LETTER TO EDITOR

An Update on the Progress of the Revisited Qualitative Approach: Hyperinflation of Qualitative Papers in Iran

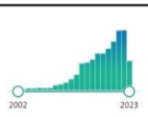
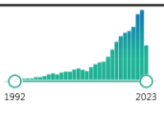
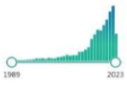
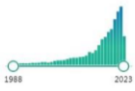
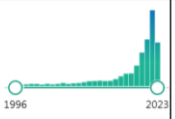
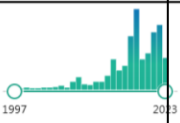
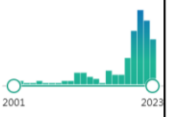
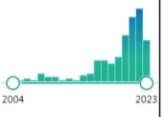
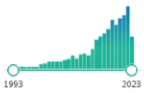
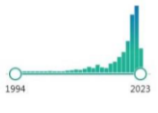
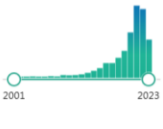
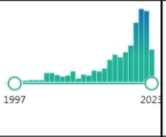
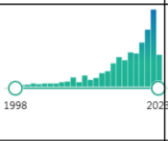
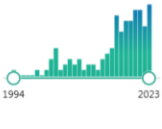
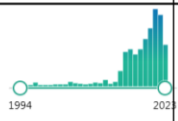
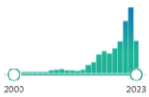
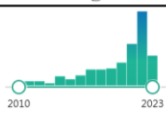
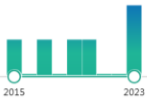
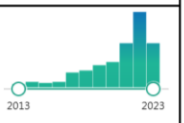
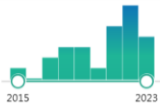
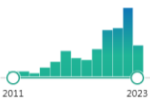
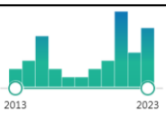
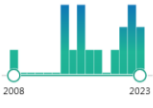
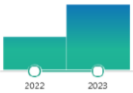
Nazila Zarghi[1], Seyed Reza Mazlom[1], Maryam Karbasi Motlagh[2], Amir Mirhaghi[1,*]
[1]Medical Sciences Education Research Center, Mashhad University of Medical Sciences, Mashhad, Iran
[2]Education Development Center, Tehran University of Medical Sciences, Tehran, Iran
*Department of Prehospital Emergency Care, School of Nursing and Midwifery, Pardis Daneshgah, Azadi Sq. Mashhad, 9177949025 Iran
Tel: +985138846730
Email: mirhaghia@mums.ac.ir

Dear editor,

As qualitative research is designed to reveal a range of behavior of the target participants as well as the driving perceptions concerning either specific topics or particular issues, they hold unique positions in health care research especially when they relate to human sciences such as sociology, psychology, and etc. (1). Considering all attractive and positive aspects of qualitative approaches in the positivistic end of the research spectrum and regarding the fact that a researcher should have a sense of plausibility during designing and conducting a study, sometimes a wrong pathway of qualitative research is presented especially in postgraduate programs. The pathology is rooted deeply in the poor relation between field problems and research especially in qualitative studies. The graduates, and researchers make the chains of this ineffective research pathway. Qualitative studies may be easily be disconnected from field problems and, so, not be used in clinical situations. In this context, the incraeingly growing number of qualitative studies is shocking (Figure 1) (2). To shed light on this issue, we decided to search the status through the following search strategy: ((qualitative [Title/Abstract]) OR (ethnograph*[Title/Abstract]) OR (grounded theory [Title/Abstract]) OR (phenomenolog*[Title/Abstract]) OR (discourse analysis [Title/Abstract])) AND (country [Affiliation]) AND (nurs*[Affiliation]). We found that the rate of conducting qualitative research in nursing sciences is more than that of the other medical disciplines. The increase in the number of qualitative studies was not only in Iran, but also in other countries such as Australia, Canada, Sweden and the USA during the last 20 years. Let's proceed with a straightforward comparison. To give you an idea, the gross national income (GNI) per capita of a country like the US is about 40 times greater than that of Iran. As to the georank website, the United States has a significantly larger economy and higher per capita income compared to Iran. In 2024, the US GDP was $20.5 trillion, while Iran's was $454 billion. The US also had a much higher GDP per capita, at $69,287, compared to Iran's $5,778.66. so, It is expected that the number of qualitative studies conducted in the United States exceeds that in Iran, because of the country's higher income levels and larger population. However, the ratio of the population to the number of qualitative studies is nearly the same across the examined regions; however, it is higher to some extent in Iran. Population to paper ratio is 48200 and 51074 for Iran and the US, respectively. This shows that one study has been done for every 50000 people. On the other hand, in some countries, such as Iraq, which are similar to Iran in terms of GNI per capita, the number of qualitative studies is less than 20, compared to 1722 cases in Iran. Interestingly, in some countries with higher GNI per capita than Iran such as Russia, a limited number of qualitative study has been reported during the last 20 years. Thus, the reason for this imbalance should be investigated.

In Iran, looking through a different lens showed us another image. The university's faculty members who passed their sabbaticals or postgraduate courses at British, Swedish, Canadian, and Australian universities are responsible for introducing qualitative research to Iran. As you see, in terms of the number of qualitative researches, our position aligns with that of these countries. Over the past 20 years, these individuals have focused on improving and proceeding qualitative methodologies through the support and influence of various authorities, such as “national boards”. The question is, how no effective regulatory process has emerged for monitoring their performance to modify this policy over the past 20 years. This situation offers a valuable lesson for other countries to avoid adopting similar ineffective approaches. To achieve a comprehensive understanding, let's look at some significant indices. The ratio of GNI per capita of countries to the number of qualitative studies (G/P r) can show how the policymaking could be matched with the general budget of a country. It is a notable index because it has been used for all countries alike. The lower this number is, it shows that the number of paper was high in proportion to the country's income. The alarming G/P r values are related to Iran, the UK, the USA, Australia, and Canada, whose values are less than 15.

Besides, the average of G/P r for the countries listed in figure 1, is 649.98, which is applied for further calculations. The Relative to Average (RTA) index shows the ratio of "G/P r average (649.98)" to (G/P r) of all countries in Figure 1. In fact, all countries can compare their ratio with the average of qualitative articles development as per their GNI by RTA. Obviously, when it is equivalent or close to one, it indicates the balance of the qualitative research development policies. The larger the RTA is, the greater share of qualitative research from the general budget of nursing research is in the country; it can also be a sign of indulgence in conducting such researches. When the value drops below one, it can indicate limited development in qualitative research in that country. The RTA index of Iran is

Country	Iran	UK	USA	Australia	Canada
Results by Year					
Paper count	1722	4236	6422	3948	3272
G/P r**	2.05	10.5	11.04	14.48	14.76
RTA***	317.07	61.9	58.85	44.89	44.02
Country	**China**	**Brazil**	**Pakistan**	**India**	**Sweden**
Results by Year					
Paper count	776	476	76	101	1419
G/P r**	15.31	16.26	19.34	21.29	41.96
RTA***	42.46	39.97	33.6	30.53	15.49
Country	**Turkey**	**Spain**	**Korea Rep.**	**Japan**	**Mexico**
Results by Year					
Paper count	285	561	542	394	84
G/P r**	34.74	52.92	64.78	108.25	114.17
RTA***	18.71	12.28	10.03	6	5.69
Country	**Netherlands**	**Germany**	**Portugal**	**Syria**	**Saudi Arabia**
Results by Year					
Paper count	412	278	103	4	87
G/P r**	133.98	185.83	231.94	232.5	255.98
RTA***	4.85	3.5	2.8	2.8	2.54
Country	**Iraq**	**France**	**Oman**	**Argentina**	**Russia**
Results by Year					
Paper count	12	81	20	10	1
G/P r**	396.67	545.19	897.5	996	116.1
RTA***	1.64	1.19	0.72	0.65	0.06

*Based on data presented in 2021 by World Bank[2] (https://data.worldbank.org/indicator/NY.GNP.PCAP.CD)
**Gross national income to paper ratio (G/P r) = GNI /paper count; Average G/P r= 649.98;
***Relative to Average (RTA)= (649.98)/(G/P r)

Figure 1. Number of Qualitative Studies in Countries

317, i.e. research budgets were used 317 times more to conduct qualitative research than the global average that is not even comparable to countries such as the UK (62), the USA (59), Australia (45) and Canada (44), from which we have borrowed this method. The question is how this severe imbalance has emerged and how the governing processes have failed to prevent the violation of the

universal rights of researcher nurses. The answer to this question can double the value of this letter so that such trends can be prevented and we will not witness the violation of nursing community rights in the financial constraints in the country. So, it might suggest that qualitative cancer has extended into other research domains, such as quantitative ones, thus challenging their efficiency.

Furthermore, although countries such as Sweden, Canada, and Australia are leading in this regard, compared to other countries, it should be noted that their per capita income is at least ten times more than that of Iran, which is therefore not comparable at all. If you look at the countries of the Middle East, they are far from Iran, which shows how far the qualitative research policymaking has deviated in Iran. Naturally, this qualitative research funding imbalance may lead to the devaluation in other sections.

Therefore, regarding all pros and cons, and keeping the strengths, the issue is the shocking excessive growth of qualitative studies in some countries. Providing innovative indexes by the authors could be helpful for estimating the optimal attention to the qualitative research and make a baseline for comparing the status of different countries. Although the letter explains Iran's status, the indexes could be applied for all countries alike. The suggested indexes could be applicable for policy makers to allocate the optimal budget to research as well as prioritize the research related to solving real problems in different contexts.

In a nutshell, a comprehensive integrated system is necessary to make strong relations between the health care industry and health care education. The delivered expressed needs of the industry should be recommended to health care education and research to find proper solutions. On the other hand, the attitudes towards the status of qualitative studies in Ph.D. programs seem to have changed. It is also helpful to choose proper approaches for solving the problems of community than insisting on using a specific methodology and proper indexes. Sharp research views and research expertise, therefore, sounds more important.

Ethical Considerations

Ethical issues including plagiarism, informed consent, misconduct, data fabrication and/or falsification, double publication and/or submission, redundancy, etc. have been completely observed by the authors.

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