

A RANKING OF QUALITATIVE EVIDENCE?

PHILOSOPHICAL CHALLENGES FROM A WORKING GROUP ON QUALITATIVE EVIDENCE APPRAISAL IN GUIDELINE CREATION

Evidence appraisal systems such as GRADE and the OCEBM Levels of Evidence have become integral to the standard operating procedures of many clinical guideline authoring bodies. Yet none of the widely used systems allow for integrating qualitative evidence, which is systematically marginalized in the creation of new clinical practice guidelines and recommendations. As a result, organizations which use these systems to create guidelines are at risk of overlooking important contributions made by qualitative researchers and producing recommendations which are not supported by the evidence base taken as a whole.

This paper follows the progress and challenges faced by a working group within a pan-European guideline authority, which seeks to rework its standard operating procedures to explicitly include qualitative evidence. Seizing upon the restructuring of the organization-level operating procedures, the working group aimed to integrate qualitative evidence into the organization's existing evidence appraisal procedures, but faced a range of philosophical and social challenges.

Amongst the problems faced by proponents of a ranking for qualitative evidence in medicine are: Is there a special, distinct role for qualitative evidence in medical science? Can (and should) a parallel evidence hierarchy for qualitative evidence be developed? If so, are there identifiable research questions which qualitative studies are best equipped to answer, analogous to the now-standard line that Randomized Clinical Trials are best placed to answer questions of comparative effectiveness? If not, are there distinct methodological virtues which could underpin a coherent checklist method for assessing the quality of a qualitative study?

This paper argues that the attempts to demarcate different forms of research question, to which different research designs are most appropriate, is ultimately flawed. High-value research questions need a pluralistic approach, drawing on a diverse evidence-base. Even canonical examples of the value of qualitative research showcase its direct relevance to questions of comparative effectiveness. The value of a diverse evidence base is appreciated in qualitative research, often under the banner of 'method triangulation', but has been neglected in the design of the dominant evidence appraisal systems.

To do justice to its subject matter, the appraisal of qualitative evidence must operate at the level of evidence bases - groups of studies related by a shared relevance to their topic - and must take account of the interconnections between studies as well as their individual contributions to an evidence base. However, existing appraisal systems have very limited scope, both to appraise evidence bases as a whole rather than individual studies in isolation, and to take account of the ways in which studies can reinforce, illuminate, contradict and complicate each other. Integrating qualitative evidence into existing appraisal systems must either impede the value of that evidence, or threaten the basic structures of the system.

Note to selection committee:

As the working group's project is sensitive and ongoing, identifiable details of the organization and their work have been omitted here. This project will conclude shortly prior to the conference, which would allow a more detailed discussion of the case study during the presentation of this work.