

# BABY FRIENDLY SPACES STUDY BRIEF

## SPOTLIGHT ON DATA COLLECTION



### CONDUCTING INTERVIEWS WITH ROHINGYA REFUGEE MOTHERS LIVING IN COX'S BAZAR, BANGLADESH

Conducting research in humanitarian contexts is extremely challenging. Particularly, extra care and consideration are required when working with special populations or addressing sensitive topics. Such was our experience during the HEARD trial that assessed the effectiveness of ACF's Baby Friendly Spaces programs on the psychosocial concerns of Rohingya mothers living in heavily populated refugee camps in Bangladesh.

This study was conducted between November 2021 and March 2022. During the data collection process, mothers attending BFS services with their malnourished children were interviewed.

This study brief shares the experiences of the quantitative data collection team. Data collectors experienced various challenges pertaining to the context, the participants' living conditions and past experiences. Simultaneously, they built rapport, maintained data quality, ensured ethical principles were applied, and overcame unexpected situations while preparing and conducting interviews.



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# FOR OPTIMAL DATA QUALITY

A study is only as useful as the data it collects; that is the reason why we took great care to recruit and maintain a fabulous team of skilled data collectors. Data collectors were women, fluent in Bengali and Chittagonian dialects and they had knowledge of data collection tools. They were either former ACF staff or from other NGOs operating in Cox's Bazar, with a bachelor's degree, and a minimum of four years of professional experiences. They were trained by both academic researchers and the MHPSS program manager and psychologists in MHPSS program delivery.

Further, to ensure participants' comfort, **each data collector was accompanied by a Rohingya volunteer** throughout the study. The volunteers were from the same community and known by the community people as they have been engaged with many different NGOs and were promoting health and hygiene at the household level. These volunteers were integral to create a comfort zone for the respondents, translation of essential terms used by the community people when needed, visiting the households to find the participants during the follow-up data collection period, etc.

## CONSTANT FIELD MONITORING

During field monitoring, we observed that the **data collectors accompanied by Rohingya volunteers** would take a considerable amount of time to conduct individual interviews to ensure optimal quality of data collection. In many instances, if Rohingya mothers could not comprehend the questions or because of language issues, the data collectors reiterated their explanations in a clear manner. Such as, they gave the mothers many examples to illustrate different sorts of mental distress, emotions, and feelings, and asked the mothers to reflect on the situation based on their own experience while keeping the correct level of standardization throughout the interviews.

**To continuously adjust and rapidly solve issues on site**, the data manager's role was significantly important. The data manager was very responsive to maintain regular communication with field personnel, responding quickly to any issues they encountered, meeting with field staff on a regular basis, learning from one another through field experience, checking data consistency in the database, and clarifying any anomalies immediately with field staff. If the data collectors encountered any difficulties during the process of data collection or needed any clarification, they immediately discussed this with the data manager and solved the issue so that they could move forward.

The **effective and timely communication** between the data manager and data collectors helped ease the process of data collection and mitigate errors. For example, when data collectors failed to locate beneficiaries during the post-test interview, the data manager immediately helped them with necessary information or arranged external support from the program or nutrition team to find quick and easy solutions. Overall, these procedures helped keep the data collection process rigorous and ultimately helped maintain optimal data quality.

“I continuously provided technical and logistical support to our data collectors, collected their feedback and the issues they encountered during data collection, and discussed this information with higher management.” ACF data manager

“In terms of data collection, it is so critical to ensure both consistency in the interview process as well as participant comfort and understanding. Our data collection team was incredibly thoughtful and resourceful in navigating these challenges.” HEARD scientific partner



# RAPPORT BUILDING WITH PARTICIPANTS IS ESSENTIAL



Data collectors engaged in a variety of actions to break the ice with mothers, such as speaking with a smile, chatting about their children, allowing them to play with toys, etc. The mothers became pleased, and rapport developed rapidly. At one point, mothers became so familiar with our data collectors that they inquired about the next interview date. Even during the intervention, they occasionally checked to ensure that the date was accurate. When our data collectors were interviewing the mothers, some of mothers would say: **"Apa, no one before you wanted to know about us in this way"**. Some beneficiaries would cry while speaking. Then, our data collectors had assured them, **"We have a psychologist who would listen to your deepest sorrow. It is safe to share with them."** and would refer any mother to additional support who needed and wanted it.

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**"We have benefited from the psychologist's counseling and regular follow-up. If we had received follow-up earlier, we would have benefited more. We may have been able to recover sooner. A mother participant of the study**

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**"While monitoring the data collection process, I found respondents cheerful after the interview. It was the effort of our data collectors who built good rapport at the beginning of the interview. While we were waiting for the follow-up data collection to commence, the respondents used to visit our research assistants with a smiley face and ask about the following interview schedule. It tells us how impactful our data collectors were, not to interview them only for the sake of data but to support them emotionally, and to show empathy when needed. Although we faced many hurdles at different times implementing the project, it helped us to learn and move forward."** ACF  
Research project manager

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## INTERVIEW CONDITIONS

The interview would usually happen in the morning after the mothers and the child would have already consulted for the nutritional treatment. Because at times there were long waits, crowding, and heat in the summer or rain during monsoon season, mothers and their children could experience fatigue and stress.

**For the sake of keeping both mothers and children comfortable,** if a baby became fussy or cried during the interview, our data collectors would make sure the mother felt able and supported to take a break to breastfeed her child, which helped make the mother feel relieved and happy. In addition, when the infant would frequently cry, the research volunteer would play with the infant using toys, which made the interview session much smoother. Occasionally, mothers would disclose concerns to the interviewer, such as thoughts about self-harm; in these cases, the interviewer would promptly pause study activities in order to instead immediately help the mother connect with a psychologist.

During the interview, the data collector consoled her by stating, **"Our BFS facility has a "moner doctor apa" [psychologist] who will take excellent care of you."** The interview would continue when the mother felt better and after she had received further assessment.

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**During data collection, we encountered challenges such as mothers who were too busy to participate in interviews; limited space at the BFS center to conduct interviews privately; and on occasion, a large number of clients visited the center on a single day, making it impossible to speak with all of them. In addition, not all of them fit our research criteria."** ACF data collector

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# MULTIPLE CHALLENGES FACED WHILE CONDUCTING INTERVIEWS



1

The biggest challenge in conducting interviews in the camps was the **lack of space in the BFS centers** to carry out the group and the individual activities. Consequently, the interviewers had to work hard to maintain participants' privacy. If any other BFS staff was present when mothers discussed about their emotions, distress, or personal information during interviews, this would cause them to feel extremely uncomfortable and not wanting to talk in detail. In response, our data collectors had to frequently seek for another location more private to conduct the interviews.

2

In the Rohingya community, some men may become mistrustful when their wives are frequently out of the house for sustained periods of time. Furthermore, some husbands refused to let their wives take part in the interviews because they were suspicious about the use of the interviews. In the camps, they live in households built with temporary structure, prone to natural disasters and frequent camp fires, and where all the services are provided by national and international organizations, which create and sustain some sense of insecurity among refugees. They often feel more at ease when sharing information with people presenting similar socio-cultural characteristics or language, which makes the role of Rohingya volunteers accompanying the data collectors even more crucial. Since the **volunteers were from the Rohingya community, they repeatedly visited these households and could help reassure them** about the research activities and have mothers become comfortable to visit the BFS center.

3

**Another challenge was the Covid-19 pandemic.** When the data collection was in full force, in December 2021, the pandemic hit again and many program and research staffs were tested Covid positive which required changes in data collection schedule and procedures to maintain safety and ensuring that staff quarantined as needed. Roster system and shifting duties was arranged for field level staffs to maintain Covid-19 protocol. Moreover, the beneficiary gathering at the OTP center was reduced to maintain physical distancing, ensure Covid-19 protection equipment, and contain the spread of the disease.

## REGARDING FIELD EXPERIENCE, EVERY RESEARCH PROJECT IS UNIQUE

Sometimes it is quite challenging to maintain all activities and it rarely goes according to plan. However, during this project, we found that our data collectors exerted maximum effort and worked hard to ensure the project's success. Additionally, they learned a lot from their work experience. When I asked one data collector how she accomplished this challenging assignment, she responded, *"It was a team effort."* The respondent then stated, *"If I take a beneficiary effortlessly, that beneficiary will also take me easily. The sincerity of our work and our comprehension of the predicament of mothers as women made it easier for us to complete the task."* In conclusion, a research assistant stated, *"This data collection experience has been quite satisfying for me, as we are not only collecting data, but also listening to their experiences and sufferings, thereby allowing them to breathe."*

