

TOWARDS  
DEVELOPING  
AN  
INTEGRATED  
RESEARCH  
METHOD  
IN  
HUMAN SCIENCES

*EDITOR*  
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## Participant Observation in Anthropological Research

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NOR-AZLAN MOHD NOOR

"...it is a mistake to suppose that sociology should be modelled too closely on the natural sciences, or to imagine that a natural science of society is either feasible or desirable."

(Giddens, 1982: 4)

### Introduction

The central aim of employing certain research methods in social science study is in actual fact, to justify that the results generated from the data collected from the field is scientific. For this, issues like validity, reliability, and most importantly objectivity, to name a few, have to be taken into account. In Weber's phrase, social scientists must practice *value neutrality* in their research by which they are not allowed to bring his or her personal feelings to influence the interpretation of data. In other words, within this paradigm, the aim is to interfere as little as possible. Thus selection of an appropriate research design prior to, conducting a research is becoming crucial for social scientist. Different kinds of research will obviously demand different levels and kinds of involvement with human beings, but even the archival researcher has to gain access to documents and may well trade on shared understandings to do so (Ellen, 1984: 218). Spradley (1980), in discussing issues related to participant observation, has identified five different types of participation that range along a continuum of involvement from non-participation, passive, moderate, active, and complete participation.

The aim of this article is to address several issues surrounding participant observation as one of the research tools frequently and

commonly employed by social scientists, social anthropologists in particular, in understanding phenomena within society. To many social anthropologists, doing participant observation is not like "bird-watching technique." Researchers believe that there are always things that people do not say publicly, or do not know how to say. Thus, participant observation is also in a way, a research method employed to seek information by not asking questions. This is the central paradox of participant observation (Frankenberg, 1991: 50). In other words, participant observation allows researchers to take into account of not only what the informants speak but also as they behave at different times (Ellen, 1984: 220). Having said all these, transforming oneself into a participant observer is not an easy task. There are several problems that deserve discussion. The participant observer's first problem is to gain entry and at the same time, to be accepted into the community under study. This is significant for to what extent the data could be gathered from the field depends on the basis of his ability to be admitted to the situations he wants to study and, once there, to persuade people to let him stay. Whether entry becomes a problem depends partly on what the researcher has chosen to study and what research role he has decided to take (Gans, 1991: 57). In relation to this, Evans-Pritchard (1976: 126-127) tells us the amusing fact that he used the local oracles for regulating his affairs when he was with the Azande. The following example illustrates one such instance.

I never found great difficulty in observing oracle consultations. I found that in such matters the best way of gaining confidence was to enact the same procedures as Azande and to take oracular verdicts as seriously as they take them. I always kept a supply of poison for the use of my household and neighbours and we regulated our affairs in accordance with the oracles' decisions. I may remark that I found this as satisfactory a way of running my home and affairs as any other I know of. Among Azande it is the only satisfactory way of life because it is the only way of life they understand, and it furnishes the only arguments by which they are wholly convinced and silenced. Friends and neighbours would from time to time ask me to let them bring

fowls to consult my oracles about their troubles. I was always pleased at this sign of their trust. Also, I had opportunity on a number of occasions to observe other people's oracles at work. In the course of many months I made repeated observations of oracular consultations and had ample opportunity to acquaint myself with details of technique and interpretation. An investigation into the use of the poison oracle, like investigation into beliefs about witchcraft, does not require special informants. I could rely upon direct observation and could elicit commentary from any adult Zande when a point was not wholly clear to me.

Next, asking for entry requires the researcher to sell himself to the people whose group he wishes to enter. This, according to Carsten (1997), involves a complex process of interaction. In relation to this, Carsten (1997: 5-6) in her study of kinship in a Malay fishing community in Langkawi, Kedah for instance, describes the complex process of interaction as follows:

I was introduced into Sungai Cantik by a young man who held a clerical post in the local hospital, and who had close friendships with a large family in the village. The house of this family was already crowded, and they in turn recommended me to their kin in a neighbouring house. It was agreed I would lodge and take my meals there in return for a small rent. The family, whose income and standing were in the middle to upper range of the village, comprised an elderly couple, their married daughter and husband, and the daughter's three young children. I was to become 'foster daughter' (*anak angkat*) to the senior couple. The young son-in-law was the chief income earner of the household, his father-in-law being no longer strong enough to go fishing. Over time, I developed a particularly close attachment to my foster mother. I accompanied her as she cultivated the family's rice fields and vegetable garden and in her round of social visits, and under her supervision I learnt about Malay culture and about the proper behaviour expected of a young adult daughter.

The above description shows that one of the important characteristics in participant observation is to live in the community for a certain period of time, in which will enable the participant observer to be not just physically close to the native life, but at the same time, learning the language of the community under study, i.e., the local language. The latter is vital for many fieldworkers to facilitate the process of understanding of meanings as well as those for recording the behaviour, which is an intentional expression of that meaning.

After entry is achieved and the participant observer feels sure enough to develop a working routine, new problems develop. At this juncture, participant observers have to consider how far they may influence the setting in which they work, how far their perceptions and analyses of the settings are influenced by the personal relationships that they form with their informants, how far their work should be secret, and how far their personal attributes (for instance, age, sex, dress, social class, speech and ethnicity) influence the research. In short, participant observers have to assess their involvement and detachment in social situations (Burgess, 1991: 46). This is another dilemma encountered by the fieldworker. At one point, the participant observer wishes to remain detached from the subject-matter under study. On the other, however, the participant observer is under pressure from those he studies either to remain detached throughout the fieldwork period or otherwise. In other words, there is an internal tug of war, to decide how much spontaneous participation is possible without missing something as a researcher, or without endangering the neutrality which the researcher must maintain in the study. At this level of discussion, it is evident at one stage the participant observer is also driven towards involvement by participating in situations in which his or her values are being questioned. An example of this is, Laderman's (1983: 97-101) observation on *badi mayat* (an evil spirit emanating from a human corpse) case in Trengganu.

A diagnosis of *badi mayat* was a contributory factor in the death of Rohani's baby. She had been a large and healthy child, weighing eight pounds at birth, but after a month she began to cry when put to the breast and refused to nurse. She was changed to bottle feeding and given prepared baby

cereal to eat, but only accepted small amounts of food, slept most of the time and became limp and listless. At five weeks she looked gaunt and drawn. She cried weakly and coughed frequently. I persuaded Rohani and her mother to let me drive them and the baby to the nearest Health Center...Two weeks after our visit to the Health Center, the parents brought the baby to my house and asked me to drive the mother and child to the hospital. The baby was shrunken and her head looked like a skull. When we reached the hospital I asked Rohani to wait while I persuaded the paediatrician to see them right away. The usual hospital procedure involves a wait for several hours to see a resident. If the resident thinks that a further examination by a specialist is in order, the patient must wait again, or return for another appointment. From the looks of the baby, there was no time to waste. By the time I returned to the waiting area to tell Rohani the paediatrician would see the baby at once, she had been surrounded by a crowd of fellow patients. They assured her that since the baby had *badi mayat* there was no point in seeing a doctor. He wouldn't understand her condition or know how to treat it. I pulled them away from the crowd, to the paediatrician's office. He diagnosed the baby as severely dehydrated due to gastroenteritis, and ordered an immediate transfusion. I left them in the paediatric ward, hoping that the treatment had been started in time to save the child. Early the next morning I was awakened by Rohani's husband. He asked me to bring home his wife and baby. The child had died during the night.

The foregoing description has suggested that the methodology of participant observation consists of principles, strategies, procedures, methods, and techniques of research. In relation to this, according to Jorgensen (1989: 13-14), participant observation is defined in terms of seven basic features, namely;

1. a special interest in human meaning and interaction as viewed from the perspective of people who are insiders or members of particular situations and settings;

My field research among the Malays in Kampung Seda began in February 1996, and lasted till September 1996. Twenty households were selected for this study. However, this does not mean others in the village were excluded from my sample and data collection procedures. During the fieldwork, I conducted interviews with informants from the 20 households and others whom I met in the village. The 20 households selected from this study were mainly a source of reference that I used to rely upon when analysing the data gathered from the field.

During the initial stage of my fieldwork in Kampung Seda, I spent a great deal of time introducing myself, the research project, objective, and scope of study to the villagers. I attended numerous ceremonial feasts (*kenduri*) held in the village namely, wedding ceremonies, cradle feasts for newborn baby, funerals, *tahlil* or *kenduri arwah* (feast for the dead), singing together panegyric verses (*marhaban* and *berzanji*), *Maulidur rasul-s.a.w.* (celebrating the birthday of Prophet Muhammad-peace be upon him), and participating in congregational prayers at the *surau* (prayer hall) in the village. Occasionally, I was asked to lead (*imam*) the congregational prayer, particularly the daily night prayer, and *terawih* prayer in the month of *Ramadhan* (the Muslim month of fasting by day). My aim was basically to establish good rapport with informants and others in the village. I began to realize that in most activities participated in and observed, informant and others would gather and spend a few hours among themselves after each ceremonial feast, discussing various contemporary issues of the village. During these times I was able to collect extensive data on various issues. I learned about informants' utilisation of health services and their perceptions of health and illness, illness etiology, and types of illness that they commonly suffered, and other related issues of local interest. Occasionally, I used these opportunities to make cross-checks with them on certain issues which had arisen in my fieldwork. Similar procedures were used elsewhere within the village. Whenever I had the chance to meet villagers whether at their work place, coffee shops, towns, or even at their neighbours' house in the village, opportunities would be used to cross-check information. This triangulation procedure was very productive. All events observed and participated in daily in the village were recorded in my fieldwork diary.

2. location in the here and now of everyday life situations and settings as the foundation of inquiry and method;
3. a form of theory and theorizing stressing interpretation and understanding of human existence;
4. a logic and process of inquiry that is open-ended, flexible, opportunistic, and requires constant redefinition of what is problematic, based on facts gathered in concrete settings of human existence;
5. an in-depth, qualitative, case study approach and design;
6. the performance of a participant role or roles that involves establishing and maintaining relationships with natives in the field; and
7. the use of direct observation along with other methods of gathering information.

Of all the features listed above, the central aim of participant observation is to understand another way of life from the native's point of view, or as Malinowski put it, is "to grasp the native's point of view, his relation to life, to realize *his* vision of *his* world." (quoted in Spradley, 1997:19).

### Participant-observation – My Field Experience in Kampung Seda

The section that follows will be limited to some of the personal elements of participant observation which I have experienced in my own fieldwork in Kampung Seda, a Malay village in Perak, one of the states in Malaysia.

Early in 1996, I came back from United Kingdom and had an opportunity to undertake a study on the knowledge and utilisation of medical systems in one of the Malay villages in the state of Perak, Malaysia. Perak is one of fourteen states in Malaysia, located on the west coast of Peninsular Malaysia. For this purpose, the study was carried out in a Malay village, Kampung Seda (pseudonym) situated in the Bota sub-district in the district of Perak Tengah, Perak. Kampung Seda is located 54 kilometres from the city of Ipoh, the capital of Perak.

Within a few weeks of settling in Kampung Seda, I was already familiar with the village, and able to identify the leading personalities of the village who included the village headman, the *imam*, elderly figures who were responsible for many ceremonial occasions held within the village, the youth leader, and the Malay healers such as the *bomoh* and the *bidan kampung* (a village-midwife) of the kampung.

My interviews were semi-structured with informants and those leading personalities mentioned above and were divided into three sessions, i.e., morning, evening and night. In the morning, most of the villagers, particularly the men, were at work, leaving the elderly at home. As a result, I spent a great deal of time in the mornings interviewing the generation of my adoptive mother (aged 59 years) and those who were much older in the village. On the whole, they were informative and cooperative during the interviews which were conducted either at their homes, at the coffee shop, or elsewhere in the village, whenever they could spare some time for the purpose. Everywhere I went in the village, I initiated conversations with them on various matters related to health and illness. The main objective was to search the range of variation in patterns of thought and behaviour. On occasions informants were interviewed at their work place. Engaging with informants at work was significant, for the information gathered while it could be about their economic activities and beliefs about those activities, also included perceptions of health and illness while at work, and other related issues that were of interest to my research. These natural encounters were indeed very successful and yielded a lot of information for informants did not feel anxious or under pressure as was sometimes the case in formal interview sessions.

During the interviews I avoided using a tape-recorder to record any forms of conversation made with the informants. I wanted to make the research as unobtrusive as possible. The main objective was to ensure better response and "non-restrictive" discussion during the interviews. On many occasions informants refused to give a positive response once they suspected that the interview session was being recorded on tape. When they noticed a tape in my bag even though it was unused, they tended to watch their words, for they believed that the consequence could be damaging for them if sensitive issues were

highlighted in the discussion. To allay their anxiety I told them that all matters pertaining to the village itself were to remain confidential. Those who participated in the study were instructed not to answer questions they did not want to answer. For the same reason I avoided making any notes in public of materials gathered during fieldwork.

In a group interview in particular, informants and others tended to become tense and formal if they realized that what they said was being written down. As a result, I preferred to commit points to memory, and write them out later. I would spare a few hours at the *surau* or in any other convenient place within the village immediately after each interview, to write the information down in my notebook. This procedure was not always necessary for private interviews. In these latter circumstances it was much easier to make written notes during the session as the informant spoke. However, I did not write full notes while the informants were talking to me during the interview. What I normally did was to write just they key words in the notebook, i.e., words that could lead me later into matters discussed by informants. The intention was mainly to avoid any unpleasant or *kurang sopan* (impolite) situation during the conversation between myself and the informant involved. On the whole, during the interview sessions which were conducted exclusively in Perak-dialect Malay, I was impressed by the responses given by informants in the study. I gathered substantial ethnographic information from what I was told. At night, interviews were normally held at an informant's home or at the *surau* with the others after the night prayer. Occasionally, I spent time with youngsters either on the bridge or at other gathering places of theirs in the village eliciting information about their perceptions of health and illness. I also conducted interviews with two village midwives-cum-*bomoh* and *bomoh* who lived and practised among the villagers. These interviews helped me to understand their general professional status and gain information about the source of their knowledge on midwifery and village medical skills.

An attempt was also made to visit each of the 20 target households once a week. The main objective of the visit was to determine as nearly as possible all illness episodes that occurred among the community members, and to follow-up any action that was taken. An example of this is as in the case of Haji Aman aged 75 years old, one of the

informants in the village, suffered *lintasan* (wind spirits)<sup>1</sup> symptoms. The following narration was extracted from my field notes.

Initially, he felt dizzy at noon and took a rest for a couple of hours. Then, at 2.00 pm, he felt better and resumed working on the field till 6.00 pm. After work, he felt dizzy again, and the symptoms seemed a bit serious. According to his wife, Zakiah, her husband consumed locally-made pills bought from the grocery earlier and lay on the bed to rest. Then, at dusk Haji Aman requested Zakiah to prepare some food for their dinner. He enjoyed the dinner with Zakiah, and did not say anything of the illness. He later told Zakiah that he wanted to lie down on the bed and rest. At 10.00 pm, Zakiah heard a groaning sound from her husband's room. She attended to her husband, and tried to wake him up, but there was no response. Haji Aman lay unconscious on the bed with both eyes closed. Zakiah went to her neighbour Rahmat, to seek for assistance, and to look into the matter, but again there was no response from Haji Aman. Then Rahmat went to seek for Long Siah, a *bidan kampung-cum-bomoh* to diagnose the illness. Long siah came, recited some spells, and eventually diagnosed the illness as *terkena lintasan* (accosted by an evil spirit). Long Siah believed that there was nothing much she could do further to alleviate the illness. The symptoms suffered were serious. In the meantime Haji Aman's daughter, Rohana, who was also a *bomoh* attended to her father. She began reciting *jampi serapah*, and giving *salam* (greeting) to her father's left ear. She massaged both Haji Aman's arms, feet, chest and stomach, but failed to improve his health. Haji Aman did not show any response to the treatment administered. He still lay unconscious on the bed with both eyes closed. The treatment continued with *jampi serapah* (uttering spells), several herbal remedies, and *air penawar* (holy water) until 5.00 am, but to no avail. Rohana said her father had symptoms of *lintasan*. Eventually, Rohana, Zakiah, Helmi (Haji Aman's eldest son) and other close relatives decided to send Haji Aman to the hospital for

further medical examination and treatment. Unfortunately, the doctor on duty was unable to diagnose the exact symptoms of the illness. Haji Aman was pronounced dead several hours later. The general consensus that he had indeed had an experience of *lintasan*.

However, the above description was not always possible for all cases. Interview sessions were not confined to their household compound, but took place whenever it was possible and they felt free to be interviewed. In order to resolve the matter, each household was given a health diary to record anything that they and other family members would label as *sakit* or *tidak sihat* (unhealthy). They were asked to record any health problems suffered by any household members, no matter how transient or trivial, in their own words and style. Those involved were given a brief explanation of how to go about writing a health diary for their household. They were then asked to keep the completed health diary for further check-up.

This approach of using a health diary is similar to Tonai's (1989) used among rural residents in Japan. This method provided a patient-oriented approach revealing the day-to-day basis of individual experience. It enables participants to record their health status using their own words instead of employing biomedical terms. The patient's description is determined by his or her own social and cultural values and attitudes to health and illness problems. Furthermore, it provides more accurate information with a time frame for the various components or stages of the illness process and the patient's decision-making procedures. Results show that folk medicine or alternative practitioners played significant roles in the health-seeking process among the rural residents in Japan. However, for our purposes the significant aspect of Tonai's study is not so much the findings observed among the rural residents in Japan, but the adoption of the health diary method as an approach that could be used for non-Western culture (Tonai, 1989: 413-416). Roghmann (1972) in his argument about the health diary method, states that the diary approach enhances a more accurate description of the events under investigation, particularly those related to the health and illness behaviour of a given population. The approach is significant when the temporal sequence of the events described is an



element of consideration in the study. The events include, for instance, a patient's knowledge about illness, attitudes towards taking medications, occurrence of symptoms, and encounters with medical profession. In Roghmann's experience a health diary study enabled informants to describe in detail their daily acts of health and illness behaviour in a given situation (Roghmann et al., 1972: 143-145).

In Kampung Seda, during the interviews in the village, for every episode of illness detected I used a list of open-ended questions to interview informants. These open-ended questions were basically guidelines prior to conducting the interview session and represent what was sought in relation to each episode of illness suffered by informants and their household members. The questions attempted to establish and to discover informants' health and illness patterns of behaviour, difficulties faced in relation to therapeutical choices, and what had motivated them in making decisions either to opt for one or more of the medical resources available rather than for any other. Other related information gathered during home visit interviews included closed questions designed for this study. These closed questions were basically the biodata of the informants and their household members, for instance; names, age, marital status, educational background, types of occupation, family size, household members, number of children and names, and place of birth. These closed questions assisted me in determining informants' general socio-economic background in the village. However, the sequence of these closed and open-ended questions varies slightly from one informant to another. Sometimes had to make some adjustments to obtain the relevant information from informants.

### Conclusion

The foregoing discussion highlights several issues. The first is the dual role of outsider and insider gives the participant observer greater opportunity of being able to understand phenomena within the society. The second is, through participant observation the researcher is able to describe what goes on in the setting, and also able to identify the underlying meanings of the actual problems within the setting under study. This is vital if we wish to consider this participant observation as

one of the important methods in designing a policy with regard to understanding various social processes that occur within the setting under study. In actual fact, this approach is beneficial for *dakwah* programme, i.e., understanding others, one's culture in particular prior to disseminating Islam to them. In relation to this, I agree on the fact mentioned by Jorgensen (1989: 12-13) that participant observation is especially appropriate for scholarly problems when little is known about the phenomenon, there are important differences between the views of insiders as opposed to outsiders, the phenomenon is somehow obscured from the view of outsiders like religious ritual, and finally, the phenomenon is hidden from public view like religious organisations.

### Endnotes

- 1 See Spradley (1980: 58-62) for details.
- 2 See Spradley (1980: 58-62) for details.
- 3 The *badi* of a human corpse. If a pregnant woman is exposed to a corpse, Malays believe that her baby may be born with *badi mayat*, a sickness whose symptoms mimic a corpse's appearance, and which usually ends in the baby's early demise. See Laderman (1983) for details.
- 4 See Jorgensen (1989: 12-25) for further discussion.
- 5 The precise location of Kampung Seda is not disclosed in order to protect the privacy of the villagers.
- 6 In Malaysia foreigners or strangers in a Malay village need to introduce themselves before they are allowed to proceed with the fieldwork. The *ketua kampung* (literally, village headman) who is responsible for all matters related to the village has to inform various local authorities, namely the district office, police, and other related governmental authorities, of the presence of the researcher.
- 7 Gimlette (1971: 55) refers to this as *jin linitasan*, a restless, ever-wandering spirit that haunts groves at nightfall. It is supposed to resemble the human form, but to dart about like a will-o'-the-wisp.

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## Quantitative Content Analysis as a Method of Research in Mass Communication

FAZAL RAHIM KHAN  
MASRUR ALAM KHAN

### Introduction

Although its earliest use as a quantitative tool of textual analysis has been traced back to the 18<sup>th</sup> century Sweden,<sup>1</sup> specific use of quantitative content analysis as a method of mass communication research may be said to have occurred around the end of the 19<sup>th</sup> century.<sup>2</sup> An earliest content analytic study examining the focus of the articles of the New York newspapers is cited in Krippendorff, op. cit. Content analyses were soon used to describe the content of motion pictures in the Payne Fund Studies<sup>3</sup> - the first authentic series of scientific investigations of the phenomenon of mass communication in the US - and to radio and public speeches.<sup>4</sup> However, content analysis could not emerge as a major technique of mass communication research until after the end of World War II, when many studies were done to study propaganda in newspapers and radio. Bernard Berelson published *Content Analysis in Communication Research* in 1952, which is believed to have signaled the recognition of content analysis as a genuine tool of scientific research in the discipline of mass communication.<sup>5</sup>

Ever since, the techniques of quantitative content analysis have been "one of the dominant, if not the most dominant methodologies employed in mass communication research".<sup>6</sup> Numerous content analytic studies examining many research questions from different areas of mass communication research have been published. Indeed, studies employing the methodology of content analysis form a sizable chunk