

Barriers to Physical Activity Among Female Adolescents
of Indian and Polish Origin in Mississauga, Ontario
An Examination of Shared and Ethno-Cultural Barriers
Community Report

Acknowledgements

This research was funded by the Ontario Trillium Foundation and Communities in Action Fund, Ministry of Health Promotion.

Research Project team:

Lisa Limarzi, BES

Get Active Mississauga Research Coordinator

Kathi Wilson, Ph.D.

Department of Geography University of Toronto Mississauga,

John J.M. Dwyer, Ph.D.

Department of Family Relations and Applied Nutrition University of Guelph,

Brenda Callaghan

Get Active Mississauga Coordinator

Leslie Croskery, B.A.

Queen's University, Kingston, Ontario, Canada



Increasing daily physical activity is an important public health priority[1-3]. Following the Canadian federal government's release of the Canadian Sport Policy and the more recent Healthy Living Strategy, the Ontario government created the Active2010 strategy in 2005 to increase participation in sport and physical activity across Ontario[4]. The main objective of the Active2010 strategy is to increase participation such that at least 55% of Ontarians are physically active [4]. The Active2010 strategy spurred the development of Get Active Mississauga, a community development tool involving a number of organizations working together to promote daily physical activity for health benefits [5]. Lead organizations for Get Active Mississauga are the Mississauga YMCA and the City of Mississauga. The main objective of Get Active Mississauga is to identify various target populations and their barriers to physical activity as an initial step in developing and implementing community initiatives aimed at increasing physical activity for these target populations [5]. In working towards this objective, Get Active Mississauga partnered with researchers from the University of Toronto Mississauga and the University of Guelph to understand barriers to physical activity among population subgroups. The results of this research are presented in this paper.

Mississauga is one of the most diverse cities in Canada. Immigrants comprise over 50% of the city's total population with over 20% of the immigrant population arriving in the last five years. In addition, almost 50% of the total population represents a visible minority population group[6]. Given such diversity, a key goal of Get Active Mississauga was to explore the extent to which female adolescents face general and ethno-cultural barriers to physical activity, which is the focus of this paper. In particular, the research concentrated on barriers experienced by female adolescents of Indian and Polish origin living in Mississauga for several reasons. At the time that Get Active Mississauga identified and determined the need for this research, census data showed that individuals from India and Poland represented the largest ethno-cultural groups in the city. It was also perceived that these cultures were significantly different enough that shared barriers may indicate barriers to physical activity for all youth. Focusing on female adolescents is a priority

because adolescence is a stage of development when positive physical activity patterns are established and can be maintained throughout an individual's life. Research has shown a decline in physical activity during adolescence among females[7-11], which is concerning since adolescent participation in physical activity predicts physical activity levels during adulthood [12].

Furthermore, research has also demonstrated that female adolescents are less active than male adolescents and thus constitute a priority target population[9, 11, 13-15].

Previous research has shown that female adolescents face key barriers to physical activity. For example, female adolescents in the U.S. reported having insufficient and poor quality physical education, watching too much television, playing too many video games, and spending too much time on a computer[16]. These four factors reduce the amount of time spent on daily physical activity. Goh et al.[16] found that inaccessible community programs, unsafe neighbourhoods, discomfort with changing in locker rooms, and lacking motivation represent key barriers.

Research conducted in New Zealand has found that female adolescents identify factors such as a sedentary environment (e.g., preferred television and passive transportation), unsupportive friends, perceived incompetence, being self-conscious about others watching, facilities and equipment not being available or accessible, unsafe neighbourhoods (e.g., gangs), lacking motivation, and lack of time as key barriers[17]. Canadian research has shown that lack of time (due to homework, part-time job, and family responsibilities), screen time use, unsupportive parents and friends, inaccessible facilities, concern about safety (e.g., gangs), competition, and body-centered concerns (e.g., self-conscious about their physical appearance, menstruation, and stereotypes about femininity) pose significant barriers to physical activity among female adolescents[18].

While studies have documented declines in physical activity [7-11] and a number of barriers to physical activity among female adolescents [16-18], little research has examined the role of ethno-specific barriers in shaping physical activity among Canadian female adolescents. While at least

one Canadian study did include an ethno-culturally diverse sample, the study did not seek to identify specific ethno-cultural barriers[18]. Thus, the current research makes an important contribution to the field of study by examining the extent to which perceived ethno-cultural barriers to physical activity exist among Indian and Polish female adolescents. Furthermore, the results of the study will inform the planning and implementation of physical activity interventions in Mississauga and other culturally diverse cities.

Since the objective of the study was to understand barriers to physical activity, we sought to include female adolescents who were not physically active. Specifically, we aimed to recruit inactive Indian and Polish female adolescents (13-17 years of age). Individuals were recruited with the assistance of gatekeepers from four community-based organizations (i.e., religious, sports teams, after-school programs and cultural education programs). Gatekeepers introduced the research coordinator to potential participants during regularly scheduled program activities. Those interested in participating completed a participation form, which included the following question on current levels of physical activity: "In a usual week, how many days per week do you do moderate to vigorous physical activity for at least 60 minutes (this can include 10-minute bouts)?" Following the recommendation that adolescents do at least 60 minutes of moderate physical activity on most days of the week[19] or each day[2] to achieve health benefits and reduce the risk of disease, individuals reporting four or less days per week were considered to be inactive. These inactive individuals also did not meet the Canadian recommendation(prior to 2011) that youth do at least 90 minutes of moderate to vigorous physical activity each day[20]. All individuals classified as inactive were included in a focus group. A total of 87 inactive female adolescents participated in the research, 45 of whom were Polish and 42 of whom were Indian. Participants ranged from 13 to 17 years of age.

Focus groups were chosen as the method of data collection because they enable the collection of a diversity of perspectives from a large number of participants[21]. Furthermore, with respect to

our sample, focus groups have been shown to be a useful data collection tool when working with culturally-specific population groups[22, 23]. The focus groups consisted of three questions aimed at understanding both general and ethno-specific barriers to physical activity (Appendix 1).

Trained facilitators from the Polish and Indian communities were hired to run the focus groups. A total of 10 focus groups, ranging in size from 6-11 participants, were conducted between March 2008 and June 2009. All participants received a Get Active Mississauga cinch pack and water bottle and a YMCA and City of Mississauga day pass to utilize recreational facilities in the city. The research was approved by the Office of Research Ethics at the University of Toronto. Standard university ethics guidelines of informed consent and confidentiality were followed. Due to the ages of the participants involved in the research, both individual and parental consent to participate were obtained.

The digital recordings of the focus groups were transcribed verbatim following a specific protocol[24]. The transcripts were compared to the audiotapes for accuracy and then imported into NVivo, a software package for analyzing qualitative data. Transcripts were coded line-by-line, paying particular attention to both common barriers and those unique to each ethno-cultural group. A constant comparison approach was used to develop themes, which involved coding comments by continually referring to previously coded comments for comparison.[25, 26] Two of the authors independently read the transcripts and inductively generated a list of themes with descriptive comments. Each theme was compared and discussed, resulting in an agreed upon set of common codes.

The focus group interviews revealed barriers common to both groups of adolescents but also specific ethno-cultural barriers to physical activity. In this section, we present specific details of both common and ethno-specific barriers. Verbatim quotes have been selected to represent the most common perceived barriers among the female Indian and Polish adolescents.

Shared Barriers

The focus groups revealed that Indian and Polish adolescents experience three similar barriers to physical activity – time constraints, lack of confidence, and inaccessibility (Appendix 2). The most frequently discussed barrier amongst the focus group participants related to priorities and constraints on time. Specifically, all participants indicated that they prioritize their academic studies over physical activity. Most stated that they would not participate in physical activity after school or on weekends if they had homework/assignments to complete or had to study for upcoming tests. It is important to note that most participants indicated that, as children of immigrant parents, they felt a great deal of pressure to perform well in school because their parents had afforded them with better opportunities by immigrating to Canada. The second most frequently discussed barrier related to lack of confidence. A majority of the participants stated that they would not participate in team sports if they did not think that they had the ability to perform well. In fact, it became clear that a number of participants lacked the confidence to even try out for team sports. Finally, issues of geographic and economic inaccessibility were identified. For example, both groups of participants identified distance to recreational activities as a key barrier, with many indicating that because they are too young to drive, they must rely on parents or older siblings to drive them to and from recreational activities that are located further than walking or cycling distance. Many also noted that a lack of public transportation makes it difficult to participate. Issues of economic inaccessibility related to the high costs of purchasing gym memberships and sports equipment (e.g., rugby).

Unique Ethno-cultural Barriers

Perhaps most interesting and insightful are the unique barriers to physical activity identified by each ethno-cultural group. Among the Polish participants, they identified cultural commitments as a barrier uniquely experienced by Polish youth (Appendix 3). In terms of cultural commitments, Polish females identified strong cultural commitments within the Mississauga Polish community and

cited a number of culturally-specific activities that they must attend. The Polish participants indicated that they are required to participate in a number of cultural activities (e.g., folk dancing, church functions, and Polish school) that often take priority over any other physical activities. The expectation to participate in cultural activities overrides any individual desire to participate in 'non-cultural' activities.

In contrast, the Indian females identified concerns over skin exposure, traditional gender roles, and discrimination as three key ethno-cultural barriers that prevent them from participating in physical activity (Appendix 4). For example, in terms of concerns over skin exposure, parental disapproval prevents most Indian participants from engaging in activities that require tight, revealing attire or bathing suits. In addition, a number of participants identified the difficulties associated with trying to participate in activities while wearing long pants and shirts (e.g., tripping, added weight, and restrictions while swimming). The second most frequently discussed barrier among Indian participants was the impact of perceived traditional gender roles among family members. In particular, participants indicated that parents and grandparents often do not accept sports and physical activity as being appropriate for girls. For example, participants stated that within their families, chores were viewed as integral life skills that took priority over physical activity. As a result, many of the participants do not have the support of family members to participate in school-based or individual and team-based sport activities. Finally, most of the Indian participants identified feeling discriminated against while participating in physical activity, especially team sports. In particular, many noted hearing racial slurs directed at them by teammates, opposing players, officials and parents during games.

The goal of the current study was to contribute to understanding barriers to physical activity by examining the role of ethno-cultural factors in shaping physical activity. The results revealed that female adolescents from the Polish and Indian communities in Mississauga experience both shared and culturally-specific barriers to participating in physical activity and it is

important to note that the research findings do have some limitations that deserve mention.

While the Polish and Indian participants are unique with respect to their cultural heritage, it is important to acknowledge the diversity that exists within each group. Certainly barriers to physical activity may vary by socioeconomic status, religion, the length of time parents have been in the country, etc. In addition, other ethno-cultural groups may face other significant barriers to physical activities that were not captured in this study. While these issues are important, they are beyond the scope of the current research and constitute an important area for future study.

All of the participants in this study were recruited through culturally-specific groups and organizations. As such, the barriers they experience may differ from those experienced by female adolescents who are not as connected to their cultural communities. Finally, this research focused on barriers to physical activity among inactive adolescents but examining both general and culturally-specific factors that facilitate involvement in physical activity represents an important area of future research. This should also involve adolescents who are physically active. It is apparent that female adolescents face a number of barriers that contribute to declines in physical activity.

Addressing the issues identified in this research will require commitment, resources and dedication of cultural leaders, organizational leaders, community leaders and funding to educate, develop initiatives and policies that will result in better access to physical activity, and change attitudes that will promote daily physical activity for young women.

The next step for Get Active Mississauga is to bring together all community leaders to address these issues and to assist with the development of strategies for increasing the opportunities for both formal and informal physical activity in a culturally-safe atmosphere.

In this vein, the research findings lend themselves to a number of possible policy recommendations.

Given that school work constitutes the major time constraint; one possibility would be to ensure that schools provide ample opportunities for adolescents to participate in physical activities on site. This could include the creation of different clubs (e.g., walking, track, and yoga) for physical activity. The clubs would be open to all interested participants and not limited to only those who excel at sports and physical activity. This in turn might overcome some of the difficulties related to lack of confidence. The City of Mississauga has, in the past, partnered with specific schools to provide in-house recreational physical activities (i.e., recreation centre staff go into schools to provide programming). This has been successful (in terms of participation) and the City and the boards of education should explore expanding this model in more schools. In addition, a number of the shared barriers identified by participants (e.g., geographic/economic inaccessibility, lack of confidence) relate to formal participation in physical activity, such as membership on teams sports or to local recreation centres. This speaks to the need to continue to encourage the importance of informal physical activities (e.g., walking and jogging) that do not require membership costs and can be performed within close proximity to home. Recreation providers and schools (intramural leagues) must be aware of the need for “learn to” activities designed to build competence, self-confidence and self-esteem, allowing more opportunity to “try out” for school teams. Finally, the concerns about discrimination raised by Indian females speak to the need for cultural sensitivity training within sports for coaches, players and officials. Such training (and/or workshops) could be mandatory for all individuals participating in city-sponsored and school-related physical activity and should be combined with a zero-tolerance policy for racism and discrimination. This would help to ensure that spaces of physical activity are culturally-safe.

As rates of obesity and chronic conditions (e.g., diabetes, heart disease, cancer) continue to cause concern across the country, it is becoming increasingly important to ensure the health of our youth. Regular participation in physical activity has been linked to lower risk levels of a number of chronic conditions and assists in maintaining a healthy weight. However, research has

demonstrated that rates of physical activity decline in adolescent years, particularly among females[7-11]. In order to implement policies and tools to encourage physical activity, it is essential to understand the barriers that are contributing to the decline. Especially important, considering the diversity of cities like Mississauga across the country, is an in-depth understanding of those barriers that are unique to ethno-cultural groups. This is essential for ensuring the creation of inclusive and culturally-safe opportunities for physical activity for all residents. Through dissemination of this information to local community partners discussion and action can inform policies and programs related to increasing rates of physical activity in the City of Mississauga

Appendix 1

Questions for Focus Groups

1. Moderate physical activity is activity, such as brisk walking, bicycling and skating, which causes small increases in breathing or heart rate. Vigorous physical activity is activity, such as running and aerobics, which causes large increases in breathing or heart rate.

It is recommended that individuals participate in at least 60 minutes (this can include 10-minute bouts) of moderate to vigorous physical activity at least 5 days per week. Do you feel the need to work towards this recommended level of physical activity?

2. I would like you to think back to recent times when you wanted to be physically active but weren't able to. What prevented you from being physically active?

3. Do you as a young Indian (Polish) woman face different barriers to physical activity than young women from other cultural groups? Tell me about those barriers.

Appendix 2 Shared Barriers Quotations from Participants

Priorities and time constraints:

"I think with brown parents, it's all about getting good grades. They have to be A's. They can't be B's. I have a white friend, and she got a 70 average, and her parents were happy. I got a 74, and my parents spazzed at me. No, because I dropped though, right? I went from an 80 to 70, and they spazzed. When they asked me why I dropped, I was like, 'Because it got harder.' And she's like, 'You should have tried harder!' I was like, 'I tried my hardest.'" (Indian participant #29, session 4)

"I don't exercise because I have a lot of homework and then I have school and then I have to go home and do a lot of chores and I have no time" (Indian participant #3, session 1)

"It's a culture thing....my mom thinks playing all those games is like wasting your time. It's better to study and everything. That's what she thinks." (Indian participant #40, session 5)

"When you come home, you are so tired. Sometimes you don't even do your homework. You just come home and you want to turn on the TV. And then you start doing your homework and you don't even think about physical activity." (Polish participant #1, session 1)

"...I do it [field hockey] every year, but this year I was unable to because I had a harder semester, and I had to do better in school so I could get into university instead of spending my time exercising. So that was my reason for not joining this year." (Indian participant #25, session 3)

"Both my parents came from Poland, and now they have jobs, but they're not that good. So they always say, 'Oh I want you to study so your future can be better than ours.'" (Polish participant #16, session 1)

"My mom, and most immigrants, they don't have a good job. Well, they have a good job, but it's not a profession. It's more like working with your hands and it's very tiring. It's not like at an office. So my mom wants me to study so I don't get the same job that she does, like manufacturing or whatever." (Polish participant #44, session 5)

Lack of confidence

"I think self-esteem or what other people think about what you're doing can affect that because, if I can't play basketball, I'm not going to play it when all the other people know how to play but I don't know how to play. So that could be a factor. Because if you don't know what you're doing properly, then you're not good enough to do it." (Indian participant #22, session 3)

"And sometimes there's competition. You know that other people play better than you, so you don't try out because you feel that you're going to make a fool out of yourself." (Indian participant #14, session 2)

"Because I went with a friend, just so we could just try to see how it was. And every girl had her shirt from her rep team on, and we were the only ones that weren't on a team outside of school, so that kind of made

us fell like, 'Okay. We kind of suck'." (Polish participant #21, session 3)

"I would like to join a sport. It's just that for these past teams, they said that I didn't think I was really good for them. I was not good in those sports. But I'm thinking about soccer but I don't know if I'm good or whatever. I would like to join, but I just don't have confidence" (Polish participant #35, session 4)

Geographic and Economic inaccessibility

"My family and I go to Poland every other year....and it's different there because everyone walks everywhere. So Europeans are in shape. But here, you know, we take the bus, have car rides, and take trains. They're more fit than North Americans ." (Polish participant #19, session 1)

"I wish some gyms were for free – like those fitness gyms that have all the equipment. I wish they were for free because I still can't afford to pay \$30 for a membership and then keep a commitment. If it was free, I think more people would go and get exercise. (Polish participant #22, session 3)

"My school is half way across the city. Sometimes being there for seven o'clock in the morning for tryouts or practices, it's a bit of a limitation. When you're so far away, you have to get up in the morning earlier.

And when you've slept late after doing an assignment, it's kind of you don't want to get up. So there's that factor to consider too – their [participant's parents][convenience to drive you in the morning and to pick you up after school from competitions in different cities. (Indian participant #17, session 2)

Appendix 3: Culturally-specific barriers among Polish females Participant Quotes

Cultural commitments"

On a Friday you're always stuck trying to do your Polish homework." (Participant #15, session 2) [Polish school is a cultural school attended on Saturday mornings.]

"I don't believe that you HAVE to go to church. I just go because it's a Polish kind of thing." (Participant #12, session 2)

"Especially for parents who have emigrated from Poland, they want Polish all the time here. If a Polish event is happening, then we have to go to it." (Participant #15, session 2)

"My parents make me go to Polish school but I don't like it much." (Participant #10, session 2)

"After school I usually have ... [Polish] Scouts, or I have to go to piano or something. I get home and right after school is that activity...and then I think, 'Oh-oh. I didn't go swimming'." (Participant #23, session 3)

Appendix 4: Culturally-specific barriers among Indian females Participant Quotes

Skin exposure

"And then, you're parents are like, 'Oh no! They're too short!' Like the volleyball shorts are really short. My parents spazzed at me when they saw them. It was really, really annoying. They were screaming at the top of their lungs. And then they were like, 'No, you can't play volleyball!'... So then I had to quit the school team even though I made it. It was really upsetting." (Participant #29, session 4)

"Some people won't approve of me wearing a swimming costume because of the way it looks. I'm not being racist, but if you're white, that's fine because it's the western culture. But if you're Indian, they'll be like, 'No, that's not right. That's not modest. You're exposing too much.'" (Participant #38, session 5)

"I think it's the clothes sometimes. I know a couple of girls that really want to play volleyball and soccer, and since they have to wear short shorts, they don't approve of it. I know a lot of Indian parents don't want their girls running around in front of boys with their legs bare." (Participant #24, session 3)

Traditional gender roles

"For a girl in the Indian culture, you should know how to cook, clean, and just do the house chores. So, even if you have time and you want to go and do physical activity, they'd say, 'No. Why are you wasting time? Go learn how to cook instead.'" (Participant #38, session 5)

"Brown parents are usually like, 'Oh, there's no point in girls going out and playing and stuff because once you're married, all you're going to do is come home, cook, and then go back to work, and take care of your family. There's no point in having daily exercise.' But the thing is that, we have a life too. It's not just boys, boys, boys, right? They compare you to boys or other girls who do housework. (Participant #34, session 4)

Discrimination

"I play lacrosse, and me and another girl are the only brown girls, and everybody else is white. And then, not my team, but other teams will use that against us, and be like, 'They have to suck' because we're brown. And then I get the whole, ... 'Why are you playing?' They'll try to get into you, but I ignore it. I know one of my friends who plays hockey, and she was told that too.... When they see that you're the only brown girl on the team, they're like, 'Who are you?' kind-of-thing, especially from another team." (Participant #25, session 3)

"We have to put up with them calling us Paki and swearing at us when playing hockey and then the referees actually give you penalties when you did nothing. It was just because you're brown. (Participant #2, session 1)

References

1. (WHO), W.H.O. *Global Strategy on Diet, Physical Activity and Health*. 2002 [cited 2009 December 4]; Available from: http://www.who.int/dietphysicalactivity/strategy/eb11344/strategy_english_web.pdf.
2. (CDC), C.f.D.C.a.P. *Physical activity and health: The benefits of physical activity*. 2008 [cited 2009 December 4]; Available from: <http://www.cdc.gov/physicalactivity/everyone/health/index.html>.
3. Canada. *Healthy Living - Physical Activity* 2009 [cited 2008 December 4]; Available from: <http://www.hc-sc.gc.ca/hl-vs/physactiv/index-eng.php>.
4. Ontario. *Active 2010*. 2009 [cited 2009 December 4]; Available from: http://www.active2010.ca/index.cfm?fa=english_about.main.
5. Mississauga. *Get Active Mississauga*. 2010 [cited 2010 January 6]; Available from: <http://www.mississauga.ca/portal/residents/getactivemississauga>.
6. Canada. *2006 Community Profiles - Mississauga*. 2010 [cited 2010 March 11].
7. Allison, K.R., et al., *The decline in physical activity among adolescent students: a cross-national comparison*. Canadian Journal of Public Health, 2007. **98**(2): p. 97-100.
8. Irving, H.M., et al., *Canadian Journal of Public Health*. 2003, Trends in vigorous physical activity participation among Ontario adolescents. **94**(4): p. 272-274.
9. Nader, P.R., et al., *Moderate-to-vigorous physical activity from ages 9 to 15 years*. JAMA, 2008. **300**(3): p. 295-305.
10. Findlay, L.C., R. Garner, and D. Kohen, *Children's organized physical activity patterns from childhood into adolescence*. Journal of Physical Activity & Health, 2009. **6**(6): p. 708-715.
11. Thompson, A.M., et al., *Physical activity of children and youth in Nova Scotia from 2001/02 and 2005/06*. Preventive Medicine, 2009. **49**(5): p. 407-409.
12. Hallal, P., et al., *Adolescent physical activity and health: a systematic review*. Sports Medicine, 2006. **36**(12): p. 1019-1030.
13. Pearson, N., et al., *Patterns of adolescent physical activity and dietary behaviours*. International Journal of Behavioral Nutrition and Physical Activity, 2009. **22**(6): p. 45.
14. Sallis, J.F., *Age-related decline in physical activity: a synthesis of human and animal studies*. Medicine & Science in Sports & Exercise, 2000. **32**(9): p. 1598-1600.
15. Loucaides, C.A., R.C. Plotnikoff, and K. Bercovitz, *Differences in the correlates of physical activity between urban and rural Canadian youth*. Journal of School Health, 2007. **77**(4): p. 164-170.
16. Goh, Y.-Y., et al., *Using community-based participatory research to identify potential interventions to overcome barriers to adolescents' healthy eating and physical activity*. Journal of Behavioral Medicine, 2009. **32**(5): p. 491-502.
17. Hohepa, M., G. Schofield, and G.S. Kolt, *Physical activity: what do high school students think?* Journal of Adolescent Health, 2006. **39**(3): p. 328-336.
18. Dwyer, J., et al., *Adolescent girls' perceived barriers to participation in physical activity*. Adolescence, 2006. **41**(161): p. 75-89.

19. U.S., *Dietary Guidelines for Americans, 2005*. 2005, Department of Health and Human Services, Department of Agriculture: Washington, DC.
20. Canada. *Canada's Physical Activity Guide for Youth*. 2005 [cited 2010 March 11].
21. Bedford, T. and J. Burgess, *The focus group experience*, in *Qualitative Methodologies for Geographers: Issues and Debates*, M. Limb and C. Dwyer, Editors. 2001, Arnold: London. p. 121-135.
22. Hughes, D. and K. DuMont, *Using focus groups to facilitate culturally anchored research*. American Journal of Community Psychology, 1993. **21**(6): p. 775-806.
23. Asanin, J. and K. Wilson, *"I spent nine years looking for a doctor": Exploring access to health care among immigrants in Mississauga, Ontario, Canada*. Social Science and Medicine, 2008. **66**: p. 1271-1283.
24. Poland, P., *Transcript quality as an aspect of rigor in qualitative research*. Qualitative Inquiry, 1995. **1**(3): p. 290-310.
25. Flick, U., *An Introduction to Qualitative Research Third Edition*. 2006, Thousand Oaks, California: Sage Publications.
26. Morse, J.M. and L. Richards, *Readme First for a User's Guide to Qualitative Methods*. 2002, Thousand Oaks, California: Sage Publications.