, the case survey method (Lucas, 1974; Yin & Heald, 1975), researchers use a conceptual framework to construct a set of highly structured questions to collect information from individual case studies in specified topical domains. Answers to these questions are then transformed into data amenable to statistical analysis.

In a second quantitative approach, the qualitative comparative method (Ragin, 1987), Boolean algebra is the basis for creating categorical information on key variables across individual cases. A holistic view of individual cases—as distinctive configurations of associations, causes, and outcomes—is maintained. Drawing on Ragin’s distinction between case- and variable-oriented analyses of cases, Miles and Huberman (1994, pp. 173–174) provided an especially useful illustration of how case-oriented analyses are directed first toward ascertaining the distinctive *confluence* of variables, or the configuration and flow of events, *within each case*, and, then, toward com-

¹In social science literature, the word *case* appears as a reference to the sampling units within individual studies and/or to the individual studies themselves. That is, a study with a sample of 20 women may be conceived as a study of 20 cases and/or as one case. The results of such a study may be conceived as one local interpretation, which, together with local interpretations from other studies in a topical area, comprise the data for a metasynthesis project, and/or as a metasynthesis of the findings from 20 cases. The view of cases as equal to sampling units extends the meaning of metasynthesis to include virtually any effort to bring qualitative data together. In contrast, the view of cases as equal to studies restricts the meaning of metasynthesis to techniques for larger syntheses across studies. We emphasize the second meaning in this article.

paring these configurations across cases. In contrast, in variable-oriented analyses, the unique configurations of individual cases are lost as the analyst's work is directed toward ascertaining the mutual *influence* of a prespecified set of variables *disaggregated from cases*.

ISSUES IN CONDUCTING QUALITATIVE METASYNTHESIS

These efforts are valuable, not only for the findings produced, but also for illuminating key methodological problems that have yet to be resolved. These problems are, in many respects, comparable to recurring issues in synthesizing quantitative research (e.g., Jackson, 1980; Lynn, 1989).

Determining Topical Similarity

An initial problem in conducting qualitative metasyntheses is deciding which studies are really about the same substantive phenomenon, event, or experience. For example, there are many qualitative studies across several disciplines addressing the illness experience. But, each of them variously emphasizes one or more of the same and different facets of that experience in language and style that may obscure their commonalities and differences. The idiosyncratic use of language and method in qualitative research reports alone mandates that researchers undertaking qualitative metasynthesis projects (hereafter called *synthesists*) be "culturally multilingual" (Noblit & Hare, 1988, p. 7) and expert translators.

Synthesists must develop a means for determining the true topical similarity of studies they located by using the various techniques available for information retrieval (Cooper, 1982). This entails the comparison of studies on broad, surface parameters, including stated research purposes, research questions asked, and the kinds of findings produced. Often, research purposes and questions are so broadly stated, it is only by looking at the kinds of findings produced that topical similarity can be determined. In the case of studies all ostensibly aimed at exploring the illness experience, findings may variously emphasize a certain time period in the illness trajectory, the circumstances surrounding diagnosis, the management of symptoms, the ambiguity of illness, and/or the negotiation of social interactions. Each of these categories of findings may be the object of separate metasynthesis projects.

Setting Inclusion Criteria

The next problem in conducting qualitative metasyntheses is deciding which of the topically similar studies to include in one project. In topical domains with over 10 studies, the intensive case-oriented thrust of qualitative analysis precludes using them all in one project. There is, typically, a wealth of information contained in a qualitative research report and synthesists are obliged initially to attend to, and account for, all of it. As in any kind of qualitative research, overly large sample sizes tend to impede deep analysis and, therefore, threaten the interpretive validity of findings.

Accordingly, synthesists locating more than 10 topically similar studies will have to use a clearly defined purposeful sampling strategy in order to set tighter boundaries for the synthesis. Synthesists interested in integrating findings from studies about the illness experience may locate sufficient findings concerning responses to initial diagnosis, symptom management, and management of ambiguity to warrant each of these topical areas as foci of separate metasynthesis projects. The findings from these separate projects may then be combined to create a grand picture of the illness experience.

In general, studies should not be excluded for reasons of quality, because, as we noted previously, there are wide variations in conceptions of the good, and in quality criteria. At the very least, synthesists are obliged to explain the conceptions of good that informed any exclusions. Yet, synthesists should not be misled to discount important findings for what amount to only surface mistakes. For example, there are many instances in which investigators have produced findings worthy of note, but have used the "wrong" language and method citations to describe their work. A study presented as a phenomenology, which is arguably a qualitative descriptive study, may still be a generally good study. Using Burns's (1989) standards for the critique of qualitative research, such a study may still have "descriptive vividness" (p. 48), "analytic preciseness" (p. 49), and "heuristic relevance" (p. 51). Indeed, even a study misrepresented as a phenomenology or ethnography can still have "methodological congruence" (p. 48).

Although quality should not be a criterion used to exclude studies, it should be included in the comparative analysis of the design features of each study. The problem for synthesists here is to use quality criteria so general that they can be ap-

plied to any qualitative study, arguably an impossible task given the range of qualitative research practices. Or, synthesists might use different sets of criteria for different kinds of studies, an option that depends on choosing the right set. In the example we just gave of the phenomenology that is arguably a qualitative descriptive study, the set of criteria used should fit qualitative descriptive studies. A qualitative content analysis wrongly presented as a narrative analysis should be evaluated as a content analysis. Synthesists have to be true “connoisseurs” (Eisner, 1991, p. 63) of qualitative research to distinguish between surface errors and mistakes fatal enough to discount findings.

Determining Methodological Comparability

After determining which topically similar studies will be included in a synthesis project, synthesists are obliged to determine their methodological comparability, or the similarities and differences among them. Again, given the varieties of ways in which grounded theories, phenomenologies, and ethnographies are created, and the varieties of practices to which these and other technical words are attached, synthesists should not rely solely on the surface uses of method language and citations to compare studies. Good or bad, one investigator’s phenomenology may be more like another researcher’s grounded theory than two researchers’ grounded theories. Right or wrong, one investigator’s rendering of symbolic interactionism may be more like another investigator’s rendering of critical theory.

Studies have traditionally been compared on such features as their conceptual underpinnings, including the kind of literature reviewed, and their design features, including techniques used for sampling, data collection, and analysis (e.g., Burns, 1989). This system of comparison is also very useful in determining the overall structure and orienting gestalt of studies included in a qualitative metasynthesis project. As qualitative studies bear the personal signatures of researchers (to a much greater degree than quantitative research), synthesists have the additional obligation to account for such signature features. Accordingly, the coding system used to appraise the methodological comparability of studies must include such researcher related features as disciplinary background, and personal experiences and commitments, as they are revealed in individual studies.

This phase of analysis helps synthesists understand each study on its own terms before attempting any cross-case comparisons or integrations. As in most kinds of qualitative analysis, any a priori coding systems used are developed to the point where they adequately capture the salient features of every study included. That is, coding systems must help the synthesist understand the particular structure and configuration of elements characterizing each study, or what makes that study uniquely what it is.

Explicating Methods and Techniques for Synthesis

The most complex problem synthesists face is developing and communicating the techniques used to compare the findings of each study. Indeed, putting findings together is the *raison d’être* of qualitative metasynthesis and of the preliminary analyses we just described. The major methods that have been used, including reciprocal translation of metaphors and concepts and qualitative and quantitative comparative analyses, remain either relatively untried and undeveloped, and/or difficult to codify or understand. Researchers conducting qualitative syntheses are conducting a highly sophisticated kind of qualitative analysis and interpretation and, like all such work, its “magic” (May, 1994) may resist attempts at disenchantment.

No matter what method is used, the aim of qualitative metasynthesis is to account for all important similarities and differences in language, concepts, images, and other ideas around a target experience. In contrast to quantitative metaanalysis, qualitative metasynthesis is not about averaging or reducing findings to a “common metric” (Wolf, 1986, p. 33), but rather enlarging the interpretive possibilities of findings and constructing larger narratives or general theories. Miles and Huberman (1994) have described a variety of analysis techniques, including visual data displays, which permit synthesists to recognize similarities and differences that shaped findings among studies, and the convergence or divergence of the findings themselves. A useful technique to capture similarity and difference is the Venn diagram, in which circles and the spaces within circles are used to represent overlapping and unique ideas (Cieutat, Krimerman, & Elder, 1969).

As they are engaged in the interpretation of culturally diverse texts in different languages (or texts created in different disciplinary and philosophical contexts), synthesists will also have to develop

skills in analyzing studies for such features as controlling images and metaphors, key rhetorical devices, and plot lines (Martin, 1990; Riessman, 1993). For example, the key to understanding several studies of the illness experience in relation to each other may lie in recognizing how they all reprise familiar cultural stories, such as the hero on a quest or the warrior battling an enemy. In addition, synthesists must be skilled in semantic (literal) and idiomatic (meaning) translation (Noblit & Hare, 1988, p. 31) of key ideas in studies.

CONCLUSION

Qualitative metasynthesis is one response to concerns about the relevance and utility of qualitative research, and much work remains to be done to develop strategies for creating them. Qualitative metasynthesis is not a trivial pursuit, but rather a complex exercise in interpretation: carefully peeling away the surface layers of studies to find their hearts and souls in a way that does the least damage to them. Synthesists must analyze studies in sufficient detail to preserve the integrity of each study and yet not become so immersed in detail that no usable synthesis is produced.

The rightness of efforts to sum up qualitative studies is debatable, as this kind of work seems to contradict the postmodern rejection of "totalizing thought" and "metanarratives" of any kind (Holmes, 1995, p. 358). Arguably, though, the time has come to make the most of the qualitative findings we have, which will likely entail some interpretive resolution "beyond postmodernism" (e.g., Owens, 1995) designed to reconcile apparently irreconcilable projects. The time also has come to recognize that calls for yet more research—to gain better understandings of events or to resolve patient and practice problems—do not necessarily entail the collection of yet more new data from already overburdened people. Indeed, synthesis projects should be recognized as an important avenue toward the development of nursing knowledge and as exemplars of clinical scholarship (Diers, 1995) that deserve the same rewards and tangible supports available for so-called primary research efforts.

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