


Practice case study

Exploratory conversations: reflections on developing a triad interview method

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Abstract

Although dyad interviews have become more widely used in research, little has been published about a triad interview approach, in which two interviewers guide an engaged, three-way conversation with an interviewee. We describe our experience of developing online triad interviews within a participatory health research project that explored different stakeholders' experiences of a young people's cancer service in the UK. A defining characteristic of this research was the practical involvement of community members with different experiences of cancer, who worked as co-researchers in community-academic partnership. The decision to develop the triad interview method was emergent. It centred upon the connectedness of a clinical researcher, a companion co-researcher and a participant interviewee around a topic of shared experience. We first describe, and then reflexively appraise our development and enactment of this method, exploring how perspectives such as positionality and enhanced rapport impacted our exploratory interview conversations. We suggest that triad interviews are an underexplored qualitative research method, and we propose that, as an explicit practice, they could be highly beneficial in some person-centred research contexts.

Keywords triad interview; cancer; interview methods; participatory research; community-based participatory research

Key messages

- The triad interview, comprising two interviewers and an interviewee, is a less commonly reported approach in qualitative research. This case study creates space for others to appraise the potential of triad interviews in the context of their own research practice.
- The triad interview was found to be beneficial on a relational level, centring the interconnectedness of the three members and the research topic within a three-way exploratory conversation.
- We propose that triad interviews could be highly beneficial in some person-centred research contexts, and we explain how the presence and engagement of a co-researcher with relatable experience positively contributed to interview conversations and the data generated.

Introduction

Although joint interviewing (Polak and Green, 2016) and dyad interview approaches (Morgan et al., 2013) have become more widely employed in qualitative research, a triad interview approach, in which two interviewers guide a three-way conversation with an interviewee, is less commonly reported in the methods literature. We describe our experience of developing online triad interviews within a participatory health research study that explored various stakeholders' experiences of a young people's cancer service in London, UK. We aim to illuminate the potential of an approach which currently sits outside methodological norms.

A defining characteristic of our wider research was the practical involvement of co-researchers with an interconnected, yet distinct experience of cancer, who came together in community–academic partnership (Chubb et al., 2021). Embedding a community-based participatory research ethos (Wallerstein et al., 2018), the study foregrounded both the participatory intent (Brown, 2021) and the relational nature of engaged research (Duncan and Oliver, 2019) as its methodological anchor. In essence, all elements of the study design gave prominence to human connection – those accessing cancer care, their companions (parents or other adults who accompany the young person), staff and researchers – which coalesced around shared experience or understanding of young people's cancer.

Oxford Learner's Dictionaries (2022) defines the noun *triad* as 'a group or set of three related people or things'. While other dictionary definitions emphasise the need for similarity between the people or things making up the group (Collins English Dictionary, 2022), consistent across all definitions are the concepts of connection and relatability. Our titling of the triad approach came after the method had been enacted in practice. It was only through our reflection upon the dynamic we had created that we were able to see and understand the contribution of our unique yet interconnected standpoints.

Working together as co-researchers we – Sadhia and David (co-researchers with family experience of cancer) and Alison (a cancer nurse and doctoral researcher) – describe our experience of developing a triad interview approach, reflecting on the characteristics of the method, and its merits as a communicative space in a research context.

Developing the triad interview approach

When a third party is involved in a medical consultation, it is known as triadic communication (Smith et al., 2020). Less commonly reported in academic literature, the interview method that we developed comprises two interviewers and an interviewee. The result is a connected, three-way interview conversation. In this case, it was framed by a topic guide that balanced two aspects – experiences of care, and future service development.

The decision to work with this interview approach was emergent. It was initially put forward in spring 2021 by one of the companion co-researchers, Sadhia, who questioned why the original research plan

proposed different interview approaches for the three participant groups. While peer-to-peer interviews were planned for the young people participant group, the staff and the young person's companion groups were planned with interviews undertaken by the lead researcher alone. It was suggested that this might overlook what we understood to be the potential merits of peer interviewing in our interviews with companion groups: a shared connection and relatable experience.

Alison had originally planned to interview companions one-to-one. Considering it beneficial to retain a closeness to participants' first-hand experiences, she had anticipated, as a doctoral researcher, that she would also need to demonstrate credibility enacting the interview methods. However, committed as she was to the ethos and principles of participatory research – research being scaffolded by a genuine commitment to sharing power and decision making – Sadhia's suggestion of a two-to-one method was welcomed. A series of conversations between Alison and Sadhia ensued, where they mapped out the practicalities of how different two-to-one interview configurations might work and the ethical considerations raised by a change to the proposed data collection approach.

A search of the literature at this time identified no known precedents for a two-to-one interview method. One article, by [Matteson and Lincoln \(2009\)](#), states how, due to time constraints, their last scheduled interview was conducted with both interviewers present. However, this seemed to be spontaneous, and no further details are reported. Other references online to a two-to-one interview approach focus upon job interviews as the contextual setting.

Met initially by some reservations from academic colleagues about engaging in an unconventional approach, Alison and Sadhia noted their growing appreciation for the methodological potential of a two-to-one interview as a supportive environment for an exploratory conversation with companion participants about experiences of accompanying a young person during cancer treatment. Having considered the nature of the interview topic, the likely virtual interview context, and the skill required of a lone interviewer to remain present and engaged, while simultaneously alert to the non-verbal cues of participants during an online interview, they tentatively suggested that it might be possible to hold a conversation of this nature more attentively with two interviewers working alongside one another.

The purpose of the interview was revisited: its intent was not only to better understand participants' experiences of care, but also for the conversation to be of service to future healthcare delivery. Sadhia and Alison wondered whether partnering as interviewers from different experiential standpoints could successfully facilitate an interview conversation that balanced both research aims. Alongside this was a sense of curiosity about how participants' knowledge that one of their interviewers had personal experience of cancer might contribute to the interview dynamic, and to the data collected.

The fact that the study had an established team of volunteer young adult and companion co-researchers, invested and practically engaged in each phase of the wider research project, felt critical to the method proposed. Sadhia and Alison discussed their conversations with David, the second companion co-researcher in the team, which led to him taking the role of interviewee in a pilot of the interview approach. Working with the topic guide planned for use with companion participant interviews, they engaged as a triad in a one-hour virtual interview conversation about an aspect of his son's cancer journey. They reviewed this interview encounter in conversation together, exploring not only the procedural steps involved in enacting the interview, but also the extent to which David felt psychologically safe, held and able to contribute. Having carefully considered the safeguarding considerations of bringing David and Sadhia more tangibly into data collection, approval was given to introduce the interview method by study amendment from London – Chelsea NHS Research Ethics Committee in February 2021. The revised participant information and written consent sheets stated that interviews would take place with a cancer nurse and PhD researcher (Alison), who would be joined by a co-researcher with experience of supporting a young person through cancer treatment (David or Sadhia). Being interviewed by two interviewers was presented as an option to companion interviewees; consenting participants could choose a one-to-one interview with Alison, if they preferred.

The triad in action

Thirteen companions were recruited for this phase of the research, and all chose to be interviewed by two co-researchers. Interviews took place virtually – twelve between May 2021 and January 2022, and one in June 2022. They were typically scheduled for an hour in the evening time. The mean average interview time was one hour (range 42 to 85 minutes). After the first triad interview, and again midway through recruitment, we paused to review our enactment of the approach. Initially, we wanted to see signs that the interviewee felt safe and able to engage comfortably in conversation. Subsequently, after each interview, we made notes about the interview dynamic, capturing our thoughts about individual and collective contributions to the communicative space, and about the qualitative data collected. The topic guide was also reviewed to see whether revisions to our line of questioning were needed to help better attend to the research questions, or to be of service to data interpretation (and reinterpretation) as data were being generated.

Each interview was audio recorded in preparation for data analysis. As the study worked with a value-adding analytical approach (Eakin and Gladstone, 2020), the interview context was also considered within our analysis of the interview data. In value-adding analysis (Eakin and Gladstone, 2020: 4), the researcher is 'expected to strive for presence rather than absence in the research process'. We considered our respective roles, interviewing style and gender from the perspective of how these may have contributed to the qualitative data collected, and to the meaning derived from these data. When working with interview transcripts during analysis, a decision was made to additionally categorise and code transcript data which corresponded to the triad method. This resulted in the generation of three broad groupings: *relatable experience*, *enhanced rapport*, and *other*, which were used as the basis for reflexive consideration of this interview approach.

Reflection on action

On reflection, we determined that critical to the interview dynamic co-created was that it coalesced around a shared experience of cancer. This led to our appropriation of the noun *triad* to define the interview configuration and dynamic that had been created. Distinct from the Association for Qualitative Research (AQR, 2012–22) description of a triad comprising a researcher and three participants, the triad in this context comprises two interviewers and an interviewee. This triad interview emphasises relational connection, striving for equalised or more balanced distribution of power.

Relational connection

After introductions at the start of the interview, the companion interviewer opened and led the conversation. This helped to set the tone for the interview, and for it to be less tethered to a list of questions than an interviewee might have imagined, and it established, in each interview, a collaborative, person-centred conversation. Interviewees frequently referred to David and Sathia by name during interviews. Relating as peers, they sometimes took the opportunity to gauge what might be normal in their circumstances. 'What was your experience, Dave?', asked one father. A different parent, while responding to a line of enquiry tested out, 'I'm sure it's been the same for yourself with your family member, Sathia?' This type of compassionate curiosity was often naturally present throughout the interview conversation. When not posing a question, the other interviewer would often remain quieter, contributing less content to the conversation. This format created space for the second interviewer to read the virtual room, and to notice more affective aspects. Working together as interviewers, this facilitated a very natural integration of follow-up questions into the three-way conversation.

Merits of the communicative space created by the triad method

There was evidence that the presence and engagement of a companion co-researcher positively contributed to the interview conversations and qualitative data collected. What emerged was that the

companion interviewer's and companion interviewee's recognition of each another's shared experience benefited the interview conversation. Central to this was the notion of relatable experience. There were consistent signs that interviewees felt that they were engaging in conversation with peers who intuitively understood. 'I feel like it is the first time that he's spoken to people who really understand', co-researcher David said in a review meeting, remarking how 'this speaks to the positives of having peer interviewers in this research'. Compassionate curiosity alongside positive regard for one another as companions was apparent. Often, there was little factual detail shared about cancer diagnosis or treatment; interviewees felt no need, as there was a clear unspoken sense that they knew they were talking with someone who comprehended their world.

'There is a strong sense of connection in almost all the companion interviews that I've done. I've felt it', David said, following his last interview. This extended our consideration of related experience to a broader frame which foregrounded human connection amid shared understanding of cancer experience. 'It's the first time I've really spoken with people who have a good understanding of what I'm going through and what we are going to be going through', said one father. This comment, like others, brought Alison into focus as someone who also understood, from a different yet related perspective.

Reflexive consideration of the interview dynamic

The interview dynamic created space and time for an exploratory conversation that centred the experiences of young patients' companions – an aspect of care that can be difficult to fulfil alongside the pressures of clinical practice (Finch, 2023). Taking part in research asks participants to share their time and thoughts, and the fact that the conversation was seen as reciprocally beneficial is upheld as positive. Yet this was a conversation with a research purpose, and Alison's role in the triad was perceived by Sadhia and David to be key. It helped maintain forward momentum in the conversation, which extended its focus beyond an exploratory conversation about experience. When Alison posed questions, interviewees' responses were naturally different, and more oriented to service development. However, consistent within and throughout the interviews were signs that interviewees felt safe to disclose feelings, vulnerabilities or anxieties to both interviewers. 'It's unspoken; in fact, it's the first time I've articulated this to anyone', one parent said. Another confided: 'In the cancer ward, you see a lot of young people with a limb missing, and I will tell you, and I don't think I've told anyone else, that I was worried it could be the outcome for my son.'

Beyond the relationship between interviewer and interviewee, another strength of the triad was the relationship between the two interviewers, and how this informed the interview data generated. Time was taken to explore this dynamic, and how Alison's presence as a healthcare professional and academic researcher impacted the interview conversation. She was not known to participants, and this may have contributed to the creation of a safe space to talk candidly, which was evident through the interviews. It would be naive to suggest that participants' dialogue would have been completely unfiltered. However, on balance, David and Sadhia thought that their partnering with Alison helped to build confidence among participants that their contribution to the research would be taken forward by a professional with a mandate to inform practice, who was hearing their experiences first hand.

We reviewed our differences in interview style. David sometimes referred to his own experience during interviews, offering a scaffolding for participants to respond with their experience. This differed from Sadhia, who shared little about her personal experience. Alison observed that this did not discernibly have an impact on the length of the interview, on the length of time that participants spent talking, or on the nature of what was being shared. This supports our view that it is the interview conditions co-created that are pertinent, rather than an interviewer's particular technique. We noticed no discernible difference in the impact of Alison, David and Sadhia's gender or ethnicity on the metrics or feel of the interviews. Alison considered the potential differences had she not been a cancer nurse, but a more general PhD researcher. She recollected times when she had acknowledged participants' situations, and had responded akin to the way she would work intuitively in practice. The fact that Alison was a cancer

nurse became, in different ways, an inherent part of the dynamic of the interviews; with a different triad, a different dynamic would be co-created.

In essence, engaging together in partnership to interview companions helped generate diverse and rich data that responded to both research aims. There was notable assurance during the interview, and in the debrief afterwards, that taking part in a conversation of this nature felt comfortable for participants. In some cases, interviewees described their experience as cathartic – however, this may convey an unmet need for emotional support, as much as the merits of the triad interview.

New literature

While preparing a draft of this article, Alison re-visited the literature for published examples of a triad or two-to-one interview method. While Alison and her co-researcher colleagues had been enacting triad interviews, PhD researchers [Monforte and Úbeda-Colomer \(2021\)](#) published their use of a two-to-one interview approach. Working as a 'joint research instrument' ([Montforte and Úbeda-Colomer, 2021: 2](#)), and through the lens of constructionist enquiry, they reflect on their development of a two-to-one in-person interview, within a qualitative research project studying aspects of physical disability participation among Spanish university students. Finding their publication felt timely. [Montforte and Úbeda-Colomer \(2021\)](#) describe using the simultaneous and active involvement of two interviewers to realise what they describe as the potential of an approach that extends beyond methodological prescription. Citing [Smith and Sparks \(2016\)](#), they emphasise the social, embodied and joint construction of knowledge as interviewer(s) and interviewee interact in ways which uphold the relational basis of qualitative interviews.

Also around this time, academics [Velardo and Elliott \(2021\)](#) published their experience of 'co-interviewing' six doctoral students about a topic related to emotional well-being. Citing an earlier example of co-interviewing from the practice of [Rosenblatt \(2012\)](#), they outline their particular interview approach. While sharing some commonality with our experiences of developing the triad interview, [Velardo and Elliott's \(2021\)](#) reflections on the merits and considerations of their co-interviewing approach do not address the role that, in our experience, shared experience and empathy play in bridging and balancing each party's contribution to the interview conversation.

The supportive triad

The two-to-one interview is distinct from another kind of supportive or facilitated conversation. It is a 'coming together' in a conversation with a clear purpose, namely, to help support answering a research question. Consistent among definitions of 'triad' is the concept of relatedness or relatability. The triad interview upholds the design integrity of the two-to-one interview developed by [Montforte and Úbeda-Colomer \(2021\)](#), and it has similarities with the co-interviewing described by [Rosenblatt \(2012\)](#) and [Velardo and Elliott \(2021\)](#); yet, it is distinguished by virtue of a characteristic that pivots around related experience of the research topic. Furthermore, rather than 'double teaming' as interviewers, it foregrounds a dynamic three-way conversation. We tentatively suggest that the triad interview approach creates the conditions to facilitate a purposeful conversation that generates *authentic* insight into people's experiences. Authenticity in this context refers to the possibility of social desirability bias within more traditional interview formats ([Bergent and Labonté, 2020](#)), where interviewees may be more inclined to give socially acceptable responses to an academic researcher, which may not be wholly reflective of their reality. Genuine insight may, we propose, have been further facilitated through our selection of the value-adding analytical framework ([Eakin and Gladstone, 2020](#)).

The interview dynamic was found to facilitate dialogue during which, in our experience, participants felt held. While attending to a clear research imperative, there were signs that the triad interview creates conditions for a conversation that can feel personally supportive, beyond the research endeavour per se. However, the fact that we were trusted members of a research team, practically engaged in the whole

project, is foundational to the enactment of our triad interview approach. We would be hesitant to propose the use of the method among three interviewers brought together for the purposes of data collection only, or in circumstances where there is no coalescence around a research topic.

Conclusion

Although dyad interviews have become more widely used in research, little has been published about a triad interview approach, within which two interviewers guide an engaged three-way conversation with an interviewee. This article describes our experience of developing online triad interviews within a participatory health research project that explored different stakeholders' experiences of a young people's cancer service.

The decision to develop the triad interview was emergent, foregrounding the connectedness of a clinical PhD researcher, a companion co-researcher and a companion interviewee, with the opportunity to build a rich understanding of cancer experience. Through our piloting of a triad approach, perspectives such as positionality and enhanced rapport (Harris, 2015; Monteforte and Úbeda-Colomer, 2021) have been seen to positively impact exploratory interview conversation. We concur with both Monteforte and Úbeda-Colomer (2021) and Velardo and Elliott (2021) that 'two-interviewer interviews', however they are defined, are an unnoticed, and perhaps neglected, qualitative research method. We propose that triad interviews could be highly beneficial in some person-centred research contexts, and we tentatively suggest that they may be an underexplored methodological practice. We hold our thoughts on this approach under review, and we invite discussion and feedback on this interview approach. Additionally, we remain curious about the extent to which the perceived strengths described would be similar or different in an in-person interview context.

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Authorship statement

AF, SA and DC planned and conceptualised the triad interview approach and engaged in enacting the method and its reflexive review. AF prepared the initial manuscript, and all authors participated in editing and approved the article in its final form.

Declarations and conflicts of interest

Research ethics statement

The authors declare that research ethics approval was provided by London – Chelsea Research Ethics Committee in September 2020, which included Health Research Authority (HRA) approval for the research associated with this article and study amendments, where appropriate.

Consent for publication statement

The authors declare that research participants' informed consent to publication of findings – including photos, videos and any personal or identifiable information – was secured prior to publication.

Conflicts of interest statement

The authors declare no conflicts of interest with this work. All efforts to sufficiently anonymise the authors during peer review of this article have been made. The authors declare no further conflicts with this article.

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