**Possible Research Questions:**

**Is the sonrise programme more effective than the national curriculum in progressing an autistic child’s communication ability?  (positivist, deductive, experimental methodology using an experimental randomized control trial - RCT, intervention and physiological response data of the individual within the various arms of the study.**

**OR**

**What are the influences surrounding an austistic child’s experience of using the sonrise programme to develop a child’s ability to communicate effectively? (constructivist, inductive study, naturalistic enquiry – one seeking to understand through social world in question through observation, description and interpretation involving the individual within their societal and cultural context   using purposive sampling – only seeking to explore people involved in this – nobody else. Observations and interviews would take place to understand their experiences).**

The ontology of the research is to look at the form and nature of the reality of using the Sonrise Programme and assessing its effectiveness through the eyes of an education practitioner, child, parent and health practitioner.  (Appleton 2002, Braun 2021, Carter 2007, Larkin 2006, Williams 2001 plus SONRISE manual).  The epistemology between the researcher and knowledge is that the programme was discovered by a parent / practitioner consultation during an evaluation process.

The research wishes to discover how effective the Sonrise Programme is.

I think the truth is, that it is likely that the Sonrise programme will have a beneficial impact on the progress of an autistic child’s learning because it was discovered and developed by parents of autistic children who will have a far deeper understanding of an autistic child’s learning than a “professional” since the child has grown within them and their social context.  It could be considered that the truth has a political edge since developing the programme is expensive to do properly because it relies on a high staff to child ratio.  This may become more cost effective by using the hands of the parents to observe this process.  If the programme is successful, although initially expensive to run, it is possible that the strategy may save money in the long-term in terms of health, social care provision and welfare.  This may give rise to multiple truths and could be a source of bias within the study in terms of potential funding.  It is currently funded by good-will and parent power.  To make this self- sustainable, a holiday let could be used to provide summer time holidays for tourists and winter time education for children.  The tourist part of the project would fund the education part of the project, for example: [Freesia Guest HouseFreesia | The Parade | St Marys | Isles of Scilly | Guest House | immaculate | turn key | decked terrace | (sibleysonscilly.co.uk)](https://www.sibleysonscilly.co.uk/Properties/SalesDetail?UnitTypeID=146).  This could create education funding across Stafford West Midlands and the Isles of Scily.

The ontological position of the researcher is that the researcher, a former SEN teacher, was able to understand the perspectives of SEN parents and children in a deeper way following the birth of a disabled child and that perspective influences the study.   That understanding fits in well within an overall methodology of Action Research – where researchers work with participants to create new knowledge and to try and change existing practises in an action learning approach with a circular repetitive design to work with participants, evaluating evidence-based practise.

Ontological Position:

The literature review will attempt to look at this through the contrasting stance of realism / objectivism which would consider that the knowledge would exist within a meaningful entity independently of consciousness and experience, concerned with ‘objective truth’ gained through empirical research.  (Appleton 2002, Braun 2006 & 2021, Carter 2007, Larkin 2006 and Pillow 1985).

Since knowledge is constructed within the power that exists within our society, this study is important because there is a current social context whereby truth is influenced by political power and austerity.  Social injustice and marginalism occurs within that framework Koltai, McKee, Stuckler (2021).

This makes the study important.

The ontological position of the study will be contrasted by a differing ontological perspectives.  (Appleton 2002, Braun 2021, Carter 2007 and Larkin 2006).  The literature review will try to compare and contrast ontological perspectives because this should evidence how important it is for health, education, social care and families to work together to benefit each child.  (Currently, there is a tendency to work separately).  To do this effectively, secure relationships of trust need to be developed between the team supporting the child - the professionals and the child’s social context – it’s family.   This would mean that the knowledge is constructed through an individual’s experience and the knowledge constructed via that, more powerful, dimension.

Finlay (2021) Discusses “a tree is a tree” a realist perspective, stating, “we construct the notion of a tree because we are conscious, which is a subjective perspective.”  In terms of autism, the sliding scale of autism and how that may or may not present or express itself (especially since in complex individuals and genetic mutations, a mixture of differing diagnosis may present itself within an individual, this perspective may be dismissed because it may be that we cannot see an individual’s true genetic make-up.

However, a subjective view would be that the knowledge is from an individual perspective and is the view that will be taken in this study because I consider that the nature of autism is complex.  Both oncological viewpoints are different and may well contrast, which can cause disharmony.  Which is why it is important to begin the study within a setting of secure relationships and deep rooted social context.

The Epistemology of the study: the relationship between the researcher and the knowledge, is that the researcher feels distressed by the changes within SEND and disability that is taking place due to austerity and severely affected vulnerable, children in the UK.  Koltai, McKee, Stuckler (2021).  S. Williams, .  Armitage, C.J,. Tampe, T. and Dienes, K (2020).

The researcher takes the stance that it is possible, through research and funding, to create alternative pathways to support these children to help them to gain a more positive life experience and for the UK to benefit from considered thought to create new and innovative products that can be exported abroad.  The UKs NHS and Education system has been world-class and we need to use that strength effectively to support the UK economy.

The epistemological position of positivism relates to objectivism presuming there is one truth.  Positivists try to identify causes which influences outcome, use a deductive approach and assumes the research is objective.  This position is ruled out as unhelpful within this study since each individual is unique and full of variety and each person participating in the study will be looking at it from a different perspective.  A contrasting approach here is a constructive approach.  During constructivism we understand and explain human reality.  The cultural context is important and social life-world is important.  Knowledge and meaningful reality is constructed around interaction around humans and their worlds.  This takes an inductive approach.   Individual  try to constructs are understood through interaction of the participants who will be relied on heavily to provide an insight that we are looking into and developing and is the stance that would be most helpful within this study.  This requires an inductive approach.  Participants will be relied on heavily, to develop qualitative data.  The participants would include the child (if possible), the parents, teachers and other health professionals working with the child.

Hopefully this will address the issues of social injustice that is presently occurring Koltai, McKee, Stuckler (2021).

Thinking critically, I believe that the knowledge is an amalgamation of what is socially constructed and that which is influenced through power within society and I wish to focus on what works within this context within a pragmatic approach when answering the research question, combining approaches to find what works within this context.  If successful, although initially expensive in terms of adult to child ratio, it could, in the long-term, save money not by austerity but by reducing the cost of what is needed in the long-term (i.e. a person would need less in terms of DLA payments if the intervention was successful).

Am I asking the right question?

Is the Sonrise programme more effective than the National Curriculum in progressing an autistic child?  This is a positivist, deductive, experimental and intervention with physiological response data.

What is the influence of an autistic child’s experience of using the Sonrise Programme to  develop a child’s ability to communicate effectively?

This is constructivist, Inductive and Naturalistic enquiry approach with purposive observations and interviews.  It is the constructivist approach that I believe is most able to reveal the truth within the context of this study because it is open to more perspectives than simply the researcher’s own perspective.

At the beginning of the study, I believed the Sonrise Program is likely to be beneficial to an autistic child because it was discovered by a parent who was dealing with this at home and had found the programme through research.  The desperation of a parent trying to help their child is a forceful, persistent energy.

**Methodology**

**How do I know if something is true or not?  To who and to what evidence do I describe expertise and how does that determine my thinking towards research design?**

**Ethnography**using observations of using the Sonrise Programe, ironically, is actually part of the programme itself.  (William 2020, Williams 2019, Methley 2014, Mays 1995).   The programme observes the interactions between an adult and autistic child and looks closely at what goes on in that environment.  This may include looking at photographs or key documents or other evidence key to understanding the environment.  By the adult understanding how the child is already communicating (in whatever way) a bridge can be built to help a child learn how to communicate within our, more standardised way.  Why should a child learn to communicate like us if we are not first able to learn to communicate in the way that they are communicating already (which unfortunately can culminate in hair pulling or aggressive behaviour if the environment is not meeting the child’s needs – that level of communication is important to acknowledge and understand.  Ultimately, at a basic level, we are all animal-like.  (As unfortunately can currently be seen Koltai, McKee and Stuckler 2021).

**Grounded theory**

Phenemological approaches: different schools of philosophical thought exist within phenomology and different approaches. (Yardley 2000)

1.     Narrative approaches this is where people story-tell and the data is analyzed.

2.     Case study where single or numerous case studies enable in depth study encapsulates the study in question

3.     Discourse analysis where minute attention to detail in terms of how people talk to each other and interact.

4.     Action Research – where people try to work with participants to find new knowledge and change current practise.

5.     Conversation analysis paying minute attention to detail

**How will data be collected:**

Data will be collected via interviews, focus groups, ethnographic methods including observations, interviews and documentary data, visual methods, thematic analysis, interpretative phenomenological analysis, constant comparative methods or conversation analysis.

Flow charts for deductive research:

Theory to hypothesis to observation to verification

Flow chart for inductive research:

This starts with observation to pattern spotting to tentative hypothesis to theory.  This is where grounded theory comes in and applies to all qualitative research methodologies.

**Literature Search**

Black (1994) expresses why we need Qualitative Research.

A literature search was carries out using CINAHL, Embase, Medline/Pubmed and PsychINFO.  The most effective was PschINFO but the researcher was unable to access this database.  The next most effective was Pubmed.  The search was restricted to only using the keyword “sonrise” since that is the specific programe to be focused on.  Sociological databases were used: social science citation, Index, ASSIA, sociological Abs and ERIC

Houghton et al (2013). remarks that the Sonrise programme needs to be researcher further

William (2006) stated “The present study identified a profile of Son-Rise use in the UK upon which it is hoped a future evaluation study could be based. It also identified as a number of potential methodological challenges for any evaluation of this approach. In the future it will be important to seek practical solutions to these challenges which result in studies that are methodologically rigorous, are acceptable to families, and can provide a solid evidence base for the relative efficacy of the many interventions currently in use with children on the autistic spectrum.”  I believe that this means that the study is worthwhile, feasible and will make a worthwhile contribution to education.

Miller et al (2012) acknowledged the combination of parental report of reliance upon professionals’ reportedly invalid recommendations creates a precarious situation. Many children may be receiving ineffective and possibly unsafe treatments as a result of these recommendations. In fact, this paper’s observation that allied medical and educational professionals reportedly are more likely to recommend an assortment of mixed to unsupported treatments and that parents rely upon these professional recommendations presents a detrimental combination of influence. Additionally, even when parents perceive that professionals recommend scientifically supported treatments, parents often report that the same professionals might recommend treatments with little to no scientific support. These inconsistencies can result in the ‘‘buffet treatment’’ for autism (Richdale & Schreck, 2008) and a tempering of the effectiveness of scientifically supported treatments by those treatments without research support. Although these preliminary results of professionals’ recommend concluding While participants’ responses in this study may only approximate the actual behavior of all parents of children with ASDs”  concluding that:

“we revealed trends in parental treatment decision making that indicated that parents rely upon ‘‘word of mouth’’ (i.e., possibly unsubstantiated print media, professional recommendations, and other parents’ recommendations) that must be further examined. From these referral sources, parents receive a variety of recommendations resulting in the ‘‘buffet approach’’ to autism treatment (Richdale & Schreck, 2008). Further clarification of the types of sources most likely to influence parents’ treatment choices (e.g., specific professions, print media, TV, and movies) must be conducted to influence regional, national, and international dissemination of information about scientifically supported treatments for children with ASD. Without appropriate advertisement and education geared toward parents, educators, and allied medical professionals, misconceptions about empirically based treatments and inappropriate treatment choices will continue to proliferate.”  The researcher carrying out the research further believed that “professionals” were expected to know areas of education which are currently under developed.  When considering terminology used for disabled children in the 1950’s compared to that of current times, much work still needs to be done.

Williams 2006 concurred that findings indicated that “the programme is not always implemented as it is typically described in the literature. The study also highlighted methodological challenges likely to be encountered in any future evaluation of this and similar interventions for autism” which I believe suggests a qualitative methodology might be a workable solution.

Williams (2001) used the question “THE SON-RISE PROGRAM INTERVENTION FOR AUTISM: AN INVESTIGATION INTO PREREQUISITES FOR EVALUATION AND FAMILY EXPERIENCES” and also felt that more research was needed.  Her methodology appeared mostly quantitative based questionnaire.  Since then, advances are not being made with qualitative research and so, it would be interesting to discover if that might be possible.  I note that Williams (2001) commented that “Uptake of local authority funded interventions may be more common than privately funded interventions because they are more accessible in terms of cost” and SONRISE was listed as a privately funded intervention.  I would agree that the financial cost of doing the study would be substantial but note further that if this intervention or a similar intervention was successful, millions of pounds could potentially be saved by the treasury which could mitigate any potential political bias that finance my cause.  Certainly, the financial cost of implementing the programme may be a stumbling block in establishing the absolute truth of the success of the programme.

**My interpretation of the Sonrise programe** before the study took place is that from a physiological, mental, spiritual anatomical perspective, each person is unique.  This means that we are all experiencing life on earth in very different ways.  A reflection on this is that I can look at a red chair for example and can see something very different to another person who may be looking at that same chair but who can see a green chair.  By looking at different neurological pathways, that experience can be multiplied.  Within autism, those pathways can be very complex and varied.  I experienced this as a reflective practitioner when working with CAMHs with a child with high functioning autism who appeared to be able to understand what I was saying and respond appropriately (verbally) to my  words most of the time.  What was clear, that during lesson time, the child responded varyingly and the reason for that was unclear.  Following CAMHs guidance, I began to draw pictures to represent each minute instruction.  At the time this felt unnecessary and laborious but very quickly the child calmed and was able to join the group more appropriately, indicating the child was communicating via an alternative pathway.  The point I am making, is why should a child, of limited communication capacity, make the effort to learn to communicate in the way we are before we are prepared to sit down with the child and learn the ‘language’ the child already speaks by their rocking or hair pulling language?  The Sonrise’s limitations are that to re-create it as it is designed is expensive.  To block out anything interfering in the communication, plain, white rooms are used with shelving that is out of reach of the child so that the child needs to communicate to the adult if they want one of the items.  The child and adult practitioner ‘play’ in the room, the adult mirroring the child’s activity to understand what the child is already communicating.  An example of this would be, by joining a child ‘rocking’ the adult learns how relaxing that can be and it could be a self-monitoring of stress.  If an adult experiences someone trying to stop them from rocking, then they can then understand the sense of distress and anxiety that that could cause the child and what the child is communicating in those situations.  Within the room is a 2-way mirror, so that a third person can observe the interactions and interpret the communication to see if they are interpreting the communication in the same way that the adult in the room is experiencing it.  The parent observes all 3 interactions and acts as interpreter reflecting on the comments of each person who is interpreting the communication.  It is hoped, that by the adults making such an effort in understanding the way that a child is already communicating and entering into the child’s world, a bridge can be made to help the child understand the communication that exists in this world.  A drawback of the study is that it is expensive to deliver since it requires a dedicated room with a 2-way mirror and a ratio of 3:1 which may make the study unviable.  As discussed in Williams (2006) this is the main factor in the programme not being followed as described in the course guidance.  In contrast to that statement, if this was successfully put in place as an early intervention, it could save the treasury money in terms of reduction in social care need further down the child’s life.  Further comments withing William (2006) stated that careful consideration of methodologies are needed.  I suspect that a qualitative study may be more appropriate in this instance which would mean that the question : “**What are the influences surrounding an autistic child’s experience of using the Sonrise programme to  develop a child’s ability to communicate effectively? (constructivist, inductive study, naturalistic enquiry – one seeking to understand through social world in question through observation, description and interpretation involving the individual within their societal and cultural context   using, purposive sampling – only seeking to explore people involved in this – nobody else. Observations and interviews would take place to understand their experiences).” May be the most appropriate question.**

**Sampling and Recruitment**

Careful selection of participants would be needed to establish who would most likely to be successful within the study and to do that, it would be important to contact the Sonrise programme founders in America to establish how to select children who are most likely to benefit from the intervention.  Certainly, these pathways are complex.  The researcher, having used some of the strategies in a special needs setting has had the opportunity to use some of the techniques with success.  The approach was intuitive.

A small sample size, will be required since the evidence within Williams (2006) suggests that qualitative research would be the most appropriate research approach.  The small sample size occurs because within qualitative research methods, I would not be looking for a statistically significant sample.  Grounded theory:  up to 50 participants to develop new theory and IPA requires up to 10 people or fewer.  This is considered as not a limitation but a flexible response to the question in hand and a key strength because you need to be rigorous in considering why the people are included in the sample.  Previous analytical results should influence further sampling choices and so, the sampling should take place in stages.  The participants should be selected with a particular purpose or goal in mind.  A snowball sampling may be possible since Birmingham University may be interested in working on the study and they are approaching Birmingham Children’s Hospital in the hope that they might also be interested in joining.  If Birmingham Children’s Hospital does join the study then convenience sampling techniques may be possible where any person in a clinic may be asked to participate.  By recruiting in stages, a theoretical sampling technique may begin to be employed based on emerging data from participants.  It might be possible to choose non-verbal autistic children to join the study and measure the improvement that occurs within their communication techniques following a 6 week Sonrise intervention.

Data saturation concept is complex within autism because the pathways within autism are complex and wide ranging.  A sampling frame could include the headings: age, gender, ethnic minority, family socioeconomic status, technology usage, gestation, location level of autism, is the child verbal or non-verbal, the extent to which the child is behind or ahead developmentally.  A small amount of participants would be selected because a large amount of detailed information would be collected over a number of weeks.  It is currently unclear if the data can be transferred to similar settings because of financial constraints.  The UK is undergoing a period of austerity where it is extremely difficult for researchers to find the space or resources needed to gather data and to implement results into practise.  It may be possible to develop hubs where this may be possible.

**Ethics**

Signed consent will be required from parents, BCU ethics panel and Birmingham University / Birmingham Hospital ethics panel.  The research will be carried out ethical with respect to children’s rights, BECERRA guidelines. Bertraum (2015).

**Interviews**

Interviews are one of the most commonly used methods of data collection within Qualitative Research Methods.  The interview will aim to establish a factual record where the response can be verified based on facts and events.  The interview will try to establish the individual participant’s truth rather than recording how the interviewee may feel they should respond.

Structured questions that do not pay any attention to dialogue may be used to provide simple, straight .to determine a quantitative yes or no response to whether or not participants found the Sonrise programme strategies helpful to each child.  This will be done on a 1-5 sliding scale.  Semi Structured questions will be guided by pre-defined questions.

An unstructured section to the questionnaire will enable the participants to state whatever needs to be included within the study that the researcher is unaware of.  The life story of the participant may be useful within this section.  Face to face interviews despite Co-Vid would be preferred to establish a rapport and access to non-verbal cues which may be needed.  (The experience generated may be emotional).  This would not be possible with a telephone or email interview.  The interview would be co-produced, coproducing the construction and re-construction of knowledge.  When introducing the interview, the participant will know what they have agreed to and will be familiar to the process as well as having had the opportunity to ask questions about the study.

**Interview Beginning**

Can you tell me your story from the point you suspected that something was different?

**Transition signal:**

Up to now we have been talking about … now I would like to hear …

**Closing Down**

I’d like to finish the interview by asking you to thing about what messages you’d like to give to health professionals / other patients.  Is there anything you would like to share that we have not yet talked about?

A mixture of open (descriptive responses) and closed questions will be used. (numerical or yes / no responses).  The descriptive responses could be narrative, cross checking (tell me more about) evaluative or theorising / contrasting.  The probing and prompting devices used would be silence, echo, and phrases such as “tell me more”.  It would be important for the researcher to avoid being over empathetic, manipulative or leading.

Appendix A

The questionnaire

Appendix B

The interview schedule

(List of topic and questions)

A focus group would not be used for this because the data collected would be specific to the individual being studied and not for a group discussion

**Data Analysis**

One method for analysing qualitative data is thematic analysis.  Thematic analysis identifies patterns within data sets that can be reported on.  This means that the data can be organised and described in detail. It can frequently interpret data by identifying meaningful patterns across a data set.  The main principles of thematic analysis as a method for analysing data

Is a process of coding, categorising and theme development.  This will be done through NVivo.

**Focus Group**

This would involve collecting the views of people involved in delivering the Sonrise program and the families involved in the programe.

What it would be a group of the people involved in the study, discussing together or commenting on.  It would aim to generate knowledge and ideas relating to the overall topic of autism and the Sonrise Programme to generate the best information.  This approach could be used because little is known in the UK about this subject and it generates ideas.  The dynamics of the group elicits the best information and can be empowering, particularly as people are given time out of the spotlight to reflect on their views.  The difference between this and the interview is that this would not be confidential.  This may help us to explore findings are develop a hypothesis following the intervention and could suggest what needs / training could / would be needed next.  This could be developed into a further questionnaire or simply used to gather accounts of what happened during the study, as a reflection.  It could conclude to explore attitudes to create new policy or intervention.

**Sampling:**

Convenience sampling is most likely to begin with, followed by theoretical sampling informed by developing theory linked to grounded theory.  However, at the beginning of the study, I believe that the most likely sample to start with would be a non-verbal, autistic children.  Six participants would be aimed for to begin with so that the data generated would be manageable and to allow for the prospect of people potentially dropping out of the study.  It would be interesting to hold a focus group with different groups such as, families, health professionals or education professionals.

To stop yielding new ideas:

At least 2 for each key demographic (Barbour 2007, Kruger and Casey, 2015) cited Tierney 2022 online.

Homogenous sample – 2 – 3 groups (Guest et al 2017)

Cited Tierney 2022 online.  4 = identify most issues, nut may need more to understand nuances within the data (Hennick et al, 2019) cited Tierney 2022 online Oxford.

Equipment: recorder, name badges, paper and pens, post it notes, refreshment, consent forms, topic guide

By using an ice breaker at the beginning of the focus group, you encourage people to talk.  Then an introductory question, highlighting to the group what is about to be talked about and key questions to help discussion around this.  An ending section, would be discussing main findings and asking if anymore should be discussed.  Inclusion tasks and activities could include using lists / ranking systems, pictures and other creative responses to get people talking.

The facillitator of a focus groups is really important.  They need to put people at ease and set the scene.  They need to encourage debate, probe for further details, allowing off topic discussion but enable it to come back to the point.  Silence can also be used.  The facilitator makes sure everyone has a chance to speak.

Insert activities a – e

Possible Focus Group questions:

Ice breaker: what kind of biscuit would you like with a cup of tea?

Further Questions:

What are the barriers to delivering the autism programme at home?

How much time was possible to spend on it?

Were you able to use the ideal room as detailed in the guidance?

Were you able to use the staff ratios as detailed in the guidance?

What modifications took place?

What was discovered during the programme?

Tell me about your current experiences of using the programme.

What are the key things that get in the way of delivering the programme.

(Provide pictures to help).

I’d think about the room layout, refreshments and equipment.  (Refreshments before focus group)

Recording equipment / co facillitator

Olympus DS2500 professional dictation machine

Olympus ME 30w microphone  total = £450

Ethics with focus groups:

The participants should be fully informed about the purpose and the group and how data will be recorded and used.  It should be clear how long the group is expected to take place and that the group must stick to a confidential.  We will be clear of the content to avoid distressing anyone – in which case, a co facilitator might want to take the person out of the room to check they are ok.

Consent form “what is said in the room, stays in the room”.

**Types of Analysis & Data Management**

**NVivo, Excel Word, post it notes**

**Ethnography**

**Ethnography is the study of people through a written account observation, writing and representation in this methodology.  It is defined as a method of research where the researcher participates overtly or covertly in people’s everyday lives for an extended period of time, watching what happens, listening to what is being said, asking questions and collecting data which throws light on the issues concerned.**

**I will do it by observing what people do within the setting of a Sonrise playroom.  Interestingly ethnographers are not only expected to watch but join in with the activities which is a shared concept within the Sonrise programme itself.**

**Good ethnography practise will include**

* + **A complex balancing act between being respectful and faithful to the people involved whilst being analytical and moving knowledge forwards.**
	+ **Rigour involving transparency in describing the research process, sampling, how?  Size – is it sufficient?**
	+ **Reflexivity – presenting and reflecting upon data**
	+ **Theoretical contributions – description vs thick description vs grounded theory building and typologies.**
	+ **Bias – differing opinions to this.  Attributes of researcher biases data collection.  It is difficult to establish what is “normal”.  Is it possible to minimise your own effect on the data.  Fieldnotes are unavoidable influenced by the researcher point of view.  The ethnographer’s personality, culture and background influences the research.**

**The kinds of theory which emerge from ethnographic analysis are descriptive vs explanation, thick description vs grounded theory and concepts and typologies.  A thick description of a social event or action     immediate behaviours, contextual and experiential contexts which makes the behaviour meaningful.  For example, the context of a wink and what that wink means.**

**Taking into account SPLIT: space, people, language, interaction, things.  Note down conversation i.e. what was said cf what was meant.**

**The methodology - Interpretative Phenomological Analysis IPA:**

IPA

What is IPA?

IPA is detailed exploration of individuals’ life experiences / lived experience closely linked to

Phenomenology – this is the study of consciousness and self-awareness and the objects of direct experience.  Example: pain for 1 person is different to another.

and

Hermeneutics – the branch of knowledge (theory and methodology) of interpretation  How do individuals make sense of these experiences?  We are thrown into a world of objects, relationships and language with our being in the world as something perspectival, temporal and in relation to something.  How do we make sense of this?

Idiography – analysis of IPA

Sampling and Interviewing undergrad / masters project – 3, PhD studies 8-10 or 3 distinct samples (Marta Wanat 2021)

Analysis, theory and practise

IPA is interested in exploring individual life experiences to discover what the meanings hold for individuals.

* + IPA has been noted as a complimentary analysis method when utilising an ethnographic approach as it offers a more holistic output, including both descriptive and interpretive commentary on the data

Emergent themes can be studied within NVivo.

**Grounded Theory**

**Figure.1**

Ylona Chun Tie  (2018) **Figure 1. Research design framework: summary of the interplay between the essential grounded theory methods and processes.**

Ylona Chun Tie et al (2018:2-3) “Grounded theory sets out to discover or construct theory from data, systematically obtained and analysed using comparative analysis.”

Ylona Chun Tie et al (2018:8-10)

Result: This article provides an overview of grounded theory illustrated through a graphic representation of the processes and methods employed in conducting research using this methodology. The framework is presented as a diagrammatic representation of a research design and acts as a visual guide for the novice grounded theory researcher.

**This is a methodology, defining reality through social interactions developing theory about people’s reality in a given situation – this one best suited to sonrise?**

**Aims to move beyond simple qualitative studies and develop theory grounded in data which was systematically obtained.**

**Firstly, developing substantive theory – theory based within a specific context which can be transferred to similar contexts.  Perhaps later developed into formal theory where trustworthy, credible conclusions are drawn from multiple studies from a similar area.  Grounded theory is the theory that creates the hypothesis which can be tested.  This theory can then go on to be predicted quantitatively once more in known about it.  The key principles are that it does not have a literature review at the beginning of the study.  To gain approval from an ethics committee, a light touch literature review to set the scene and create the background for the study.  For grounded theory it would be a light touch literature review is to establish the theoretical ideas must only come from the data and not skewed or swayed by heavily researching the topic beforehand.  Theoretical sampling recruit’s participants through the data collection period until no new insights come from the data.  During the data collection period, grounded theory uses coding: open, axiol or selective coding.**

**As the data is collected a constant comparative analysis occurs immediately, comparing ideas and analysis with subsequent participants data as it comes in.  Memo writing is part of grounded theory and these notes help in the development of analysis, coding and clustering / creating categories.**

A full literature review starts after the data analysis so that natural codes are formed from the data and not biased from the literature.

Write up

Clearly present argument for study and rationale and why you use qualitative.  I can proof there is a research gap and there is a shortage of information that needs addressing.  What do we know so far?  Is there a research gap?  What are the limitations?  Has there been a recent systemic review or paper saying it needs more research?

Try not to use any quantitative language or percentages / numbers when reporting findings

Ethics

Comply to:

Nuremberg code (1947)

Declaration of Helsinki (1975)

Belmont Report (1979)

Plus Bertaum and Child Rights                                  Report (discussed in previous study)

Dealing with distress, disclosure, helplines and support

Influencers - Power – gender, class, ethnicity, age, profession, pleasing the interviewer, gatekeeper power

Considerations for researching with vulnerable groups

Debriefing

Counselling

Location and procedures have safety considerations

What measures have been put in place to minimise harm or deal with adverse events?

How will you protect vulnerable participants from exploitation?

What sensitive issues do you anticipate?

How do you deal with unexpected, sensitive issues?

How do you ensure informed consent?

The Results take into account:

<https://casp-uk.net/casp-tools-checklists/>

**References**

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