

Video observation

Purpose of video observation

These observations were designed to understand WASH related activities as they fit within daily routines and highlight barriers to WASH access that may not be obtained through other methods due to these difficulties being normalised or difficult to discuss.

Requirements

- 2 trained videographers/notetakers (roles to alternate throughout the morning)
- Simple handheld camera
- Enough batteries to last for 3 hours of filming
- Enough space on an SD card to film for 3 hours
- Consent form/information sheet
- Pen and paper

Training videographers

Being videoed can be an uncomfortable and unfamiliar process for most people. It is important that field staff are trained on how they can minimise discomfort while also being able to obtain the best possible observation footage.

Our experience has been that in most cultures it is preferable to select young women as videographers. This is because these individuals are generally regarded as unthreatening and therefore this tends to minimise discomfort.

Videographers should have the opportunity to develop their observation skills in a classroom setting and then through supervised observation sessions to ensure that they are suitable for the role. The following points should be covered during training:

- How to use the video camera, including charging the batteries and transferring the footage onto a computer/storage device.
- Go through the process of consent and ethics.
- What not to film - The video should remain on for the entire period. If the primary participant or caregiver requests something not to be filmed the camera should be pointed to the ground. In particular it is recommended that this be done when the participant is actually using the toilet or bathing. Although they may be willing to let you video how they get in and out of these facilities.
- What to film - The task of the videographer will be to follow the activities of the primary participant. However the video should so seek to capture the primary participant's interactions with their environment, objects and individuals around them (such as caregivers).
- Focus – Ideally the primary participant should be in shot all of the time, with at least $\frac{3}{4}$ of their person visible (ie head to knees). Another way of determining the angle and zoom of the shot can be by thinking about whether you can see the participants hands at all times. A lot of the actions we do involve hands so making sure the videographer is positioned in a way to capture this is important.
- Interference - Videographers are free to chat and make small talk with those in the family (so not to appear rude) but should not actively initiate conversation, probe the primary

participant/others about their actions or share opinions which may bias their actions. Videographers should also not assist or interrupt any behaviour that is taking place before them.

- Judgment – Videographers should be trained not make judgments about those they are videoing. If they observe something which is of concern they should raise this issue after the observation with their field supervisor and they should consider whether further action is necessary.
- Setting – The consent is only sufficient to cover filming in the household setting and surrounding environment. Videographers should not follow participants away from household compounds or film visitors who have not previously consented to being filmed.

Identifying participants

One of the strengths of video observation is that it can be used with people who have any type of impairment. It can therefore be particularly useful to understand the issues faced by people with severe impairments or for whom communication is difficult.

Consent and explanation of the process

For video observation of the consent process must be done very thoroughly to ensure that the primary participant and immediate family members understand the purpose of the activity and what they are agreeing to.

Key aspects that should be highlighted in the written consent form and explained to the primary participant and family members are:

- Should you agree to participate the researcher will visit your house early in the morning and video you doing your daily routines and practices.
- This will take place over 2 to 3 hours.
- You do not need to prepare anything for our visit or do anything different to what you normally do. If possible you should act as if we are not there at all.
- The video recordings taken by the researcher will be used to better understand the challenges facing people with disabilities.
- They will not be shared with others without your permission.
- Your name and identity will not be used or recorded as part of the study report.
- If you feel uncomfortable with being videoed at any time please tell us.
- After we have finished with the video recording may ask you some questions during a short interview.

Note: The participant is not specifically informed that this is a study about sanitation, water and hygiene as this may affect the way they conduct themselves in relation to these activities.

Ask the participant if they have any questions and answer these as thoroughly as possible.

The participant should be asked the following questions to obtain their consent:

- I have read/been read the information provided above and I have understood it. I have asked all the questions I have at this time. I voluntarily agree to participate in this research study (tick one box - yes or no).
- I give permission for things that I do during observation to be described anonymously as part of this study. I understand that this information could potentially be seen by researchers and students in Malawi and beyond and by health professionals and decision-makers in Malawi and beyond (tick one box – yes or no).

Consent must be signified in writing by the primary participant wherever possible. Where the participant is unable to give full consent or is under 18 a guardian/caregiver must also provide written consent.

Where primary participants or their caregivers are illiterate they should use a thumbprint to signify their consent.

Once the primary participant and carer have agreed to take part in the study and understand what the video observation will involve, the researcher will arrange a convenient day to conduct the observation. Normally this is the morning after the explanation and consent process has been done.

Interview

After the video recording the researcher may ask the participants some questions during a short interview. During this interview the researcher may choose to play back particular segments of the footage to understand or explore them in more detail. This should be an opportunity for the primary participant and their caregiver to add their comments and additional context to what was being filmed. The researcher should also note non-verbal responses to the footage. The researcher should also pre-identify and ask questions about key sections of the footage that may benefit from additional clarity.

Video analysis

Video footage should be analysed firstly through a process of parsing, which requires the partitioning of the footage into scenes of action, within which associated routines and processes take place. Once this is done each scene should be analysed in more depth by noting down what is taking place, who it involves, what objects are in the scene, what barriers or enablers are contributing to the way the behaviour is being done and anything surprising or interesting. Due to the amount of data that is generated through video observation it is useful to use a data analysis tool such as NVivo to keep track of your notes against the footage. These notes on the video observation can then be coded into emergent themes and triangulated against other data sources.

Video Observation taking place

