



## La investigación etnográfica en enfermería: una metodología cualitativa alternativa para comprender la experiencia del paciente

### Ethnographic research in nursing: an alternative qualitative methodology for understanding patient experience

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#### Abstract

El propósito de este artículo es abordar los fundamentos para iniciar una investigación cualitativa etnográfica en el ámbito de la enfermería. Esta metodología, originada en la antropología, destaca por su cercanía con los sujetos de estudio, considerados como actores sociales clave. Su implementación implica una observación participante y contacto directo, además de una relación dialógica activa, reflexiva y crítica. Asimismo, esta metodología presta una especial atención a las formas de pensar y actuar de los individuos bajo estudio, lo que facilita la comprensión de sus modos de reacción, pensamiento y sentimiento ante situaciones de salud-enfermedad. Esto permite analizar las relaciones sociales y culturales, así como comprender las subjetividades que prevalecen en el contexto investigado.

**Palabras clave:** investigación cualitativa, etnografía, enfermería, experiencia del paciente.

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## Resumen

The purpose of this article is to address the foundations for initiating qualitative ethnographic research in the field of nursing. This methodology originated in anthropology and stands out for its closeness to the subjects of study, considered as key social actors. Its implementation involves participant observation and direct contact, as well as an active, reflexive, and critical dialogic relationship. Likewise, this methodology pays special attention to the ways of thinking and acting of the individuals under study, which facilitates the understanding of their ways of reacting, thinking, and feeling in the face of health-illness situations. This makes it possible to analyze social and cultural relations, as well as to understand the subjectivities prevailing in the context under investigation.

**Keywords:** qualitative research, ethnography, nursing, patient experience

## Introduction

The main purpose of this article is to inspire both experienced professionals and students who wish to enter the exciting field of qualitative research; at the same time, it is intended to provide an accessible and didactic reading that promotes disciplinary understanding based on the epistemological, methodological, interdisciplinary, transdisciplinary and multidisciplinary reference offered by ethnographic studies in nursing.

Ethnography is a valuable research tool for the discipline known as ethnonursing, which focuses on the study of the subjective and social dimensions of human experience. Its origins are located in anthropology, particularly in Bronislaw Malinowski's proposal developed in his work *Argonauts of the Western Pacific* (1922). This work presents significant narrative elements on the economic culture and adventurous life of the inhabitants of the Trobriand Islands of the Melanesian New Guinea Archipelago.

This method, which was also used by Franz Boas (1889-1940) and later by Clifford Geertz (1960-2002), is based on observation and meticulous collection of empirical data; both Boas and Geertz emphasized the importance of in-depth interpretation of cultures and their representative texts to understand their meanings.

Let us begin by exploring the etymological roots of ethnography, which are found in the Greek words *ethnos* (tribe, folk, people) and *grapho* (trace, writing, description in writing), which can be interpreted as the description of people in writing. Ethnography is a complex approach, widely used in various disciplines, such as anthropology, sociology, education, psychology, and, very recently, nursing.

## Development

Ethnography can be considered as the written representation of communities, which allows the researcher to narrate experiences close to its members and forge a description and

interpretation of these conceptual structures. This is done from the perspectives of sociology and anthropology, disciplines that provide us with the ability to understand people as subjects, thus revealing their meanings and experiences.<sup>1,2</sup>

This kind of research was first proposed in the field of nursing by Madeline Leninger in 1960, who proposed the interpretation of the term care as a polysemous entity that can be studied from multiple perspectives. One of these is based on culture, and has been named “*cultural studies of care*”. This approach allows us to explore the experiences of diverse cultures, which, in nursing terms, implies that we must respect and understand the values, beliefs, and ideals of each population we serve.<sup>2,3,4</sup>

Qualitative research methods, such as ethnography, are not only limited to description but also include explanations according to a theoretical construct, thus going beyond a mere representation and deepening the understanding and explanation of the phenomena studied.<sup>2</sup>

The development of fieldwork involves the complete immersion of the researcher in the contextual environment of the group or community being studied; the main objective is to obtain a deep understanding of the cultural practices, beliefs, values, and norms of that environment. In other words, this approach focuses on the study of the reality of individuals or groups from their context, intending to describe and understand how cultural and social practices are constructed in specific environments.<sup>5</sup>

This perspective has found wide application in the social, human, and health sciences, and allows the application of methods of analysis such as the hermeneutics of Georg Gadamer and the phenomenology

of Edmund Husserl and Martin Heidegger. These philosophical currents can provide epistemological scientific support for both the social and health sciences, facilitating a deep understanding and interpretation of the social and cultural reality of both individuals and the communities studied.

In this context, ethnonursing acquires great relevance in the field of the discipline. Therefore, it is necessary to rethink its use in the different areas of health care as a space for professional development at the three levels of care: the community at the first level of care, clinical care at the second level, and specialized care at the third level. Likewise, its application in other scenarios becomes essential to address multicausal circumstances involving the health-illness binomial.<sup>6</sup>

Considering the distinction between the different fields of research and the dimensions related to the practice of care, these advances have posed challenges within the nursing paradigm, as pointed out by Fawcett. Consequently, the epistemological location of nursing has been established in the field of knowledge in the science and art of care, encompassing a variety of aspects, including the organic-biological, the emotional-relational, and the social-cultural.<sup>7</sup>

Now, ethnographic research can address healthcare at different stages of human life and consider how people’s perspectives and experiences of health and illness change as they age or move through these different phases.<sup>8</sup>

As pointed out by Guber,<sup>9</sup> the use of the ethnographic method by the researcher in the health-disease field implies the consideration of three fundamental aspects: approach, method, and text. Approach refers

to the orientation or perspective from which the study is approached; in the context of health-illness, it implies analyzing the subjects of study from different points of view. Method refers to the processes and techniques for collecting and analyzing data and integrates participant observation, interviews, and focus groups, among other data collection techniques. The text includes written reports that present the results of the ethnographic research, which are fundamental to communicating the findings clearly and coherently.<sup>10</sup> These aspects are essential to address the concepts needed to understand social phenomena from different perspectives. Likewise, through observation and description, the reports seek to explain the causes of the events and to fully understand what happened.

It should be emphasized that the purpose of this method is interpretation, a description that serves to recognize the explanatory frameworks according to which the actors participating in this research describe and classify behavior, as well as those that give meaning to each of the behaviors recorded in the reports issued to explain the causes, to understand in depth how people experience attributing very particular meanings to their health-illness experiences.<sup>11</sup>

The main objective of the ethnographic method in the context of health-disease is to constitute a useful, practical, simple, and accessible tool for those who use it in their research, as well as to encourage active practice based on the exchange of information both with researchers and with those who collaborate in the research.<sup>12</sup>

This methodological approach leads us to raise a series of essential questions related to various

aspects of health-disease and the assumptions that surround them:

- Regarding the way of being and decisions: *what factors influence the decisions that people make about their health, and how are these decisions influenced?*
- In doing (subjectification): *what are the specific actions that people carry out in their healthcare processes, how are their beliefs and knowledge reflected in the actions or decisions they take, and how do they experience and live the experience of illness and treatment in their daily lives?*
- In corporeality and emotions: *what is the physical experience of people about their health or illness, how do emotions and emotional states influence the experience of health or illness, and what meanings do they give to their experiences of health or illness from their emotional perspective, among others?*<sup>12</sup>
- Interaction with a specific disease: *how do people interpret and understand a particular disease, how does this interpretation impact their responses and coping strategies, what are the factors that shape their perception of the severity or relevance of a specific disease, and what are the factors that shape their perception of the severity or relevance of a specific disease?*

On the other hand, the information obtained from this methodology provides a better understanding of the role of the nursing professional in his or her field of research, as well as a myriad of premises for intervention. The data recorded allow for determining the most appropriate interventions for processes such as promotion, prevention, evaluation, follow-up, and treatment. In addition, it highlights the role of the professional in this area in the health process, and their participation in inter, trans and multidisciplinary teams.<sup>13</sup>

According to Guber,<sup>12</sup> the application of the ethnographic method involves fieldwork, that is, going to communities, schools, hospitals, and institutions to understand and describe in detail the way of living, coexisting, and surviving of the participants, despite the problems and difficulties that may arise from it.

The observations made clearly show that during these health-illness processes, strong relationships can be established between researchers and an extensive network that includes families, friends, neighbors, and informants. These relationships are conducive to cordial treatment and unfold in a variety of social, cultural, political, or economic contexts, and allow for the analysis of behaviors during the research process and for addressing specific situations that foster social interaction among the people involved.<sup>9</sup>

Concerning the above, the researcher can take on the task of becoming familiar with the place where the phenomenon he/she wants to identify takes place. Likewise, the researcher can be subjectively involved in the experience of how he/she develops in the field and the interaction with people, when establishing communication with them. According to Restrepo, a prominent Colombian researcher and anthropologist, in his book *Etnografías alcances, técnicas y éticas*, ethnography is comparable to the trade of fishermen or artisans, since it is only learned from the practice itself, as the path is forged.<sup>13</sup>

Following the reasoning that has been presented, no one can be an ethnographic researcher if he or she is limited to the understanding of others or the comfort of their study; it is necessary to exercise this approach in the broad field of knowledge that is generated around people, in their individual

as well as community daily lives. In this way, the deep sense of their social, geographical, and cultural context is enabled, and their places of work, home, neighborhood, or community can be observed.<sup>13</sup>

Within the framework of the above observations, ethnography is conceived as the interaction and involvement with human reality seen from a multicultural point of view. Likewise, it is free for interpretation, so researchers can forge quests for knowledge by developing new concepts that fit social realities. Consequently, ethnography is transformed through the dominant paradigms, an example of which is nursing, which in its short historical trajectory has evolved as a scientific discipline that proposes multiple models and theories of care as principles.

In their book *Nursing Theorists and Models*, Marriner and Raile mention the work of prominent nursing theorists such as Nightingale (1859), Peplau (1952), Henderson (1955), Orem (1959), Abdellah (1960), Hall (1961), Orlando (1961), Johnson and Travelbee (1964), Wiedenbach (1964), Levine (1969), Rogers (1970), King (1971), Roy (1971), Neuman (1975), Watson (1979), Leininger (1981), Pender (1982), Rogers (1982), Benner (1984), Newman (1986), and Parse (1989). Their theoretical work is frequently applied to establish nursing paradigms in clinical practice.<sup>14</sup>

These elements are the basis of nursing practice, the object of study of which is care. Now, according to Hernández-Garre and Maya-Sánchez,<sup>15</sup> from the anthropological point of view, care is conceived as "*an evolving phenomenon subject to the historical-cultural tensions and cultural pressures that shape any*

*human reality*". Therefore, nursing practice focuses on providing care that is culturally coherent. These comprise the acts and decisions of assistance, support, facilitation, or enablement that cognitively conform to the cultural values, beliefs, and ways of life of individuals, groups, or institutions, to provide meaningful and helpful wellness or health care services.<sup>15</sup>

All this seems to confirm that ethnography consists of detailed descriptions of personal situations and events, interactions, and observable behaviors, incorporating the experiences, attitudes, beliefs, thoughts, and reflections shared by the participants as expressed by themselves.<sup>16</sup>

The researcher uses an ethnographic methodology to try to understand and interpret people's experiences and meanings, which affect diverse realities, some of them complex concerning the health-disease binomial. These processes of knowledge transformation are valid and reliable because they even consider geographical aspects that provide valuable data to both institutions and health personnel. Through this dynamic, new lines of interest for research emerge, which motivate researchers to contribute to the accompaniment of people in their vulnerability during the health-illness processes.<sup>17</sup> Likewise, different concrete examples to be examined are presented, such as self-care, the satisfaction of needs, the meaning of life in the face of illness, interactions between health personnel and the patient, and the different factors involved in seeking medical care.<sup>17</sup> In this way, responsibility for self-care in the face of life or death is explored with different factors, such as customs, beliefs, and expectations.

Therefore, we emphasize the relevance of kindness in the use of qualitative research, since it grants an epistemological and ontological meaning. In addition, it is necessary to consider ethical, political, and ethnographic aspects from a critical intercultural perspective. In short, this allows for an active approach to people's illnesses, as opposed to the hegemonic thinking that prevails in the field of health based on positivist thinking. The positivist approach, although widely accepted for performing statistical strategies to demonstrate measurable components for analysis, may exclude the understanding of people's ways of life, hence the importance of adopting a humanistic position in the different disciplines that address the issue of health.

It is anticipated that this text will open up questions for discussion, including: *how do we effectively conduct ethnographic research, and how can we access a person's experience of care?* An inescapable issue in providing care for people is the relationship between the abstract world of ideas - from the subjective point of view of emotions, feelings, and beliefs, among others - and concrete material realities. This establishes a multidimensional theoretical framework that contextualizes the forms of care for people in four dimensions: physical, psychological, cultural, and social and provides them with meaning and support.

It is common for the researcher to identify the problem he/she wants to address at the beginning of an investigation; however, as time goes by, it is frequent for these ideas to expand due to the problems and expectations of the researcher himself/herself, the characteristics of the subjects or places, as

well as the different conditions in which the events take place. Consequently, ambiguous or confusing aspects may arise that are constantly transformed when confronted with reality. Once the researcher takes on the role of participant observer or acting researcher, the use of data is made possible through other types of tools, such as co-participation, in-depth interviews, analysis of documents, and field diaries, which provide the informant with a vision of his or her life history in collaborative research, among other aspects.<sup>18</sup>

It is important to recognize fieldwork as a fundamental tool that allows us to explore the contextual, social, cultural, ecological, and economic-productive conditions of the people observed in the study. This allows a deeper insight into the culture and life of individuals through their experiences, which can help identify cultural, social, or emotional factors that may influence their health and recovery process. In this way, effective and person-centered intervention strategies can be designed that take into account their cultural and social context, as well as their needs, preferences, and other factors that influence the processes related to health and disease, as described by Calandrón.<sup>18</sup>

On the other hand, multiple methods can be used to help the researcher complement the required information, such as participant observation; this tool facilitates interaction with people and allows valuable information to be retrieved.

It is important to note that the researcher should especially consider that informants are individuals and, as such, should be treated with respect and dignity. In this regard, informed consent is based on a series of regulations, including the General Health Law,

the Health Law Regulations, the State Health Laws, the IMSS medical services regulations, the Mexican Official Standards NOM 012-SSA3-2012, the National Commission for the Certification of Health Establishments, and the Patients' Rights Charters (CONAMED).

These tools play a crucial role in protecting the rights of informants since they clearly and precisely notify them of the objectives of the research, the possible risks and benefits associated with their participation, as well as their right to withdraw at any time without negative consequences. On the other hand, it is the researcher's responsibility to ensure the preservation of the confidentiality of the data obtained, respecting the informants' privacy and avoiding any form of discrimination or stigmatization. In short, ethics in research is fundamental to guarantee the integrity and quality of the results obtained, in addition to maintaining the trust and credibility of the scientific community and the community in general.

It is imperative to point out that the researcher must transparently conduct himself/herself, i.e., provide complete and clear information about the study, its objectives, methods, and possible risks or benefits for the informants. It is also essential to respect confidentiality, i.e., the privacy of informants, ensuring that the information collected is used only for research purposes, which implies that measures are taken to protect it and guarantee its security.

Concerning compensation for the information obtained, the researcher must be sensitive to the economic and social conditions of the informants, that is, the compensation be fair, and appropriate to the particular circumstances of each case. On the other hand, it mustn't become a form of coercion

or manipulation to obtain the desired information; the researcher must be aware of the ethical implications of his or her work and take measures to ensure the protection and respect for the rights of the informants.<sup>19</sup>

According to Calandrón, in any research process, respect for privacy and confidentiality of information is essential to make assertive decisions, therefore, the researcher must establish certain measures to protect the identity and privacy of informants. Furthermore, the researcher must have the ability to communicate with informants to establish whether information can be shared publicly or not and to respect their decisions. In this sense, the researcher needs to agree with the informants on the forms of dissemination of the information, respecting the limits established by them.

For the researcher, it is essential to record the data he/she collects during his/her stay in the field, which can be done in a notebook. In this way, you can record your immediate reflections, highlight the aspects that seem most relevant, ask key questions, and establish closer communication with the informant or the people with whom you have established a social relationship. It is also advisable to create a field diary to record ethical-legal aspects, mind maps, reflections, and ideas for future questions, among others.<sup>20</sup>

Regarding data collection, the researcher must request permission from the community leader and inform him/her in detail about the research to obtain his/her authorization. Likewise, it is important to obtain the signature of the participants for the use of communicative techniques, as well as to capture their data, either through videos, voice

recordings, photographs, or other means, including in-depth interviews, mental maps, geographic maps, and anecdotes, among other methods, to gather relevant information about the problem under study and make deductions using logic or common sense.<sup>21</sup>

For this reason, it is necessary for the researcher to respect the privacy of information about people's lives and always consider professional secrecy; when requesting information, he/she should have the expertise to talk to the informant about whether or not it can be disseminated and respect his/her decision. Similarly, the researcher needs to agree with the informant on how the information may be disseminated, as there may be data that cannot be shared publicly.<sup>22</sup>

Concerning data analysis strategies, researchers can use a mental map to organize the problem identified from the research approach and find possible connections between the causal elements that directly and indirectly influence it. This process is carried out through data decomposition, which is divided into two dimensions: descriptive (*emic*) and interpretative (*etic*), as described by Medina.<sup>21</sup> The descriptive phase is inductive and focuses on the broad description of first-order categories and concepts. On the other hand, in the interpretative dimension, the emerging thematic nuclei and second-order concepts are united, and the qualitative vectors are shaped, allowing the deduction and interpretation of the data.<sup>21</sup>

The understanding of the phenomenon studied is achieved by combining the theoretical framework with the phenomenological hermeneutic approach during the analysis of data obtained through observations and interviews; this allows the creation of meta-categories,



categories, and subcategories that structure the information. According to Medina, there are different levels of ethnographic data analysis:

- Level 1: the researcher segments and identifies the units of meaning, grouping the descriptive categories, this can be achieved with the help of some support software to organize the information such as ATLAS.ti.
- Level 2: a system of emerging thematic nuclei or meta-categories is constructed.
- Level 3: qualitative vectors are identified through the interpretation of the data, making use of the theoretical framework.<sup>21</sup>

During this content analysis, the objective is to interpret the meanings that people confer to the observed phenomena, which allows a deeper understanding of the topic of study. To achieve this, a choice of writing design and knowledge analysis is carried out through data triangulation, i.e., different sources of information are compared, such as interviews, observations, field diaries, and data collected from different informants, among others. This is an important process in the analysis to corroborate the findings and ensure the validity of the results.<sup>22</sup>

This process continues until data saturation is reached, that is when sufficient information is obtained and the researcher has reached the point where he/she begins to plan the field trip and the next phase of the research process, which is the analysis and organization of the data, detailed above.<sup>22</sup>

The last stage is the analysis of information, which consists of a reflective and critical analysis, in addition to a conjunction of the theoretical framework with the conceptual framework, which provides the scaffolding for the construction of new empirical knowledge. The information consolidated in this step

becomes a kind of dialogue, that is, the reality of the data is unveiled, which gives validity and scientific rigor.

Sometimes, data collection is achieved in a few interviews, and other times, in multiple interviews and over a long period, which generates a large amount of valuable information to understand the phenomenon under study. These data are arranged in an organized manner through a large map of all the coordinates that are important for the research, other times the use of software can be of help for the understanding by categories of analysis.<sup>22</sup>

Ethnography understood as the interaction and involvement with human reality based on multiculturalism, is free of theoretical interpretation so that researchers can build knowledge searches by developing new concepts. Likewise, they can propose them from the results obtained, so that they are suitable to support clinical practice or involve theoretical aspects that can support nursing paradigms.<sup>23</sup>

In short, ethnography is about understanding and participating in the lives of different groups of people. It is a flexible way of studying human reality from diverse cultures. Through this approach, researchers can create new ideas and theories that aid in clinical nursing practice. However, when conducting this type of research it is crucial to consider ethical and political aspects, especially from a perspective that values diversity and is critical of possible biases. This implies treating the people who share information with respect, protecting their privacy and rights, and avoiding any form of discrimination or stigmatization

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