



FREELISTING: A QUALITATIVE INTERVIEWING TECHNIQUE



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Photo: <https://fuelcycle.com/blog/in-depth-interview-mistakes/>

CHERP

CENTER FOR HEALTH EQUITY
RESEARCH AND PROMOTION



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WHAT IS FREELISTING?

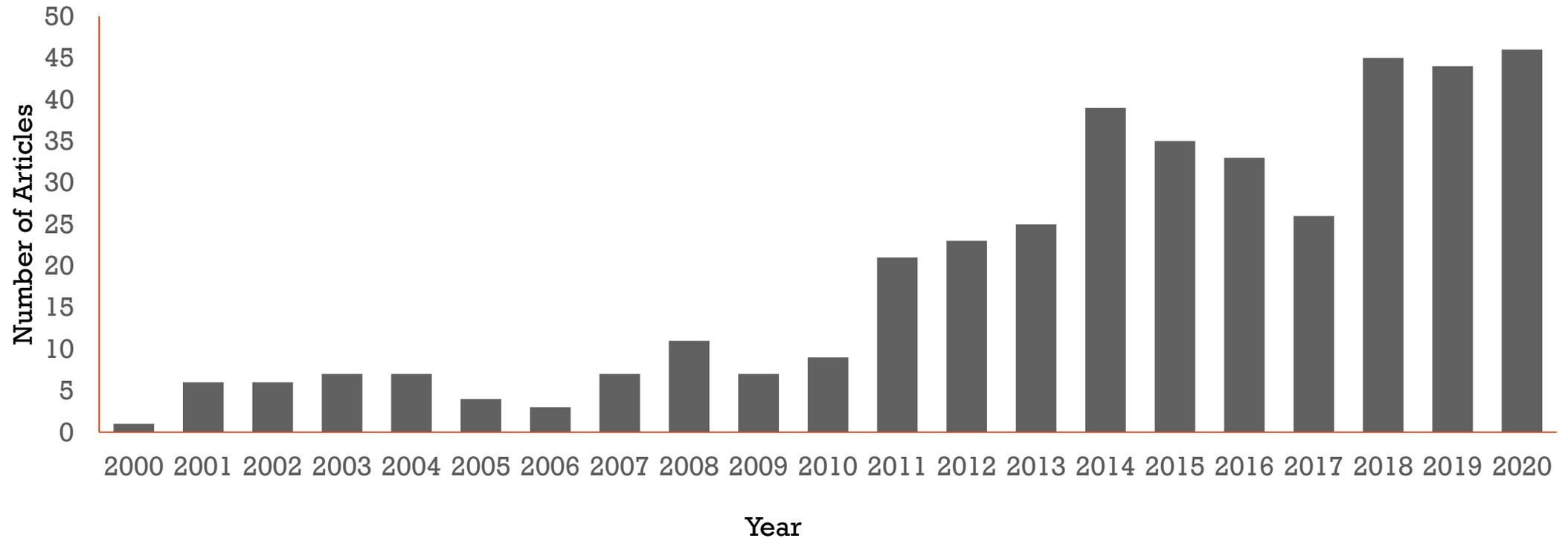
Freelisting is a semi-structured interviewing technique in which each respondent is asked to list all the words they would use to describe a specific construct (for example, What comes to mind when you think about staying healthy while in school?)

These responses are combined across all participants in the group to identify all the salient constructs and boundaries of a particular domain for members of the group.



FREELISTING IN THE LITERATURE

Number of Web of Science Articles found for the search term "free listing" or "freelisting" as a topic each year from 2000 to 2020

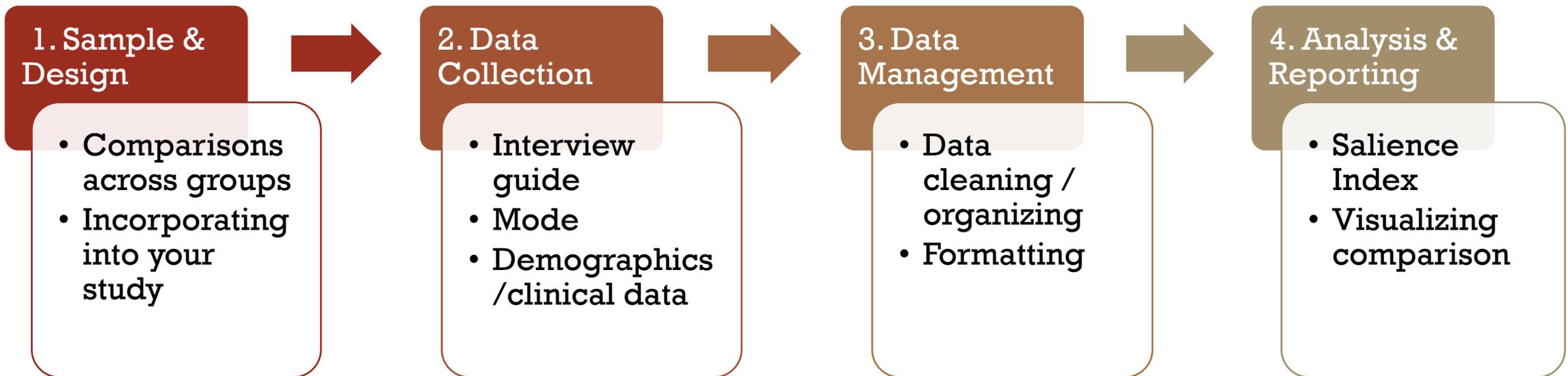


WHY USE FREELISTING?

- It elicits unimagined, spontaneous responses
- Can be rapidly collected, analyzed, and quantified.
- Versatile (topics, populations, purposes)
- Incorporated into mixed methods studies or used on its own
- Possible uses: preliminary data for a proposal, community needs assessment, precursor to survey development or developing health promotion materials / teaching curriculums



FREELISTING STEPS



SAMPLE & DESIGN

- Design the freelisting study to examine specific populations' perspectives and compare across domains or groups.
 - Between different constructs: “Good” vs “Safe” Driver
 - Between different groups/cultures: Latinx versus non-Latinx and caregiver / non-caregiver perceptions of Alzheimer’s Disease
- Use freelisting in mixed methods or on its own
 - At the beginning of a study: provides definition and language of topic
 - Mixed into a study as part of a sequential design
 - Excellent tool for working with communities



DATA COLLECTION

- Develop an interview guide
 - Ask a diverse group to review the guide
 - Pilot the guide
 - Questions should aim to elicit as long a list of items as possible
- Can be collected in person/intercept, over the phone, electronic survey
- Collect additional characteristics (demographics, clinical) to sort lists for comparisons (e.g. race, asthma control)



DATA COLLECTION — FREELISTING QUESTIONS

Population	Example Question
People with asthma	List all the things that make your asthma act up.
Attending physicians	List all the things you can think of that represent “value in healthcare”
Caregivers / patients	List all the words that come to mind when you think of symptoms/causes of Alzheimer’s Disease
Urban community members	Tell me all the reasons you can think of that make it likely for you to eat fruits and vegetables.

DATA MANAGEMENT & CLEANING



- Review raw lists to combine root words, synonyms, and similar concepts.
- This can be done in multiple iterations.
 - Round 1: group grammatical forms of the same word (e.g. “smell” and “smells”).
 - Round 2: synonyms can be combined (e.g. “scent” and “smells”)
 - Round 3: similar concepts can be grouped (e.g. “perfume,” “deodorant,” “scent” and “smell”)



DATA ANALYSIS - SALIENCE

- The goal of the freelisting analysis is three-fold:
 - ✓ to identify the most salient items across multiple respondents' lists
 - ✓ to present only the terms on the list that are truly shared by the group(s)
 - ✓ to develop a manageable list that is not too long

Smith's S, the "salience index," is the main statistic used for analyzing freelists

$$\text{Freelist salience of an item (Smith's } S) = \frac{\text{sum of the item's percentile ranks}}{\text{total number of lists}} = \frac{\sum \left(\frac{L - R_j}{L} \right)}{N}$$

DATA ANALYSIS — ANTHROPAC OUTPUT

List all of the things you do to keep yourself healthy.

Item	Frequency (%)	Average Rank	Salience
right_diet	80.6	2.86	0.53
physical_activity	66.7	3.13	0.444
take_medicine	47.2	3.18	0.293
drink_water	33.3	5.5	0.183
sleep_rest	13.9	3.6	0.089
doctor	16.7	3.5	0.081
faith	11.1	2.75	0.068
avoid_triggers	13.9	5.2	0.06
keep_house_and_yard_clean	11.1	6.25	0.06
don't_overextert	11.1	3.75	0.058
hobbies	8.3	3	0.056
avoid_animals	11.1	5.5	0.054
avoid_environmental_triggers	11.1	4.5	0.052
no_smoking	5.6	1.5	0.046

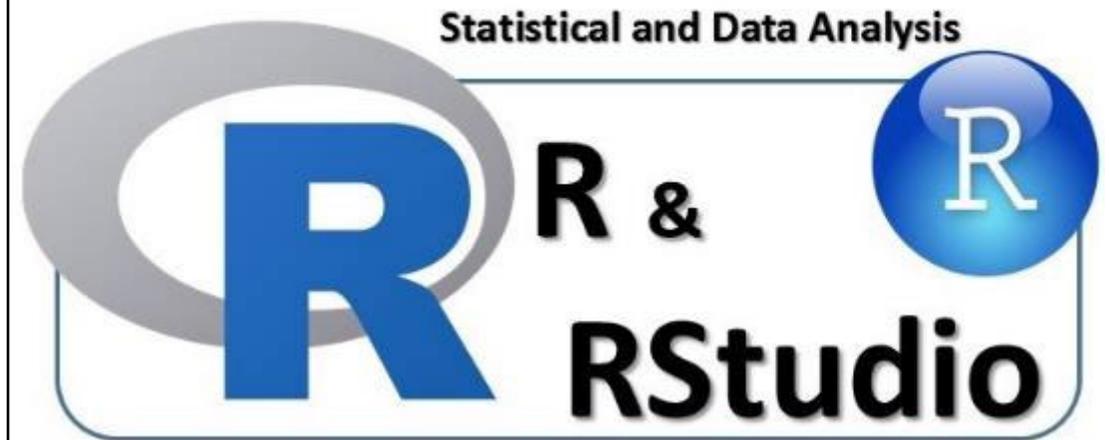
SOFTWARE

Anthropac



<http://www.analytictech.com/anthropac/anthropac.htm>

R - AnthroTools



<https://anthrotools.wordpress.com/>

A man in a dark military uniform with a white peaked cap is saluting. He is standing in front of a large, multi-story brick building with many windows. The building has "VA MEDICAL CENTER" written on its top. There are green trees in the foreground and background. A stone wall is visible at the bottom of the frame.

VA MEDICAL CENTER

**VETERAN EXPERIENCES OF
HEALTHCARE AT THE INTERSECTION
OF COVID-19 AND RACISM**

Principal Investigator:
Natalie Lee, MD, MSHP

GOAL



- To explore Veterans' experiences with VA healthcare since the pandemic



SAMPLE



- Recruited via mail and screened by phone
- 48 Veterans receiving primary care at the Corporal Michael J Crescenz VA Medical Center
- All participants had a diagnosis of hypertension
- 12 of each group:
 - Black men
 - Black women
 - White men
 - White women



FREELISTING INTERVIEW GUIDE

- **List all the feelings that come to mind right now when you think about receiving healthcare at the VA**
- **List all the challenges you faced in receiving healthcare at the VA in the past year.**
- **List your feelings or attitudes toward virtual visits at the VA.**
- **List all the changes you want to see in VA healthcare after this last year**
- **List all the ways the issues of race and racism in the past year impacted you.**
- **List all the ways the issues of race and racism in the past year impacted your experiences of healthcare at the VA.**



DATA COLLECTION



- Interview guide was pilot tested with a convenience sample of patients
- Collected demographic information including housing, income, and public assistance
- Interviews completed over the phone between August 2021 – February 2022
- Interviews were audio recorded and transcribed
- During each interview, participants were asked a practice question first followed by 5 interview guide questions
- Participants were asked for clarification after completing each list



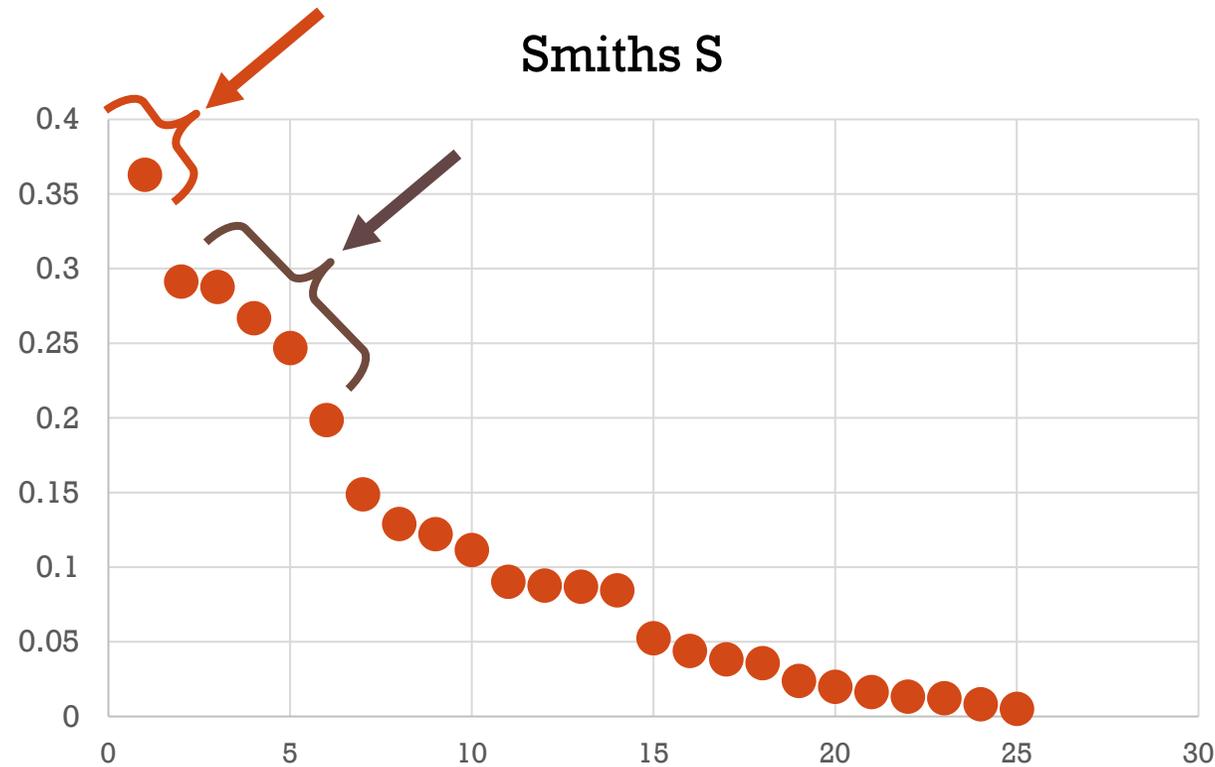
FREELISTING ANALYSIS



- Data were reviewed by the research team to standardize categories of responses
 - combine root words (e.g. “frustrated,” “frustrating”)
 - synonyms (e.g. “happy”, “glad”),
 - similar concepts (e.g. “excellent doctors” and “professional in their craft” combined into a single category under “good medical care”)
- Using data analysis software (R), the lists were sorted by item frequency and a **salience index** was generated for each item
 - The formula takes into account the frequency of the words on the lists as well as their rank order.

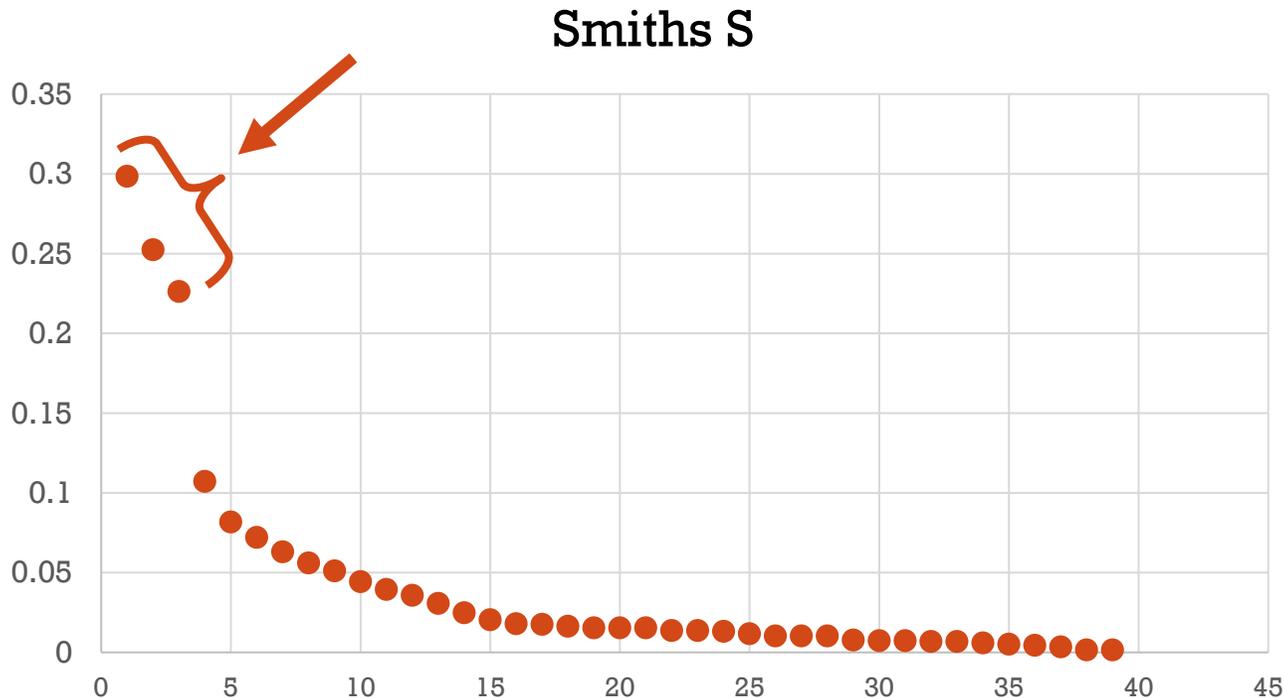


List all the feelings that come to mind right now when you think about receiving healthcare at the VA



- like
- inconvenient/onerous/challenging
- good medical care
- convenient/efficient/helpful
- anxiety/stress/fear
- nice service/courteous/respect
- care/listening to patient
- horrible service/disrespect
- location not convenient
- trust/safe/confidence

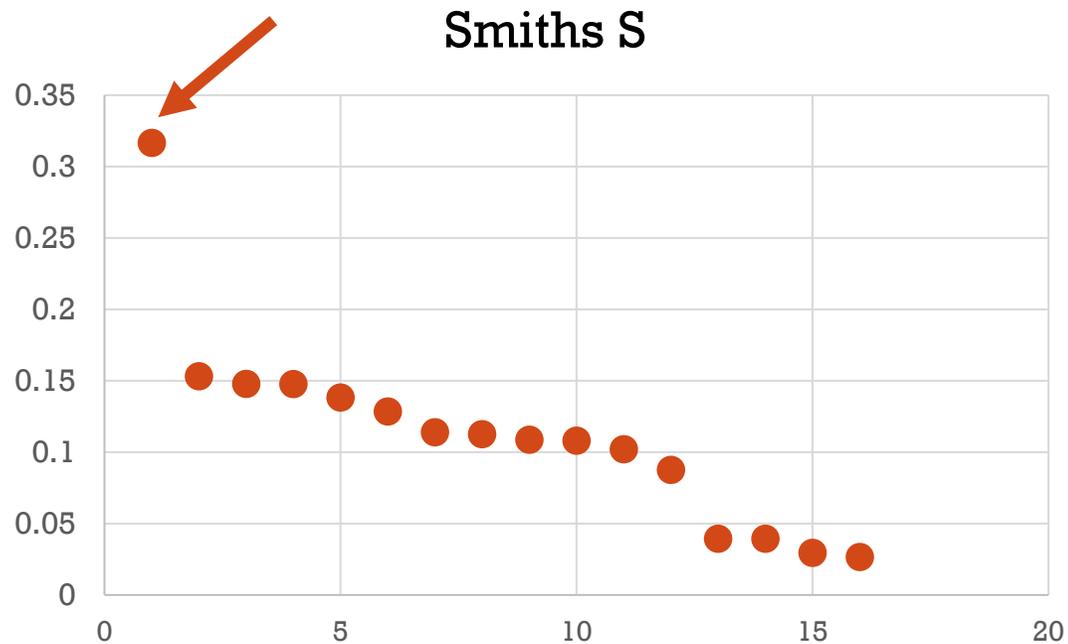
List all the challenges you faced in receiving healthcare at the VA in the past year.



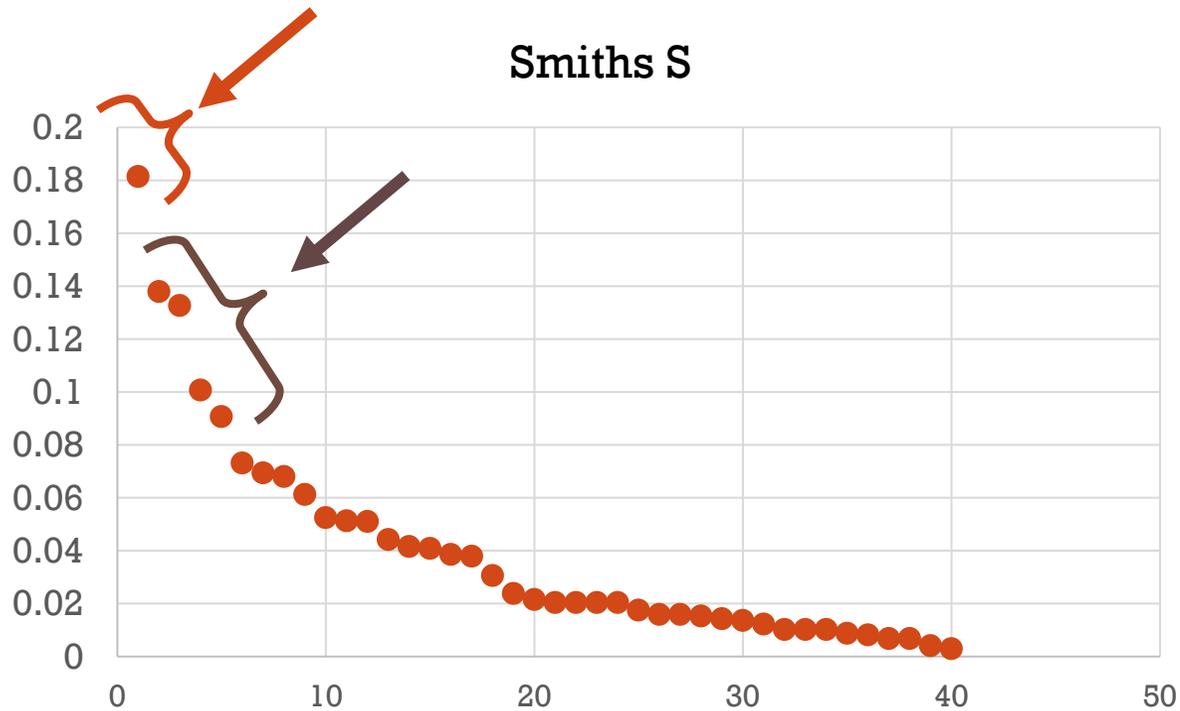
- long waits/delays in getting care
- no/limited in-person care
- few/no challenges
- transportation/traffic challenges
- feel unheard/ignored/shut down/uncared for
- having to use teleconferences [phone/video] instead of in-person consultations
- impersonal/not individualized
- difficulty getting help/ right information
- [hard] to get somebody on the phone
- delay in getting meds by mail

List your feelings or attitudes toward virtual visits at the VA.

- good experience/comfortable/great option
- beneficial/helpful/supportive
- convenient/easier/time-saving
- technology problems on both sides
- impersonal/cursory/feel like a number
- prefer in-person
- dislike virtual/negative experience
- appropriate for some visits/have their place
- discomfort/worry
- better than nothing/okay but limited

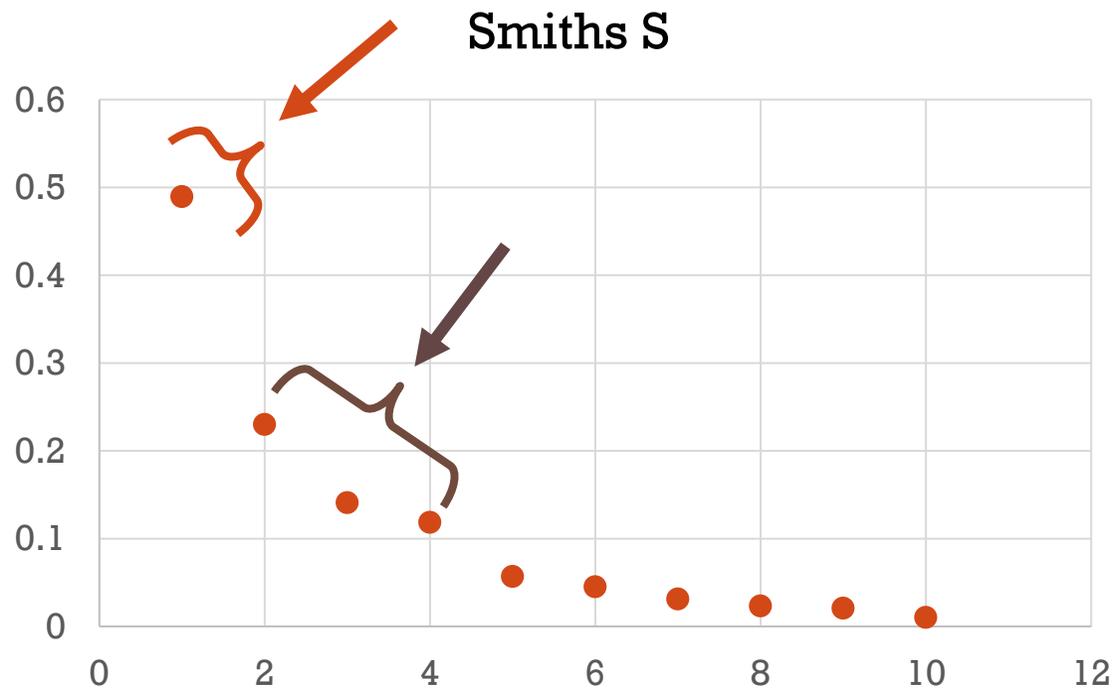


List all the changes you want to see in VA healthcare after this last year



- faster/ more accessible appointments
- in-person visits
- no complaints
- more personal care/ attentive to emotion/ finances/needs
- improve hospitality
- live people answer phones rather than recorded messages
- primary care doctors to stay/ be available
- keep/add virtual options
- more satellites/ services
- hire more support staff and doctors

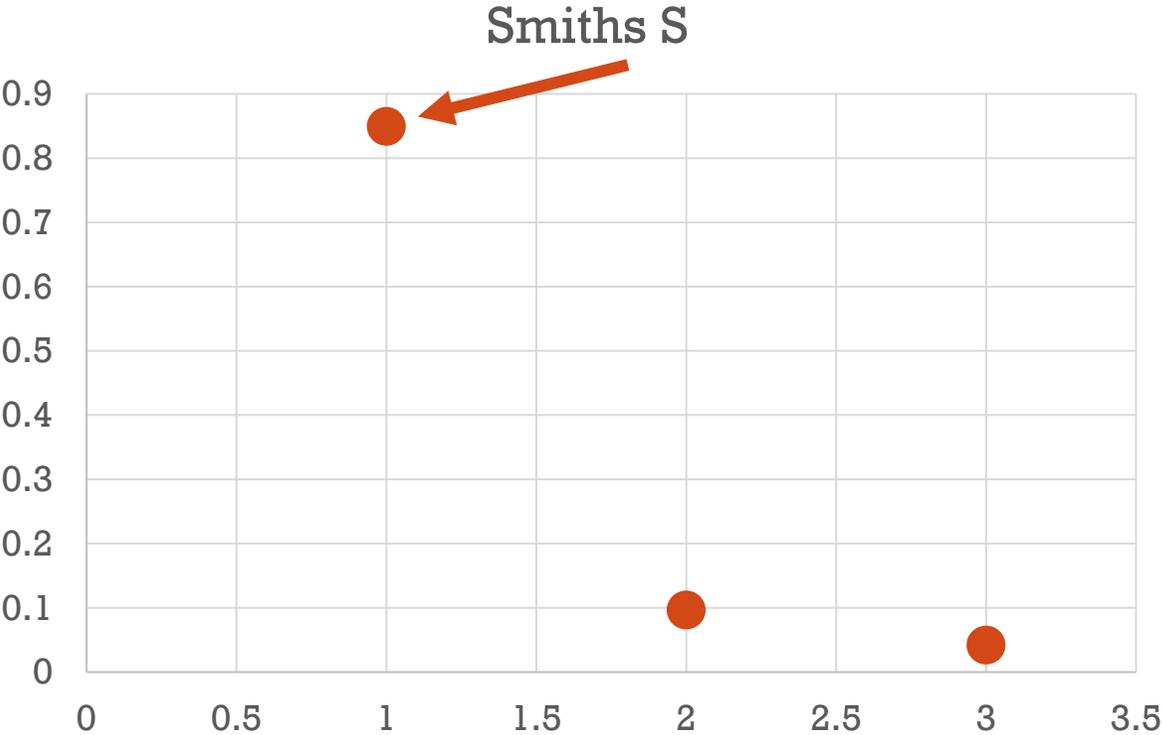
List all the ways the issues of race and racism in the past year impacted you.

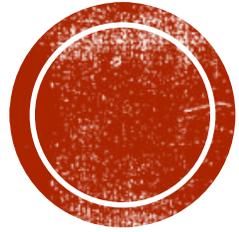


- no impact
- discriminated/treated differently
- anger/frustration at [lack of] change
- emotionally/mentally disturbing
- more awareness/understanding
- keep low profile/ stay out of it
- benefiting from privilege
- Everything is race now
- media has blown things out of proportion
- see more camaraderie between races

List all the ways the issues of race and racism in the past year impacted your experiences of healthcare at the VA.

- no impact/not experienced or observed
- treated differently because of my race
- unprofessional treatment





MAKING COMPARISONS



List all the feelings that come to mind right now when you think about receiving healthcare at the VA. (By Race)

Black Veterans

1. good medical care
2. convenient/efficient/helpful
3. like
4. inconvenient/onerous/challenging
5. anxiety/stress/fear
6. care/listening to patient
7. not heard/no compassion
8. nice service/courteous/respect
9. underqualified providers/turnover/lack of medical support
10. getting better/ more than expected

White Veterans

1. like
2. anxiety/stress/fear
3. nice service/courteous/respect
4. inconvenient/onerous/challenging
5. good medical care
6. convenient/efficient/helpful
7. care/listening to patient
8. location not convenient
9. horrible service/disrespect
10. trust/safe/confidence

List all the feelings that come to mind right now when you think about receiving healthcare at the VA. (By Race)

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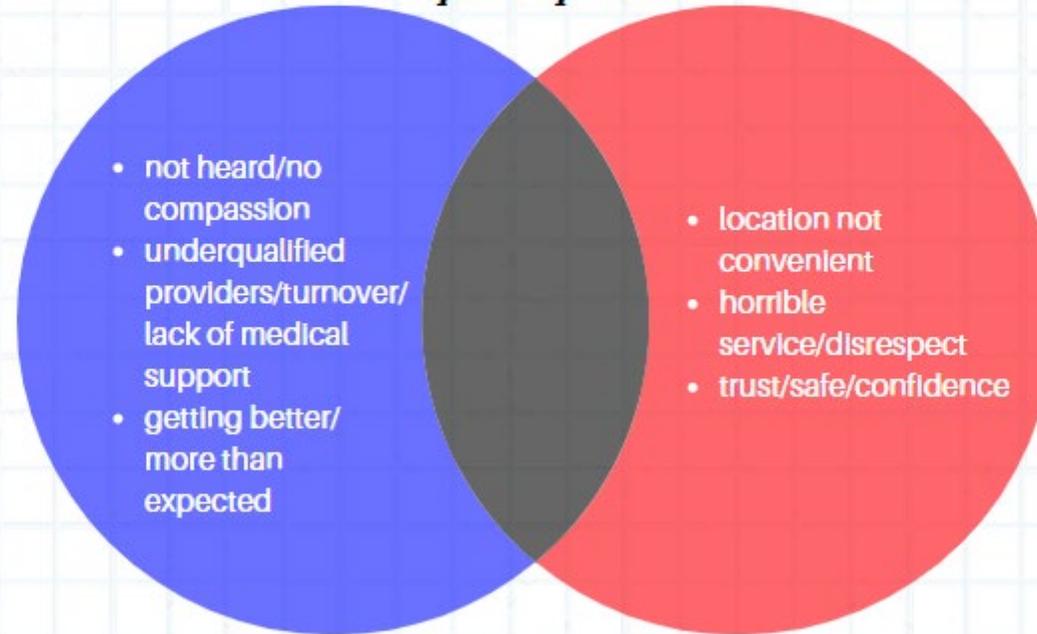
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8. location not convenient
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10. trust/safe/confidence

***List all the feelings that come to mind right now
when you think about receiving healthcare at
the VA. (By Race)***

Unique Responses



Black

White

List all the challenges you faced in receiving healthcare at the VA in the past year. (By Sex)

Female Veterans

1. no/limited in-person care
2. long waits/delays in getting care
3. few/no challenges
4. feel unheard/ignored/shut down/uncared for
5. transportation/traffic challenges
6. difficulty getting help/ right information
7. impersonal/not individualized
8. pigeon-holing
9. not having money/loss of income
10. having to use teleconferences [phone/video] instead of in-person consultations

Male Veterans

1. few/no challenges
2. long waits/delays in getting care
3. no/limited in-person care
4. transportation/traffic challenges
5. having to use teleconferences [phone/video] instead of in-person consultations
6. [hard] to get somebody on the phone
7. delay in getting meds by mail
8. feel unheard/ignored/shut down/uncared for
9. impersonal/not individualized
10. bureaucratic/red tape

List all the challenges you faced in receiving healthcare at the VA in the past year. (By Sex)

Female Veterans

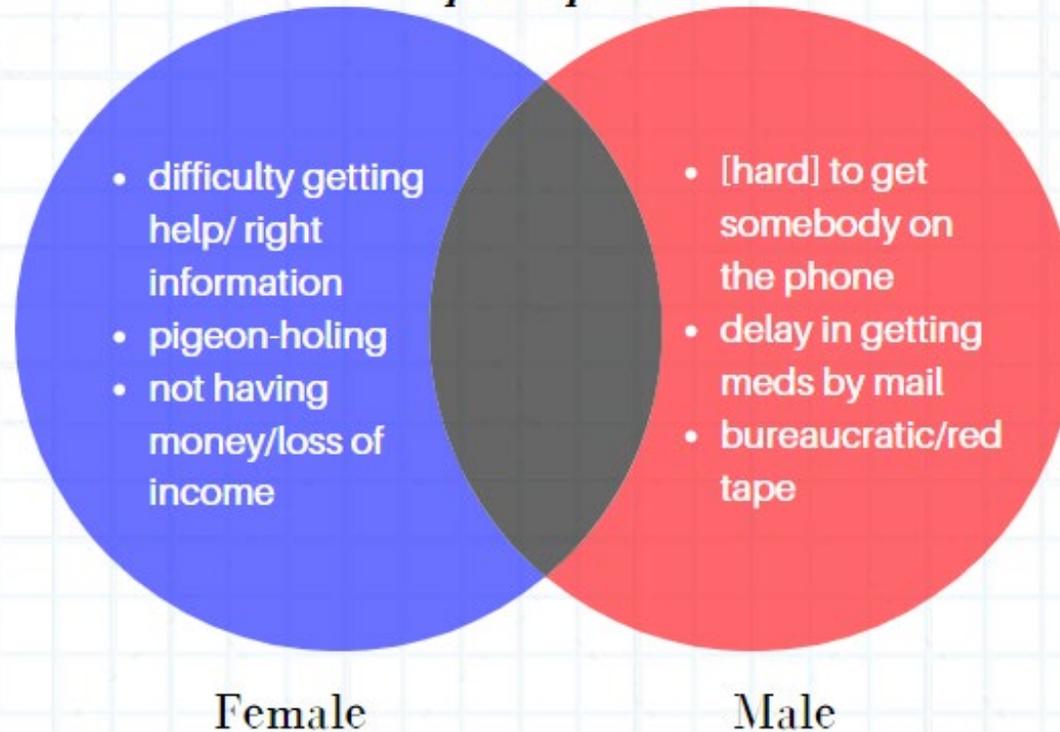
1. no/limited in-person care
2. long waits/delays in getting care
3. few/no challenges
4. feel unheard/ignored/shut down/uncared for
5. transportation/traffic challenges
6. difficulty getting help/ right information
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10. bureaucratic/red tape

List all the challenges you faced in receiving healthcare at the VA in the past year. (By Sex)

Unique Responses



List your feelings or attitudes toward virtual visits at the VA. (By Sex)

Female Veterans

1. good experience/comfortable/great option
2. beneficial/helpful/supportive
3. impersonal/cursory/feel like a number
4. dislike virtual/negative experience
5. convenient/easier/time-saving
6. better than nothing/okay but limited
7. discomfort/worry
8. appropriate for some visits/have their place
9. technology problems on both sides
10. limit doctor decision-making/subpar [care]

Male Veterans

1. good experience/comfortable/great option
2. prefer in-person
3. went well/no problems
4. technology problems on both sides
5. convenient/easier/time-saving
6. impersonal/cursory/feel like a number
7. appropriate for some visits/have their place
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6. impersonal/cursory/feel like a number
7. appropriate for some visits/have their place
8. beneficial/helpful/supportive
9. limit doctor decision-making/subpar [care]
10. discomfort/worry

List all the changes you want to see in VA healthcare after this last year. (By Sex)

Female Veterans

1. in-person visits
2. improve hospitality
3. more personal care/ attentive to emotion/ finances/needs
4. more satellites/ services
5. faster/ more accessible appointments
6. primary care doctors to stay/ be available
7. keep/add virtual options
8. streamline system/care
9. more one-on-one with doctor
10. know whether healthcare workers vaccinated

Male Veterans

1. faster/ more accessible appointments
2. no complaints
3. live people answer phones
4. hire more support staff and doctors
5. more personal care/ attentive to emotion/ finances/needs
6. in-person visits
7. decrease in clinic wait times
8. med refill on time
9. VA and outside doctor to work together
10. more one-on-one with doctor

List all the changes you want to see in VA healthcare after this last year. (By Sex)

Female Veterans

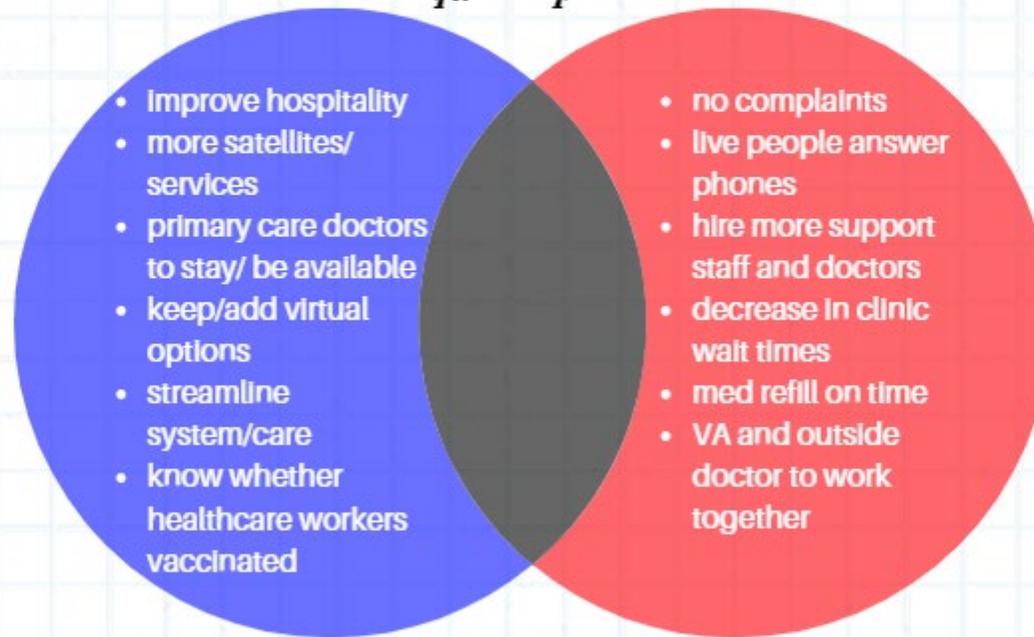
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9. VA and outside doctor to work together
10. more one-on-one with doctor

List all the changes you want to see in VA healthcare after this last year. (By Sex)

Unique Responses



Female

Male

List all the ways the issues of race and racism in the past year impacted you. (By Race)

Black Veterans

1. no impact
2. discriminated/treated differently
3. anger/frustration at [lack of] change
4. emotionally/mentally disturbing
5. keep low profile/ stay out of it
6. see more camaraderie between races
7. benefiting from privilege
8. more awareness/understanding
9. Everything is race now
10. media has blown things out of proportion

White Veterans

1. no impact
2. anger/frustration at [lack of] change
3. discriminated/treated differently
4. emotionally/mentally disturbing
5. more awareness/understanding
6. benefiting from privilege
7. Everything is race now
8. media has blown things out of proportion
9. keep low profile/ stay out of it
10. see more camaraderie between races

List all the ways the issues of race and racism in the past year impacted your experiences of healthcare at the VA. (By Race)

Black Veterans

1. no impact/not experienced or observed
2. treated differently because of my race
3. unprofessional treatment

White Veterans

1. no impact/not experienced or observed
2. treated differently because of my race

IN SUMMARY

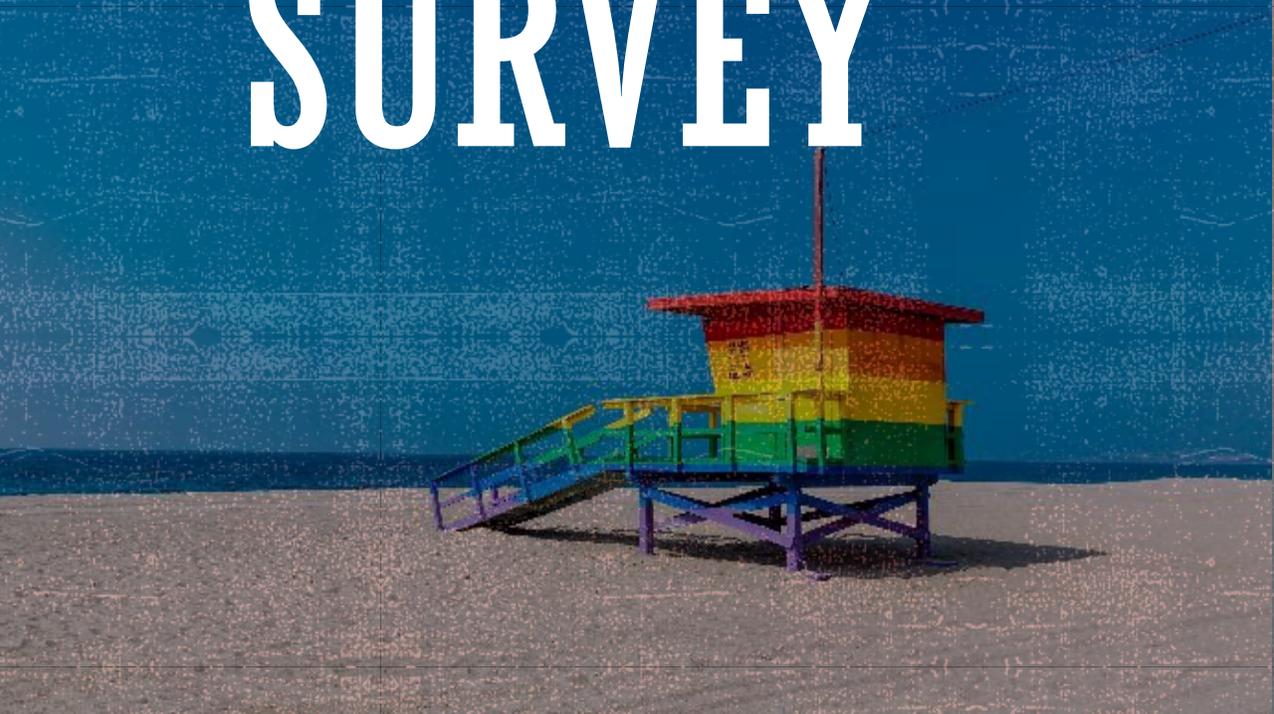


- Overall, positive views of healthcare at the VHA
- Some cited fear and anxiety related to their care
- Difference by sex and race in terms of challenges, virtual care, and suggestions for change
- When asked about racism, participants denied any real impact





DEMONSTRATION SURVEY





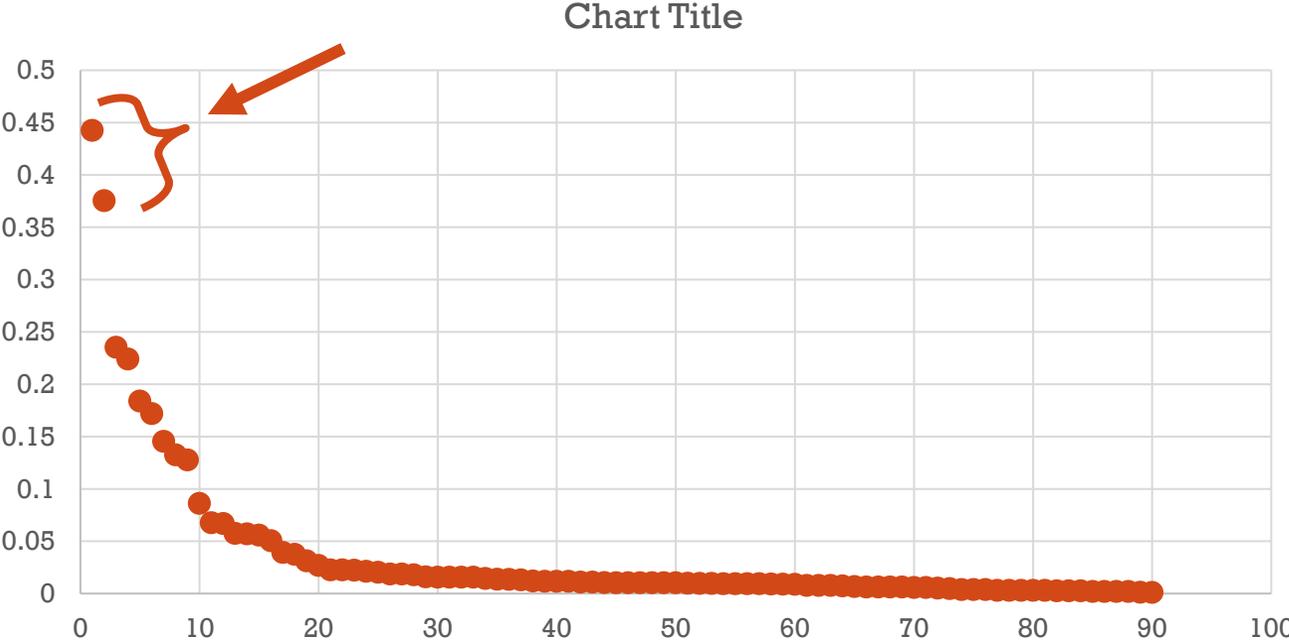
THREE QUESTIONS

- List all the things you personally do for fun in the summer season
- List all the things you personally do for fun in the fall season
- In which state, district, or US territory do you currently reside?



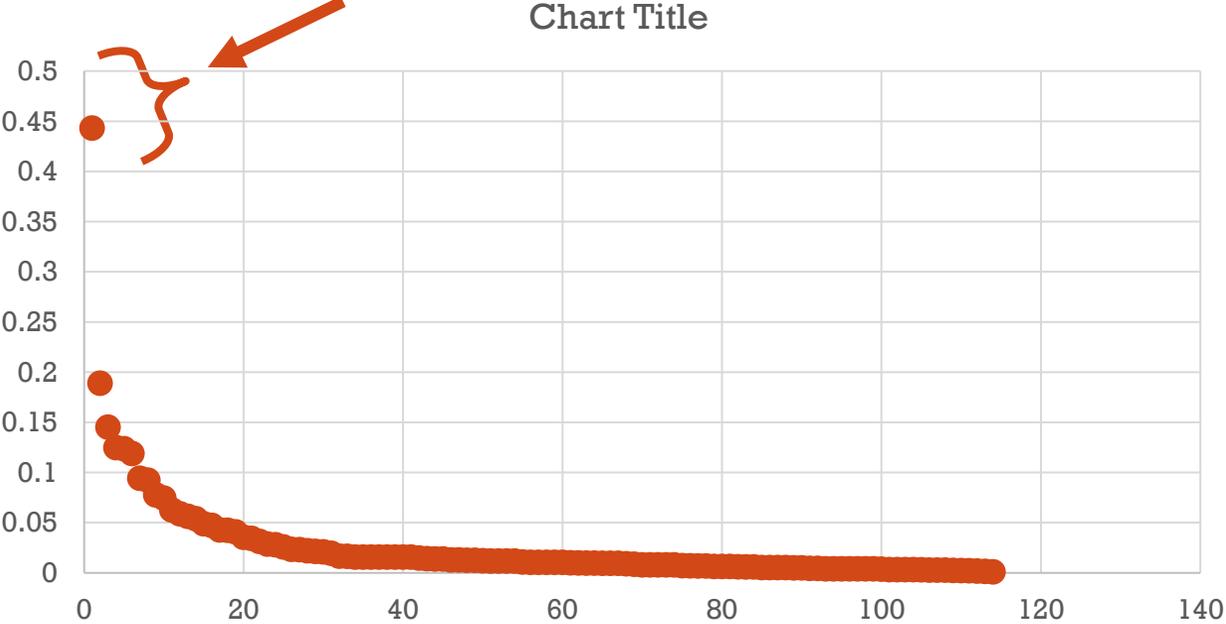
List all the things you personally do for fun in the summer season

- hike
- swim
- garden
- travel
- beach
- camp
- read
- bike
- walk
- run



List all the things you personally do for fun in the fall season

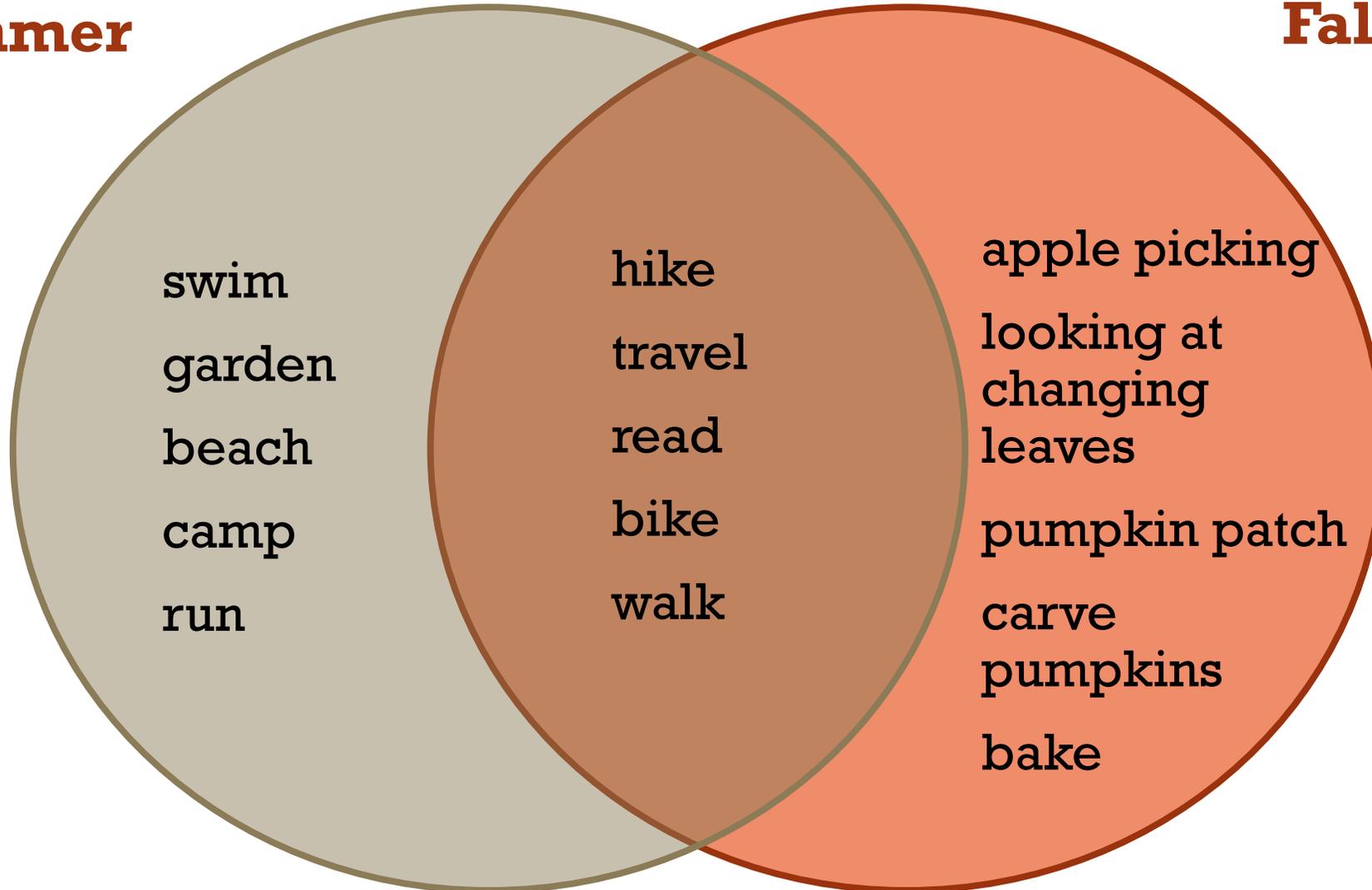
- hike
- walk
- apple picking
- looking at changing leaves
- read
- pumpkin patch
- carve pumpkins
- bake
- bike
- travel



COMPARING SEASONS

Summer

Fall





List all the things you personally do for fun in the summer season (By Geographic Location)

West

1. hike
2. swim
3. travel
4. garden
5. read
6. camp
7. beach
8. run
9. bike
10. family time

Midwest

1. swim
2. garden
3. bike
4. camp
5. hike
6. walk
7. travel
8. beach
9. vacation
10. amusement park

Eastern

1. swim
2. hike
3. travel
4. beach
5. garden
6. read
7. walk
8. camp
9. barbeque/cookout
10. ice cream



List all the things you personally do for fun in the fall season (By Geographic Location)

West

1. hike
2. read
3. bake
4. looking at changing leaves
5. pumpkin patch
6. run
7. cook
8. garden
9. bike
10. walk

Midwest

1. hike
2. apple picking
3. carve pumpkins
4. walk
5. looking at changing leaves
6. pumpkin patch
7. decorate for Halloween
8. bike
9. garden
10. Halloween

Eastern

1. hike
2. walk
3. apple picking
4. travel
5. drinking warm beverages
6. bonfires/campfire/firepit
7. looking at changing leaves
8. pumpkin patch
9. read
10. carve pumpkins



RECAP

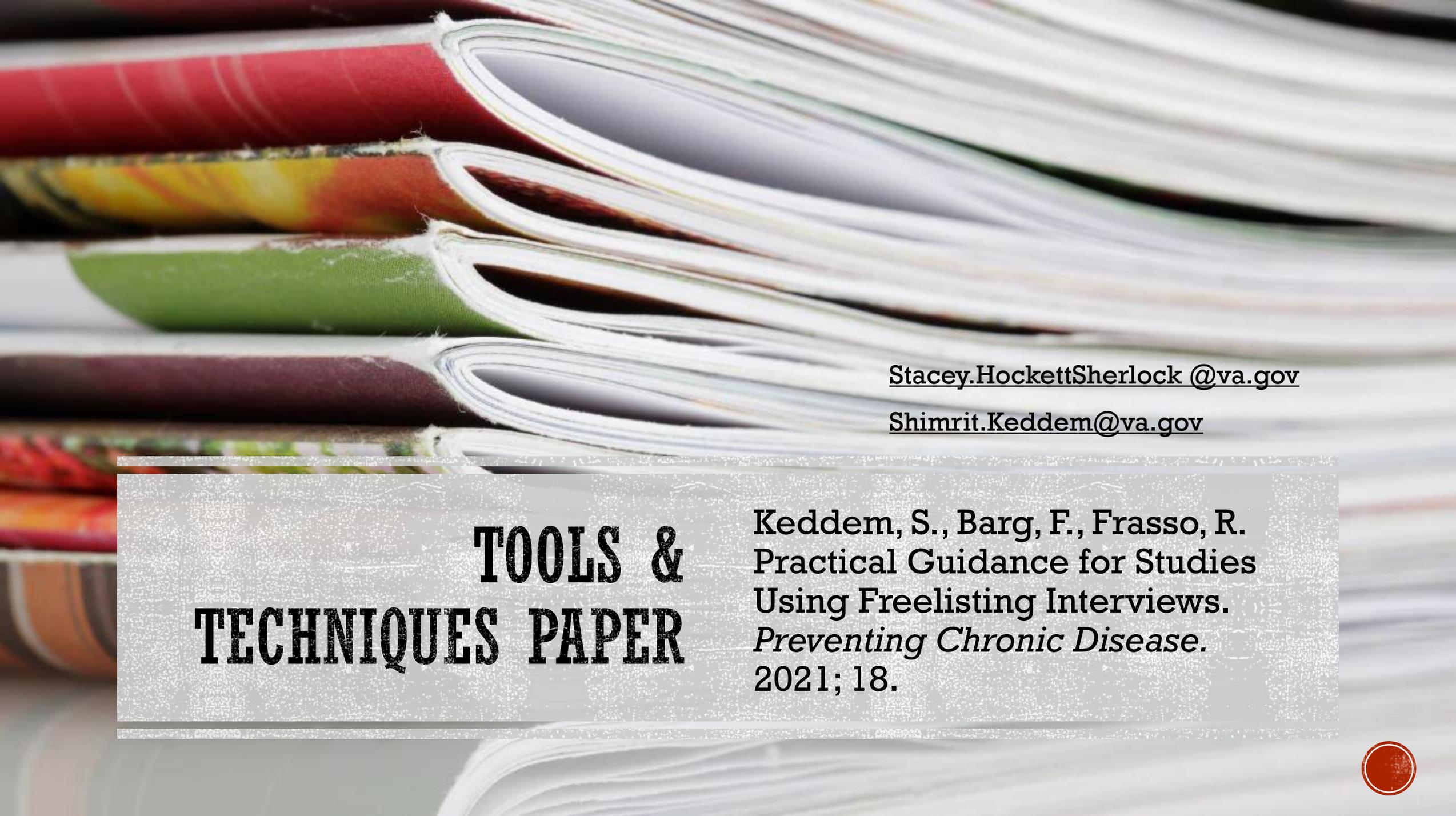
- Freelistings is a semi-structured interviewing technique that elicits spontaneous responses from stakeholders
- Can be done rapidly and is quantifiable
- Requires an interview guide and data cleaning processes
- Allows for comparisons between groups and concepts
- Can stand alone or as part of a larger study
- Ideal for...
 - Rapid data collection (e.g. preliminary data)
 - Community needs assessments
 - Informing study materials and other health communication





- Natalie Lee, MD, MSHP
- Anneliese Sorrentino, MSS, LMFT
- Sabrina Morawej, MPH





TOOLS & TECHNIQUES PAPER

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Shimrit.Keddem@va.gov

Keddem, S., Barg, F., Frasso, R.
Practical Guidance for Studies
Using Freelisting Interviews.
Preventing Chronic Disease.
2021; 18.

