

Training in Qualitative Research Methods for Professionals working with Persons with Disabilities

Richard Rose^{1*}, Himangshu Das², Jayanthi Narayan¹, Johnson Jament¹

1. Faculty of Health, Education & Society, University of Northampton, UK

2. Director, National Institute for the Empowerment of Persons with Multiple Disabilities, Ministry of Social Justice & Empowerment, Government of India

ABSTRACT

Purpose: *The study aimed to investigate the impact of intensive in-service training in qualitative research methods on the research competencies of a cohort of rehabilitation professionals.*

Method: *A series of three-day workshops was held on professional development in the promotion and utilisation of qualitative research in the field of disability and rehabilitation. It was organised at five centres across India for professionals working in that field. Data was collected through a survey of workshop participants, to ascertain the impact and efficacy of the training provided.*

Results: *The results suggest that practitioners working in the area of disability and rehabilitation see considerable value in the application of qualitative research and are enthusiastic about its potential to improve the lives of those with whom they work. They believe that such an approach will provide useful data and increased knowledge in respect of the lives of individuals with disabilities and those interventions that provide them with greatest benefits. The survey revealed that the knowledge of qualitative research methods was limited even among professionals who had studied for research degrees.*

Conclusion: *There is the need for more intensive training in qualitative methods in order to enhance the quality of research in disability and rehabilitation in India, and to assist in improving the lives of individuals with disabilities, their families, carers and those who work with them.*

Key words: *professional development, training rehabilitation professionals, in-service training, short-term training, disability rehabilitation training India*

* **Corresponding Author:** Richard Rose, Professor Emeritus in the Faculty of Health, Education & Society, University of Northampton, UK. Email: Richard.Rose@northampton.ac.uk

INTRODUCTION

In India, as in many other countries, research into disability and the provision made for people with disabilities has been conducted within a long-established positivistic tradition (Grills et al, 2017; Massenburg, et al, 2017). This was evident in the survey of published research into intellectual disability conducted by Reddy and Narayan in 2007, which showed that even small-scale studies tended to report on data collected using quantitative methods (Mukhopadhyay and Gupta, 2014; Sarma, 2015). Within the positivist paradigm there has been a demand for statistical data which can be used to identify trends and patterns based upon large samples, allowing for generalisation to a wider population. This scientific approach based on the traditions of positivism has proven useful in respect of providing a broad overview of issues on a national or regional scale (Visser, et al, 2016). The approach has been important in enabling policymakers, or those charged with the management of resources, to make plans for provision to improve the lives of those living with disability. The collation of statistical data based upon large-scale surveys, has been widely accepted as an appropriate means of understanding complex situations that impact policy and provision in the field of disability studies (Anderson, Larson, Lentz and Hall-Lande, 2019). However, the results of such studies have been found to have limited use in respect of influencing the day-to-day practices of professionals working most closely in the provision of support for individuals with disabilities or their families (Shakespeare, 1996; Kröger, 2009).

Critics of traditional research in this field (Moore , Beazley and Maelzer, 1998; Fawcett, 2014) have focused on several shortcomings. First, quantitative investigations have tended to research “on” or “about” individuals, not “with” them, and have therefore ignored the voices of those most directly involved in provision and practice (O’Brien, 2020). Secondly, much of the reporting of quantitative research has made use of procedures and language that is opaque to the majority of service-users and providers (Schwartz, Kramer, Cohn & McDonald, 2020). Thirdly, those who have been engaged in the research have operated at a distance from professionals responsible for delivery of services and have failed to adequately contextualise real-life situations when presenting their findings (Shaw & Lunt, 2018).

The authors of this paper find themselves in sympathy with the opinion that whilst positivistic studies may still contribute to our understanding of disability, interpretivist approaches based upon the collation and analysis of qualitative

data have greater currency for the improvement of practice. It is with this view in mind that they have made a commitment to work with other colleagues to promote qualitative research methods within an Indian context.

Why Qualitative Research?

In some disciplines there have been debates about whether qualitative research can achieve the rigour that has become associated with traditional positivistic approaches (Chavan, 2015). Sarma (2015) makes a good case for the use of qualitative methods, suggesting that such an approach has made a significant contribution to the development of knowledge and understanding in disciplines including sociology and political science, in India as elsewhere. However, he acknowledges that some of the criticisms levelled at researchers working within an interpretivist paradigm are justified, because of poor practices that have not ensured the trustworthiness of some of the results produced through the use of qualitative research tools. Ensuring research rigour is an essential factor in gaining the confidence of those professionals who have come to believe that investigation is dependent upon the presentation of statistically verified data.

Binder et al, (2016) propose that qualitative methods in researching clinical practice should be recognised as an effective means of investigating the experiences of both clients and therapists. Such methods, they believe, can provide critical insights into the relational context of clinical interventions and their impact upon the recipients of these interventions. These researchers suggest that many professionals working in the caring professions are familiar with the presentation of cases. However, these case histories are often based upon limited epistemological and methodological presentation that would enable the greater validity that researchers demand when presenting data (Bergmark, Bejerholm & Markström, 2018).

On occasion, a qualitative approach may form part of a mixed-methods investigation, to enable a deeper meaning to be applied to the interpretation of statistical data gained through use of quantitative instruments (Corby & Sweeney, 2017; Higashida, 2017). But in many circumstances qualitative approaches can be the primary or even the sole means of data collection and analysis, particularly when the researcher needs to understand environmental factors or the effect of interventions that impact the lives of those who are the focus of the research (Forrester & Sullivan, 2018; Prasad, 2018).

Morrow (2007) suggests that qualitative research provides a useful means of gaining understanding of the meanings that individuals make of their experiences. Through the use of qualitative methods such as interviews, the researcher is able to probe deeply into the experiences of those within a purposive sample in order to make sense of their lives and to gain rich data. Cornelissen (2017) endorses this view and believes that qualitative methods may provide the only effective means of understanding how organisations work and their impact upon both individuals and the effectiveness of intended institutional outcomes. Cornelissen identifies distinctive aspects of qualitative research that he believes to be the strength of this approach. Specifically, he discusses the ability to develop “thick description” through which, with the use of methods that may include in-depth interviews or focus groups, the researcher is able to explain the details of an organisation and its structures in a manner that enables the user of the data to understand relationships and the impact of the actions taken within this organisation. For example, a researcher who wishes to understand the effectiveness of a clinic in delivering physiotherapy services to a group of clients with physical disabilities, may interview service-users and providers to gain the lived experiences of those associated with the clinic.

The Need for Professional Development in Qualitative Research Methods

Opportunities to gain focused training in the use of qualitative research methods for investigating disability issues in India and other parts of Asia have been limited (Horta, 2018; Shin, Postiglione & Ho, 2018). Universities providing doctoral level qualifications in the social sciences and disability studies have tended to provide a narrowly focused provision of methodological training, largely related to quantitative approaches (Ali et Al, 2017). Innovation in research training has been slow to develop. Dash (2015) reported some of the challenges in developing programmes for capacity building in post-graduate research programmes in India and Malaysia, suggesting that there is a lack of clarity about the type of research that can best be deployed to raise the quality of investigation in these countries.

Bowden and Green (2019) describe how in many countries the nature of post-graduate research training has changed in order to address the various national, educational and economic policies being implemented. In particular they describe inconsistencies in the support provided to novice researchers which places some at a considerable disadvantage, in a climate where research expectations are

rapidly changing. Nchinda (2002) described evidence-based decision-making as a critical factor in promoting effective health interventions. An important factor raised in his study is that of ensuring that national context is given a priority. He uses the phrase “indigenous research capability building” to describe a process, where research training is provided in-country, using exemplification from investigations conducted locally in order to promote research methods that are appropriate and can be applied within national resources. This may be particularly important when attempting to promote changes or introduce new approaches in situations where research is relatively well-established but possibly dependent upon a narrowly focused set of principles.

Development in the field of disability rehabilitation, inclusive education and early intervention has been rapid in recent years. The United Nations Convention on the Rights of Persons with Disabilities (UNCRPD, 2006), the Agenda for the Sustainable Development Goals (SDG, 2015), particularly SDG 4 of SDG 2030, with its focus on inclusive education and other international mandates have emphasised the priority and focus on equal opportunity and equity among people in general and disadvantaged populations in particular. As a result, various programmes have been initiated universally for the development of provision and practice (Collins, 2012; Baldiris-Navarro, Zervas, Fabregat-Gesa & Sampson, 2016). To keep pace with these developments, professionals need constant updating to equip themselves with knowledge, skills and competencies to participate and contribute to the cause of realising the rights of a marginalised population. Staff development programmes clearly have a large part to play in such developments (Chiaburu & Marinova, 2005; Jellema, Visscher & Scheerens, 2006).

Many universities and professional organisations provide professional development at Bachelor and Master’s levels, with course content covering research methods. An examination of the research conducted in disability in the country, has predominantly focused on the collection of data using quantitative research methods, with qualitative approaches having gained currency relatively recently (Mehrotra, 2012; Kaur, 2016). Quantitative research plays an essential role as it provides an insight into the status of phenomenon at ‘length and breadth’, an approach that may provide guidance for policy decisions and areas requiring in-depth studies (Choy, 2014; Jamali, 2018). Quantitative research helps to quantify the findings by generating numerical data that is analysed using appropriate statistics, whereas qualitative research helps by creating an ‘in-depth’

understanding of the behaviours, attitudes, events, interactions among people and their environment, and other processes of daily life. Qualitative researchers stress the socially constructed nature of reality, the intimate relationship between the researcher and what is studied, and the situational constraints that shape inquiry (Norman & Lincoln, 2005; Nakkeeran & Zodpey, 2012).

In the area of disabilities, every person matters and his/her concerns in life need to be addressed as he/she has the right to a life with dignity. Such details can be understood only by qualitative research that looks at the 'depth' of a phenomenon. This research method requires training in order that the researchers carry out the task professionally to make the findings meaningful. Such studies are few in India. A search for qualitative research literature from within the country reveals a scarcity of such materials (Herur, 2016). In acknowledging this situation, the current study aimed to conduct in-service training for professionals working in the area of disability rehabilitation in different parts of India, and to analyse the impact of training on their conceptual understanding and appreciation of the applicability of qualitative research methods.

In order to gather data to investigate this issue, the following research question was defined:

What is the impact of intensive in-service training in qualitative research methods upon the research competencies of a cohort of rehabilitation professionals?

METHOD

Setting

The project was established as a collaborative effort of the National Institute for the Empowerment of Persons with Multiple Disabilities (NIEPMD), a research and training institute established by the Ministry of Social Justice and Empowerment, Government of India, and the University of Northampton, UK. The NIEPMD contacted organisations throughout India that conduct research and training programmes in the area of disability rehabilitation, inviting applications for a training programme on qualitative research methods to be conducted by the expert team from the University of Northampton. Considering the social, cultural and linguistic variations of the country, it was decided to conduct the training programmes in five zones of India to provide wide coverage.

Participants

The eligibility criteria for course participation focused on those having a PhD or currently registered for PhD and teaching courses in disability and rehabilitation at the Bachelor or Master's level. For each zone the applications were reviewed by a team at NIEPMD, and those participants who fulfilled the participation criteria were included in the programme. The participants were informed that the effect of the training programme on the participants' acquisition of knowledge on qualitative research methods would be studied and the details would be published. After this their informed consent was obtained.

There were totally 144 participants in the training programme. They consisted of 55 male and 89 female participants. Among them, 26 were from Chennai, 17 from Delhi, 30 from Kolkata, 38 from Hyderabad and 33 from Kozhikode. A majority of the participants were educators, teacher educators and special educators (88). Other professionals represented were psychologists (25), speech pathologists (9), research scholars (7), prosthetic and orthotic engineers (4), physiotherapists (3), social workers (3), occupational therapists (2), administrators (2), and a librarian (1).

Programme Content

The programme content comprised a series of taught sessions and practical activities that covered a broad range of critical qualitative research issues. These included question generation, ethical procedures, research design, ethnography, case study development, grounded theory, managing research literature, conducting interviews, focus groups and observations, coding and data analysis, writing a research proposal and reporting procedures.

Tools

The team, which comprised researchers from the University of Northampton based in both UK and India, prepared a pre- and post-test questionnaire with 30 close-ended questions addressed through a multiple-choice format (Bennett, 2003; Oosterveld, Vorst & Smits, 2019). The content of the pre-test questionnaire included concepts of what was to be covered during the training programme. The close-ended questions were the same in the pre-test and post-test questionnaires. While the open-ended ones in pre-test were framed to elicit information on the participants' expectations from the training programme, the post-test had questions on the understanding of course content and how their learning might be

applied, and about the actions that might be taken to improve such programmes in future.

Procedure

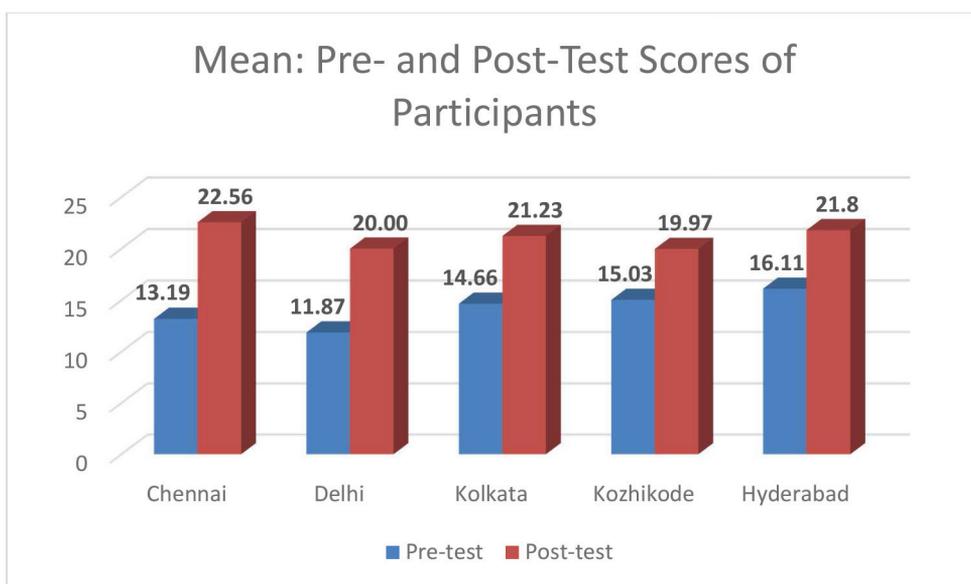
As described, the training programme was organised in five different locations in the country to facilitate participation from most parts of India. The duration of the training programme was three days. Following the pre-test on the first day, an introduction to the course was presented by the team leader and the programme was conducted with hands-on exercises and peer interaction to ensure that each concept taught was followed by an exercise of application. In all five zones, the pattern of the training and the training material shared was identical, to ensure uniformity. The programme provided considerable opportunities for the participants to discuss and share ideas and concerns with resource persons and among themselves. At the end of the training, the post-test was conducted. In addition, the interested participants were invited to conduct an exercise on developing a research proposal on given guidelines and to submit it a short time after course completion. They were informed that those participants who completed this task were found to meet the selection criteria and, following analysis of test data, would be invited to participate in the second level advanced training to be conducted by the University of Northampton resource team members at a later date.

RESULTS

On analysing the results of pre- and post-tests, it was noted that in the close-ended questions, there was a significant gain in the post-test scores when compared to the pre-test scores on a maximum score of 30. (Pre-test mean score = 14.172; post-test mean score = 21.112; mean gain = 6.94). On conducting t-test, the t value was found to be 2.13 with the significance at $p < 0.001$. Table 1 shows the zone-wise mean scores of pre- and post-tests, clearly indicating that the post-test performance was superior to the pre-test. The result is an indication that for professionals with research qualifications or prospective research scholars in the field of disabilities, participating in a well-planned three-day training programme on qualitative research tends to equip them with knowledge on the subject. The finding concurs with the study conducted by Narayan and Reddy (2008) who carried out a three-day in-service training programme for middle-level functionaries in community-based rehabilitation where they found that a three-

day programme involving hands-on experience was effective and that a follow-up after three months revealed that the learnt skills were retained. Furthermore, Chaghari, Saffari, Ebadi & Ameryoun (2017) who undertook a qualitative study in Tehran, involving an in-service training programme for 25 nurses on in-patient care using the model of empowering education, found that this approach facilitates occupational tasks and improves the competency and professional skills among nurses. They added that in this regard, poor organisational settings might hinder the successful implementation of an empowering education model, which can be promoted through participation of the senior managers.

Table 1: Mean Scores of Pre- and Post-tests



Qualitative Data Analysis

For analysing open-ended questions through which qualitative data was collected, Creswell's (2008) visual mode of the coding process was adopted. Through this process it is possible to analyse text and to elicit key themes that recur in relation to the research questions (Eliot, 2018). This process was also taught to the trainees as part of qualitative data analysis procedures. Most of the themes were predetermined or 'theory driven' while others emerged from the data or were 'data driven' (Braun and Clarke, 2006). In the pre-test, the participants were asked to respond regarding three important issues/themes: (1) their expectations about

the course, (2) utility, i.e., what they hope to achieve through this training, and (3) further information, if any, that they would like to engage with. In the post-test, they were asked to respond about: (1) what they had learned (Knowledge level), (2) how they would have applied the knowledge from the training (Application level), and (3) additional information including benefits of conducting qualitative research.

With these six predetermined broader themes in mind, responses from the trainees were transcribed, collated coded and amalgamated under each theme. In response to Creswell's (2008) visual mode of the coding process, five stages of the data analysis procedures were followed. Applying this approach, an initial read through of data and repeated reading by multiple analysts was completed in the first stage. The purpose was to become familiar with the data and identify the locations within the wider texts where meanings and patterns could be highlighted. In the second stage, familiarised data was made into segments with the purpose of generating initial codes. Larger texts were segmented, according to the predetermined themes a process that identified many segments of texts where initial codes emerged. Thirdly, coding of segments was undertaken. The intention for this particular study was to develop multiple codes with reference to initially developed broader themes. At this stage, relevant coded extracts within the themes were collated and organised accordingly. Though one researcher was entrusted with the development of codes in the earlier stages, paired coding and later, joint coding were adopted from this stage onwards. This was to strengthen the inter-rater validity and ensure the contributions of all researchers achieved analyst triangulation. There were many codes identified; for example, level of confidence (coded as LC=level of confidence) in applying knowledge earned through the training, and specific learning examples (SLE) that exemplify trainees' learned outcomes. Other codes emerged such as the 'critique of previous knowledge' (CPK) and 'addition of new knowledge' (ANK). Similar overlapping or redundant codes were combined to form reduced number of codes; for example, 'a comparison of previous and new learning' (CPN) in the fourth stage, after a review or refinement of the codes developed in the third stage. A particular code was also developed to exemplify specific learning outcomes that are particularly 'relevant to the field of rehabilitation and disability' (RRD). In the final stage, different codes were collapsed together according to their common characteristics, to develop final thematic codes or themes. This provided a satisfactory thematic map of the data gathered for the study.

Similar procedures have been advocated by Braun and Clarke (2006) who provide examples of how to address the issue of redundant codes. Following their model, some changes were made in the predetermined codes of themes; for example, one of the pre-test themes, 'further information' deemed to be indistinguishable from the post-test theme of 'additional information'.

The final themes identified provided the focus of discussion and were defined as Expectation of the course (E), Usefulness of the course (U), New knowledge (N), and, Application of new knowledge (A). An additional theme described earlier was the benefits of doing qualitative research (B).

Analysis of the qualitative data revealed the following:

All the participants believed that they had gained from the training and increased their level of knowledge and confidence in respect of qualitative research methods. Furthermore, they suggested that they would be more confident in developing and applying qualitative research after attendance at this course. For example, one participant stated that she had got:

"Better clarity about qualitative research, and how to generate research questions in qualitative research, the philosophy behind the qualitative research, its interpretivist world of knowledge construction, theoretical framework, grounded theory and ethnographic research."

When asked about specific learning gained through the research training, typical replies included:

"I have learnt basic terminologies of qualitative research."

"Learnt to conduct qualitative research, focus groups, interviews, case studies, and observations."

"Research process of qualitative research design," and "how to address ethical issues in participatory research."

With regard to the benefits of doing a qualitative research course, participants often focused upon the greater depth of understanding about individuals or groups that could be gained from qualitative data. As one commented:

"It is possible [through use of qualitative approaches] to process an in-depth understanding of the complex nature of individuals with disability and other diverse needs and to improve the quality of life of those individuals."

Some participants (N=10) also expressed the value that they had gained through a greater understanding of the relationship between qualitative and quantitative research methods and the possibilities of utilising a mixed-methods approach. When asked about their understanding of the differences between qualitative and quantitative methods and their applicability in the field of disability and rehabilitation, they were able to articulate ideas which generally favoured qualitative approaches for the more democratic and client-focused opportunities that came with these. Course participants who came from a medical or para-medical background had experienced the use of quantitative research data but believed that the more personalised data that could be obtained from qualitative approaches were likely to have a greater impact upon practice.

A significant learning outcome from the course was the level of confidence expressed by participants in their ability to apply newly gained knowledge to develop a research proposal. Some considered that small purposive sample research held value for practitioner researchers who wished to understand specific client needs or the value of interventions of changes to practice, and recognised that such investigations could have more impact upon rehabilitation than quantitative studies using large but impersonal samples.

Some participants (N=22) expressed confidence that they could apply their learning from the course and redirect their approach to research. Comments from course members included:

"I now understand how to approach a topic from the qualitative point of view."

"I learnt a systematic way to frame research questions."

"It helps me to have a broader look at the research field and motivates me to give more inputs in the field personally."

Participants who had completed research degrees reflected upon their previous learning of research methodology and compared these experiences with the new learning gained from this three-day course. As one stated:

"I realised that the research I undertook for PhD was not up to the mark; after this workshop I look back and see what more could have been done."

Another participant commented that:

"Ethnographic theory was not much explained in our academic settings and hence it (this workshop) helps..." and, "It helped me to expand my knowledge in

the field of research which was covered only in a limited extent in my academic curriculum."

The location of learning within the specific field of disability and rehabilitation was seen as important. The emphasis throughout the course was on instilling a sense of developing qualitative research and an equitable, inclusive and democratic process. This was recognised and appreciated by participants.

"Before this I am not clear where to start my research in inclusive design. Now I can narrow down my topic and I will concentrate on the focus group to identify the samples for the behavioural and user analysis for research study."

"This training is useful as there was no relevant proper training on research methods for a population with disability."

An emphasis upon ethical conduct in research had been given throughout the course, and this had been debated by participants who believed that too little attention has been devoted to this area in some studies. This, in addition to the acquisition of practical methodology applications such as formulating interview schedules, conducting different approaches to observation, conducting focus groups and interviews, and the development of case studies and coding of data, was seen as an important aspect of learning gained through the course.

The application of ethnographic approaches was new to many (N=27) participants. This provoked some to reflect upon the fact that until they understood the value of ethnography they had found it difficult to see themselves as researchers in their own working environment. In one particular instance, a participant working in what might have been seen as a typical environment suited to ethnographic approaches commented:

"Currently, I am doing research with some indigenous tribes in Arunachal Pradesh. Learning achieved from ethnographic research will help me conduct my interview with them."

An interesting observation on this comment is that whilst the participant recognised that ethnography as a broad research methodology was appropriate, the notion of specific interview techniques appropriate to ethnography was unknown prior to completion of this course.

The need to 'think like a researcher', to question and challenge ideas and test theories was appreciated by course participants. As one observed:

“This training programme helped me become critical thinker, to do research in own field. In earlier times I have the motivation to do or think on area to do research. But due to my lack of knowledge I may not be able to do it. But now I feel a bit confident to proceed my thoughts in a more scientific way.”

The course facilitators had throughout the workshops emphasised that their purpose was to encourage practitioners to undertake such research that could promote change and improvements in the lives of individuals with disabilities and their families. At the conclusion of the workshops, course members were asked to reflect upon the actions they might take and to give practical examples of the direction that they may follow as practitioner researchers. It was evident that some had thought deeply about this matter and had already formulated ideas for the application of learning.

“The knowledge gained will be used in my clinical practice to help parents and persons with intellectual disabilities.”

“I had only heard of these and known them only in theory. This workshop has helped me really in getting me hands-on knowledge in using these methods. As we work with children every day, now I am beginning to see the opportunities in the use of qualitative research. I hope to do focus groups for parents of children with similar disabilities (ASD/CP) and also observe a few children on a particular therapy technique.”

In respect of potential improvements to the training, a number of points were raised. Most participants felt that a three-day course was too short and that it should be extended to five days. The course facilitators would generally agree on this point though, as with any course, there are finite resources available to enable this to be realistically achieved.

Some participants felt that they would have liked to spend more time on generating research proposals. This would have enabled them to build upon their learning in a practical manner after the course.

These comments were valid and could be used to shape the thinking of facilitators in the delivery of future training. The general consensus was that the course benefitted from being delivered in a practical manner and the ability of facilitators to provide a clear link between theory and practice through the presentation of exemplars. In addition, the creation of a relaxed teaching atmosphere which gave participants opportunities to engage at their level, was seen as a positive aspect

of the course. In response to the comments on the need for a course of longer duration and the need for more intensive training, a second-level training was organised later, focusing on research proposal generation and data coding and analysis.

DISCUSSION

While much has been written about the importance of researching disability (Brown and Boardman, 2011; Vaccaro, Kimball, Wells and Ostiguy, 2014), opportunities for practitioners to engage in research remain limited (Hardwick and Worsley, 2011; Rose, 2016). In India, disability and rehabilitation research has been dominated by large-scale survey approaches that generate large quantitative data sets that are useful in providing a broad perspective but lack the depth to be of value to clinicians and practitioners (Singal, 2010). Further, Hartley and Muhit (2003) observe that the predominantly quantitative approach to disability research has resulted in a dominance of impairment-related studies and the social aspects of disability have been ignored and under investigated.

Professionals working in the field of disability and rehabilitation are generally involved in practical interventions and procedures, and as such are familiar with learning that takes place in clinical and other work-based settings. The response to the research training course discussed in this paper indicates that the practical elements of the workshops, which afforded opportunities to practice what had been taught during teaching sessions, elicited a positive response from participants. In other studies, it has been reported that much of the professional development provided to professionals in the caring professions in India, has been delivered through largely didactic approaches (Saigal, 2012; Rose & Doveston, 2015). The participants on the courses discussed in this paper confirmed this and emphasised the value of the opportunities provided for debating issues and putting learning into practice.

The tradition of positivistic research that has dominated the field of inquiry in disability and rehabilitation in India has made a significant contribution to knowledge and understanding and will continue to do so in the future (Lakhan & Ekundayò, 2017). However, the authors of the current study contend that as progress from a medico-deficit model of disability to a social model that promotes equity and inclusion continues, it will be important for researchers to provide data that relates immediately to the work of practitioners and the support provided by families and carers. Such research will of necessity require more focused, smaller-

scale studies that generate data to enable understanding of the effectiveness of interventions and the experiences of service users. New knowledge of this type is more easily attained through the application of qualitative research approaches and will require researchers who have specific training in this approach.

CONCLUSION

The findings from the professional development course reported in this paper suggest that there is an enthusiasm for the development of qualitative research skills amongst professionals working in the field of disability and rehabilitation across different parts of India, and there is an opportunity to make considerable advances in this area.

ACKNOWLEDGEMENT

The authors place on record their acknowledgement and appreciation to all the participants in this study and the coordinators who organised the logistics in each of the five zones where the programmes were conducted.

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