

42. Rapping on RAP: Selected comments and responses from the conference

All plenary sessions of the conference including most comments by participants were audio taped by PAHO technicians. A selection of the comments made after individual sessions was placed without attribution throughout this volume. However, when these comments were reviewed, a number of recurrent themes surfaced across the various sessions and panels. In order to provide the reader with additional insight as gained from the participants, major themes were listed in this chapter and a selection of relevant comments placed under each. What were originally oral comments have been shortened in many cases and edited. Thus, these comments should not be seen as direct quotes but rather synopses of the ideas brought to these themes by various participants. - Eds.

Qualitative vs quantitative: Is there really a debate?

David Nyamwaya, AMREF, Nairobi:

RAP should be seen not as a replacement but rather as a complementary approach to KAP and other methods. Where it has been misunderstood as a replacement for other methods, it has been vigorously attacked.

Susan Scrimshaw, School of Public Health, University of California, Los Angeles:

Operations research is more specific than RAP in that it is used primarily to test interventions. Operations research does not usually use an anthropological approach but there is some overlap.

Yongyout Kachondham, Mahidol University, Thailand:

RAP is usually done within a specified, limited area and is at best indicative of the situation in that area. RAP is not a substitute for survey research, but RAP is very helpful in formulating working hypotheses. RAP can be used to help survey researchers in fine tuning their questionnaires to better achieve validity and reliability. RAP can also explain what statistical significance has to do with the real world.

Suriya Smurkupt, Khon Kaen University, Thailand:

RAP is inductive rather than deductive, it starts with facts. The amount of time a RAP study will take to complete depends on the issue. For example, I used RAP to try and understand why compliance of pregnant women taking iron is so low. I found out important information that could never have been obtained through a survey or questionnaire. Sometimes critical information may be obtained quite easily using this very different approach.

Yongyout Kachondham, Mahidol University, Thailand:

From the perspective of the paradigm of ying and yang, qualitative research is like yang, feminine, soft, like the moon. Quantitative research is like ying: masculine, strong, like the sun. We need to have both to solve the complex questions involved in development.

Scarlett Epstein, Innovative Development Research, U.K:

Is it possible that we may face a danger of moving from macro-economics being the dominant form of data for planning to a stage where qualitative information is dominant and quantitative data is pushed under the carpet?

Michael Cernea, World Bank:

Much as I support the value and use of qualitative data and the increased use of RAP, I do not see changing the predominance of quantitative data on the agenda of the World Bank at this time.

Who can do RAP: How low can you go?

David Nyamwaya, AMREF, Nairobi:

What purpose is served by involving health workers in data collection? If they are involved, shouldn't they be involved from the beginning and participate in the decision as to whether the research was necessary? This raises the question of who owns the results of the study.

Robert Chambers, Administrative Staff College of India:

How far down through the system can the information gathering be pushed? How do you do data interpretation at the village level? We find the villagers to be highly knowledgeable and efficient data gatherers if given appropriate tools.

Judi Aibel, Senegal:

The process needs to be pushed further down through the system. There is a role for personnel at lower levels. However, the time framework dictated by consultancies does not usually allow going as far down into the system as should be the case. In a shortened time frame the objective can be to get programme planners to go into the community to take community opinion into their planning process. The process is seldom perfect but it shows a different approach than the normal planning from behind the desk.

Health staff involvement is important for several reasons. Involvement by decision makers gives them better ownership of the data. The involvement within the community setting by the service providers was important because the data gatherers were women who work on a day-to-day basis in the community, and they enhanced the interpretation of data obtained by the sociologists.

Linking RAP to action and policy

Michael Cernea, World Bank:

The use of RAP appears to focus on information needs by project leaders. But there are also higher levels of decision makers. What in the "tool box" of methods is most useful for these higher cadres?

Josette Murphy, World Bank:

The agencies using RAP must first focus on what are the key information needs of top decision makers for management and resource allocation. Then we ask what are the optimal tools for gathering the information. What are the tools that will give you information with sufficient precision and within the proper time frame?

The "Murphy paradigm" states that information should be good enough and soon enough; good enough to use for what you need to do with it and soon enough so it is available when decisions must be made.

Susi Kessler, UNICEF, New York:

One use of RAP, particularly with UNICEF, may also serve to generate commitment.

Shubhada Kanani, University of Baroda, India:

There is a need to develop better link RAP to interventions for programme and project monitoring, and evaluation. We need better guidelines in this area.

Charles Teller, Pragma Corporation:

One of the important uses of this methodology is that it is a participatory approach with the potential to link the community with decision makers. What would be useful to know is what changes have been made by the decision makers and by the community participants on the basis of their participation in or exposure to RAP studies and data generated in this manner.

Susi Kessler, UNICEF, New York:

There may be a way to begin a sub-network on the use of RAP in the service of environmental questions.

Josette Murphy, World Bank, Washington:

As institutions concerned with development assistance we should encourage local institutions to coordinate and undertake whatever research is needed. But I am concerned that foreign research

teams often do work in a country and then leave, without building capacity. The decision on types of research and major information needs should be done by the national decision makers in cooperation with their own technical staff and with their superiors. Then the technical staff in charge of efforts such as RAP should make the decisions on what type of methods should be used and in what form and in what time frame. They should also consider how to package results so that it will be clear and useful to the decision makers.

Scarlett Epstein, Innovative Development Research, U.K.:

While we've all done our work as anthropologists, we do not include very much discussion on our ability to effectively communicate. This is an area where we make many assumptions but need to discuss.

Josette Murphy, World Bank:

It would be useful to add another set of actors in the context of using RAP. In addition to the researchers, the methodological specialists, and in addition to the people themselves to act as key participants, we should not forget the decision makers in the developing countries in which we work. It is those people who decide on priorities and resource allocations within their own countries. Such decision makers may be from the governmental or nongovernmental institutions who are providing health services to the rural client.

- We need to remember that they are making the decisions, on the basis of whatever information is available to them at the time.
- It is important that the methodological specialists remember to work with them first, to define what information they need, when they will need it and for the types of operational and political decisions.
- We should talk to them about the choice of methods we will use to gather information in relation to what types they will find acceptable and can use.
- We need to show them that the information gathering "tool kit" is much wider than they may have supposed. We need to show them that RAP may be valuable to them, in complement to other types of methods.
- It is the decision makers that should be foremost in our minds as we consider the choice of problems and questions that will be asked.
- It is consideration of the decision makers also that will help us at the other end of the research process to tell us what approaches to use to communicate the information we gain clearly and effectively into the decision making arena.
- The development agencies have an important role to play in helping decision makers in this area, and in showing the researchers and decision makers how to use RAP for themselves wherever appropriate.

- There is a need to show that the RAP method can be used, not in a quick and dirty fashion, but in a manner that is both rapid and useful.

Scarlett Epstein, Innovative Development Research, U.K.:

It appears we are speaking of using RAP to serve two very different masters: the community, and planners and managers. Is it possible to serve both with the same methods and same approach?

Ellen Messer, Brown University:

RAP was originally seen as serving three masters, the community, planners and providers. Part of RAP's usefulness is in sensitizing each of these groups. This should also include letting the community know what the constraints of the other levels are.

Susan Scrimshaw, School of Public Health, University of California, Los Angeles:

Just because RAP uses some anthropological techniques does not mean that all anthropologists will embrace RAP. Anthropologists around the world want funding for traditional anthropology and may resent funding for RAP. In using RAP you cannot just grab the nearest anthropologist.

Theoretical foundations: Why are they important?

Suriya Smutkupt, Khon Kaen University, Thailand:

Because there are normally scientists from different disciplines on a RAP team, there need to be some theoretical guidelines that help bring them together.

Susan Scrimshaw, School of Public Health, University of California, Los Angeles:

Sociology, public health, psychology, applied anthropology, and economics may all come together in RAP. There has been some feedback into the disciplines but we need to develop it further.

Training: How much, how long and who?

David Nyamwaya, AMREF, Nairobi:

It is critical to stress the need for proper training in RAP both for non-anthropologists and for anthropologists. Some non-anthropologists seem to wake up one morning thinking that they can go out and begin using RAP methods such as focus groups effectively. For them, there is a need to understand the basic methods used for data collection in anthropology. It is dangerous to use methods like focus groups without proper training. Second, there is often an assumption by anthropologists that because they are anthropologists, they can by definition use RAP. Because

RAP is itself a subculture method, developed over time, anthropologists need to have more humility in this area and accept that they can benefit also by some training.

Charles Teller, Pragma Corporation:

A big issue in RAP methods and techniques is the level of training of those who do RAP. Probably many do not need a graduate degree in anthropology. Defining the involvement of grass roots and action groups seems important.

Joseph Valadez, Harvard Institute for International Development:

There are some portions of RAP methods which can be used to gain knowledge which can inform policy and plan interventions. There are also methods which can be used to identify families which in turn can identify families who are at risk for various health problems. The protocols for these would be very useful. How specialized is the training for those who become RAPers? Do the persons have a specialization? This would be important in organizing work within a Ministry of Health. Can RAP be used within a decentralized system or do people have to be a specialized vertical group within a ministry?

Susan Scrimshaw, School of Public Health, University of California, Los Angeles:

Based on the achievements so far and some of the work that has gone on in the field, there is now a readiness to develop better systematic guidelines on using RAP for intervention related work.

Nevin Scrimshaw, United Nations University:

RAP does have a disciplinary base and there are pitfalls that are not self evident to the untrained.

Joseph Valadez, Harvard Institute for International Development:

There is reluctance of public health practitioners to go to the field and talk to the people. This implies a problem of pedagogy in public health and suggests that an apprenticeship should be included. Maybe UNICEF could help fund such efforts.

Sampling theory and RAP

Joseph Valadez, Harvard Institute for International Development:

Sampling theory is not unimportant to RAP. While random sampling is generally not used, there is a strong need for anthropologists and other RAP users to consider some of the issues of sampling theory. An understanding of sampling theory would help them to determine what part of the population they will interview and whose knowledge and opinions they want their appraisal to reflect. RAP should avoid a simple use of convenience sampling. Purposeful

selection with criteria should be used for selecting interviewees, etc. and the criteria should be explained in the methodology discussion of their reporting.

Jacques A. Bernard, UNICEF, Dakar:

It would be useful to know the criteria on which random sampling methods are rejected in favour of RAP in the 16 country nutrition study.

Susan Scrimshaw, School of Public Health, University of California, Los Angeles:

Random sampling and survey methods were normally chosen in those situations where there was a basic infrastructure of information on a community. This would include such things as maps, demographic data, house numbering, birth and death registration, etc. However, areas with problems of nutrition are frequently the same types of areas that are missing this type of information base. When faced with a situation where it would take six weeks to set up a reasonable sample, it was decided that it would be more useful to spend that period in the community using RAP to speak with and gather information from families and groups.

Joseph Valadez, Harvard Institute of International Development:

One of the limitations of survey research is that the list of variables investigated is based on the previous knowledge and assumptions of the researcher. Potential knowledge gained is predefined by this list. RAP has a stronger potential to allow the community to identify additional variables, lessening the tendency for the method to be constrained by its own assumptions. With RAP, one can generally find new variables.

Susan Scrimshaw, School of Public Health, University of California, Los Angeles:

The checklists which are discussed in the RAP handbook should not be seen as restrictive. These checklists should be variable and should shrink and grow depending on the situations, both before and during fieldwork.

David Fitch, INCAP, Guatemala:

INCAP has developed a sampling procedure that relies on a portable computer to do random selection during a walk through of the village.

RAP's expanding uses and dimensions

Samir Basta, former head of Evaluation Office, UNICEF:

RAP is being used to assess whether Growth Monitoring is working. There have been studies done in eight countries and will be used as the basis for a policy discussion.

Dr. Carlos Daza, PAHO:

We should be looking for ways to extend or expand the use of RAP to work more efficiently and effectively with people at the grass roots. How can we use it to make assessments of health situations and to promote community involvement and participation in health?

Robert Chambers, Administrative Staff College of India:

Many of us have been brainwashed by our professional training, education and activities into thinking we are the only people who can count. We have tended to conclude that rural people are experts on their culture, beliefs and subjective experiences but are not good at counting or estimating. This tends to obscure what anthropologists have known on and off, that rural people, both literate and illiterate, have a good capacity to count, to estimate, to recall quantities, to estimate trends to rank and to score. However, there are important preconditions to strong data gathering in this area. First is the critical need for an ability to establish rapport. Without this, the value of participatory quantification work is very limited. Second, if you wish to have rural people quantify and estimate, you must develop a locally appropriate and relevant set of physical materials, such as seeds for counting, sticks broken into various lengths, stones for different seasons, which people can quantify against. This area of participatory quantification is a frontier and extremely interesting.

Jacob Matthai, UNICEF Representative, Oman:

The RAP studies in Oman were not done to develop statistical information. It was to help transmit the attitudes and behaviours of the community to various programme and decision making groups. We often find that plain statistics do not influence governments positively; people are tired of being shown what is wrong. The reasons why something is wrong are very important. RAP also has a variety of applications and in telling us why people are behaving in certain ways, it provides an excellent lubricant for social mobilization. It has been extremely useful in the Oman UNICEF programme.

How rapid is RAP?

Susan Scrimshaw, School of Public Health, University of California, Los Angeles:

The question of "why RAP" is a very important one. In many ways RAP isn't rapid at all, because there are often years of training and work in the community by the investigators so they can then do RAP. When it is said that you need to take people experienced in the culture and method in doing your studies, we really mean it. When people have a long experience in the community and have experience in RAP, they can go in and do these studies more quickly. Existing ethnographic studies and epidemiological experience also help. Also the more you RAP the faster you RAP. As you do these projects you learn where you can go faster.

Shubhada Kanani, University of Baroda, India:

The pace with which a RAP study can be done may be based in part on the priority placed by the problem to be studied by the community where you are working. Available manpower may also influence the RAP period. For example, a study on water, which is a high priority for most rural people may be able to be completed much more quickly than a study on a lower priority area such as problems of health promotion.

Joseph Valadez, Harvard Institute of International Development:

The "R" in RAP needs to be clarified. There are two types of work that seem to have been done and need to be reported on. The first is that the issue of how rapid something is needs to be demonstrated both in terms of the time and in terms of the person power it takes to perform the tasks compared to quantitative methods. RAP is often being compared to the time normally taken by traditional anthropological studies. RAP appears to be a method preferred for working on important public health questions in an urgent manner compared to traditional study methods from anthropologies. RAP may provide an opportunity for communities to participate and it provides formative information for programme planning. What is most important is the type of information that you are able to get and provide to decision makers. It would be good to have some information on how long a RAP will take for decision makers in health and primary care. These people need to know how much time it will take for their staff to participate in or carry out RAP within the context of their other duties.

Vijaya Shretha, Nepal:

Survey methods take a long time and are expensive. It could take from six to nine months to get reports and by that time the work had already begun, based not on new information but on what had been done before. Still, speed is not the only consideration; we need information on what is acceptable to the community.

Elena Hurtado, INCAP, Guatemala:

RAP may not be quicker than quantitative methods, but it provides different yet complementary information. It is faster than normal anthropological methods.

Clarice da Mota, Federal University, Brazil:

There are strengths and weaknesses of having or not having in-depth knowledge of the society in which you work when conducting RAP studies. You must have some knowledge. But if you are very familiar with a situation you may be hindered by your assumptions. If you are relatively unfamiliar you find yourself being very careful. If you go into a different environment, you have to rely on the knowledge of other people and you do have to work with them. Once you work with a translator, a local person, not very well educated, you are drawing valuable ethnographic information from that person. Ideally, you should have much more time for familiarity, but to maximize the quality of time spent is to use local resources well and carefully.