

Goals of Research Design M. E. Swisher Fall, 2008

Three main goals of research design:

- 1. Allow you to have confidence that the conclusions you reach are justified
- 2. Let you extend your conclusions beyond the actual people involved in your study -- to other groups, places, and settings
- 3. Permit you to provide the most thorough possible explanation or understanding of the phenomena that you explore in your study

It is never possible to reach all of these goals perfectly. There is **no** research design that will permit you to accomplish all three goals completely. Your objective is to come as close as you can, given your constraints, to meeting all three goals. That does not mean that it's "OK" to simply ignore one of these goals of design. If you do so, your study will be seriously flawed. Therefore, you need to think about these three goals and build a design that will ensure that you come as close to possible in achieving all of them. Often, the best way to do this is through a multi-stage design -- to use two or even three of the different kinds of designs in one study. The different design groups and individual designs within them have different strengths and weaknesses. Combining them allows you to capitalize on their differences.

Internal Validity = Confidence in Your Conclusions

For some, internal validity refers to the degree to which you are able to establish causal relationships between two or more phenomena. This is the positivist sense of the term. However, many research questions are not "about" cause and effect and certainly from a realist epistemological perspective, direct cause and effect and even general "causality" are not the only, or even the primary, goal of scientific research. For us, internal validity is much more than simply demonstrating cause and effect; rather this concept refers to the degree of confidence that you can have that the conclusions you draw are justified or valid.

Sometimes, whatever our epistemological stance, we do want to show *direct cause and effect relationships*. This means that you can show that a change in one variable directly causes a change in another variable. For example, we know that there are direct causal relationships between a pregnant woman's use of drugs and all sorts of birth defects in babies. The mother's drug abuse causes physiological damage to the feotus -- directly.

More commonly for many researchers, we are interested in the more general idea of *causality*. For example, we know that there is a positive relationship between parents reading to young children and early cognitive skill development. The relationship is *directional* -- that is, the parents reading to the child comes *before* the cognitive skill development, a pretty sure sign that the relationship is *causal*. But it's not so simple as direct cause and effect. In fact, if all you do is sit around and read to your child, the child will probably develop all sorts of problems that delay cognitive skill development. Further, it's not a one-to-one relationship -- that every hour spent reading to the child results in a 0.01 increase in cognitive skills. Nonetheless, almost all experts conclude that there is a causal relationship of some sort between reading to your child and the child's cognitive skill development. It's probably not a *direct* causal effect where the reading really does cause the child to stimulate the development of neural connections. It's more probably an *indirect* causal effect. Maybe it's a calming effect of the parent's voice.

Maybe it's simply improved early self-esteem because the child is getting attention from people important in his/her life. Maybe it's simply that the child is "happier."

In many cases, we are really not even concerned much about "directionality" and "causality." Rather, we want to understand how different phenomena interact. For example, we can show that there is a positive relationship between socio-economic status and educational achievement. But which comes first? Is it that people with high socio-economic status tend to be able to take the time and money to achieve educationally? Or is it that people who have high educational achievement end up acquiring high socio-economic status? We don't know. All we can say is that these two phenomena generally **co-vary**. We really cannot tell whether one causes the other at all. Maybe it's some third factor that causes both higher socio-economic status and educational achievement.

Whichever of these we are talking about -- direct cause and effect, some sort of indirect or "mediated" effect, or simply co-variation with no way to tell if there is a causal relationship at all -- we want to be confident that our conclusion that a relationship does exist is correct. In it's broad sense, this is what internal validity means.

To establish internal validity, you need to develop a research design that allows you to do two things.

First, you want to provide positive evidence that the relationship that you claim exists does in fact exist. I poke you. You jump. That's positive evidence of direct cause and effect. I find a relationship between religiosity and attitude about same-sex marriage. That's positive evidence that these two attributes of a person are related, **but not necessarily in a causal way.**

Second, you want to eliminate other possible explanations. I put you in a soundproof room and poke you. That eliminates noise as a possible explanation for you jumping. I could put a blindfold on you, too. Then you wouldn't jump just because you saw me start to move. These are simple examples, but to eliminate alternative explanations is usually very difficult.

One approach is to try to eliminate or account for *non-experimental, confounding, or extraneous variables.* Except for the experimental group of designs, as a practical matter this means we need to eliminate or account for relationships that we already understand or know about. For example, you want to know why adolescents get involved in gangs. We already know that kids from poor families, kids in "bad" neighborhoods, kids who have a parent in jail, and kids in foster homes are more apt to become involved in gangs than kids from wealthier families, etc. These are well-established relationships and there is no reason to "re-study" this. Doing so will just cost you time and money and probably make it harder for you to understand the more universal processes and phenomena at work that lead kids to become a gang member. Why not study kids involved in gangs from intact, middle class households in nice communities? You haven't "eliminated" all non-experimental, confounding or extraneous variables, but you have "got rid of the obvious" so that you can concentrate on what we do not know.

Another good way to "eliminate other explanations" is to use a theoretically comparative approach in which you draw upon two or more "competing" theoretical explanations and see which one best explains your observations (your data). Again, you can't compare every relevant theory, but you can at least compare major "contenders" and move our understanding forward by finding out which one seems to provide the best explanation.

The take home lesson: do not just focus on providing positive evidence that your explanation is the "right" or valid one. Think about innovative ways to "rule out" other explanations or to move us past what we already understand and know.

Common Threats to Internal Validity

History: Outcomes are due to some random event

You measured rape incidence in December of 2005. Gainesville police put a rape prevention program into place. You measured rape incidence again in December 2006. Sure enough, the rape incidence was much lower in 2006 than in 2005. You think "Great. That program really worked!" However, it turns out that the average temperature in December 2006 was 10 degrees lower than in December 2005. Oops! Rape incidence declines when it's cold out. Now, because of a simple historical "accident" of having a really cold December in 2006, you can't tell if the program worked or not. To avoid "historical" effects, know the literature. That will steer you away from the most obvious problems. Second, think about big factors that could affect your outcome. For example, mid-May to mid-August would also be poor months for measuring rape incidence in Gainesville. Why? But some historical things just happen. You can't anticipate them. Then all you can do is take them into account and discuss them honestly when you report your research.

Maturation: Outcomes are due to a natural or non-experimental change that occurs over time

You evaluate employee performance. Then the company institutes a six-month training program. You evaluate employee performance again after the program. Performance scores are way up. You think "Great. That program worked!" But there is a problem. The improvement in performance may be due to more job experience. Maybe almost everyone would have gotten better without the training program. All sorts of studies of children and youth over time are plaqued by maturation effects. Lots of changes happen just because they are maturing and changing physically and psychologically. If you are going to use an intervention -- a program, a drug treatment, something like that -- use a treatment and control design (an experiment). That way you can tell how much change occurred because of maturation -- that will be the average change in the control group. In many cases, however, you simply cannot eliminate maturation effects. At a minimum, you discuss them and use the literature to try to determine how important they are to your conclusions. More important, one type of design – the longitudinal design –incorporates maturity as a component in the design. If maturity is important and you need to understand maturation effects, this is an excellent design to select. On the other hand, if you select a cross-sectional design, you really have very little protection from maturation effects.

<u>Testing Response:</u> Outcomes are due to study participants learning from or becoming familiar with the testing procedures you use

You give people a Likert scale about their attitudes about LGBT folks. Then they participate in a sensitivity training. You give them the same scale again. Aha! They now have a more positive attitude. You think great! My training worked. However, maybe they just figured out that you think people should not be prejudiced against LGBT folks and they're giving you the "answer you wanted." This is called **social response bias** and it's especially a problem when you ask about the same thing more than once, particularly socially sensitive topics. Or you interview people about what they think our policy in Iraq should be. Then you interview them again in three months to see if their ideas have changed. The first time you asked them your questions, many of them were formulating their ideas. They hadn't really systematically thought through

their ideas about what we should do. Thinking through all that is just plain hard mental work, so the second time you ask your questions, lots of people pretty much repeat what they said the first time, without really reconsidering all the events that have occurred since then, new information they have received, etc. This is called *conditioning*, and we all do it all the time. We give the least effort response. On some things, people just plain learn. You give a test of simple factual information. Three weeks later, you give the same test again. But people learned what questions were on the test. They probably subconciously, or maybe even consciously, thought about them. The second time they score higher. They "learned" from the test itself.

Instrument Decay: Outcomes are due to changes in the instrument over time

All research uses some kind of instrument -- ranging from a big physical rig of some sort to a set of questions for an interview (called the interview schedule). They can change -- usually deteriorate -- over time. A cog gets worn. For social scientists, **we** are often part of the instrumentation because we are asking the questions, recording the answers people give, etc. You get bored after you've asked 20 people the same set of questions. Unconsciously, you start to speak more rapidly. So people do not understand you as clearly. Or you start to look kind of bored. People give you shorter answers because they can tell you're not really paying total attention to them. Or you get lazy about taking good interview notes and quit writing down things like people's facial expressions, pauses, etc. that often tell you as much as the words they speak. This is all instrument decay.

Regression to the Mean: Outcomes are due to abnormally high or low values

This is a special problem for any study where you measure (like ask people something) on more than one occasion. Sometimes, the conditions of the study itself cause the problem. You are studying depression. People who come to a clinic complaining of depression are diagnosed for degree of depression. Then they get counseling for eight weeks. They are re-diagnosed. Hooray!!! They are not nearly as depressed as they were before counseling! However, even for really depressed people, depression tends to go up and down over time, and they tend to seek help when they are at the nadir of depression -- at the real low point. While not everyone will get better over time, half or so probably will, with or without treatment. So the improvement may be due to the fact that your study participants had some "natural" improvement, not to your great program.

Mortality or Attrition: Outcomes are due to non-response by participants

Attrition (or mortality) can occur for many reasons. First, some people that you select for your sample will usually refuse to participate or you won't be able to contact them. In some cases, people inflate the required sample size to account for attrition. In other cases, researchers use *replacement*. This means that every time someone says "no," or if you can't contact a participant, you select a new participate to replace the one lost to attrition. In either case, the *respondents* are not usually *exactly the same* as the participants you selected. This can cause a big problem if it turns out that the non-respondents are *different from the ones who do respond* in some way that affects your conclusions. You want to study alcohol consumption by freshmen at UF. You get a random sample using an alphabetical list of freshmen. Of course, lots of them don't want to be part of a year-long study about their alcohol use. This may not be a problem in and of itself, but you start to notice a pattern. The refusal rate among women is higher than among men. Apparently, women are less willing than men to participate in your study for some reason. You don't know why, but it could be because women are more likely than men to think that consuming alcohol is a bad thing and don't want to tell anyone about their

drinking habits. Or it could be that women consume less alcohol and are simply less interested in the whole subject. Or it could be that men are proud of their "drinking prowess" and are eager to tell people about it, compared to women. In any case, you have a problem due to attrition. You won't be able to draw any valid conclusions about the drinking patterns of female freshmen and you won't be able to compare men and women freshmen. You will have to limit your conclusions to male freshmen.

Attrition or mortality can be a big problem for studies that extend over time because the people who "drop out" may differ from those that "stay in" the study. Let's take the depression example. You decide to re-contact everyone one year after the end of your counseling to see if the beneficial effects of counseling have persisted, to see if it works over the long haul. About 25% of your original participants do not respond to your e-mails, phone calls and letters. They have been lost to *attrition*. Now you examine their original depression diagnoses. It turns out that many of the people that you cannot contact had severe depression. This is a big problem because it would seem that the non-respondents -- the folks you could not reach for the follow-up -- and the respondents -- the ones you could contact and who agreed to come in for a follow-up diagnosis -- are different *in ways that can affect your conclusions*. Maybe the really depressed people have totally given up. Maybe they committed suicide. Maybe they have concluded that counseling is worthless. At any rate, you are now on very thin ice if you try to draw any conclusions about the long-term benefits of counseling. You can say something like "It works fine over the short term."

<u>Selection Bias:</u> Two or more groups that you want to compare differ in some important characteristic(s) that affects your conclusions

Simple selection bias can cause you to conclude that two groups used for comparison differ when they do not. You take a random sample of 500 men and 500 women and ask them to watch the first ever YouTube format presidential debate. Afterwards, they score how much they liked it on a scale of 1 to 10. Men have an average score of 8.2 and women have an average score of 6.4. The difference is statistically significant. You conclude that men like the YouTube format a lot more than women. Then someone examines your data closely and you find that the average age of the men was 32 while the average age of the women was 46. You didn't pick younger men on purpose. It just turned out that way. You have a selection bias problem because age could affect how much people like the whole YouTube format. Younger people might like it more because they're more used to the technology, because many of the people who submitted questions were themselves younger -- a lot of reasons. The difference you found may be due to age instead of gender. You can no longer be confident of your conclusion.

A different form of selection bias is called *selection interaction bias*. In this case, the problem is that you cannot detect a real difference that does exist. A school district has some grant money to provide a new computer based math program to its students. The program is new and relatively untested. The grant funds will run out after one year. Subscribing to the computer-based program is expensive. You decide to test program efficacy before you commit scarce regular budget dollars to the program. You pay for using the program on a "per participant" basis. You want to use your grant money to help the students who need it the most, so you give students who have a D or E in math access to the program. These people are in the treatment group. After 8 weeks, you give everyone a standardized math test. The average score of the treatment group is 73. The average score of the control group is 77. There is *no significant difference* between the treatment and control groups on the test. What can you conclude? It may be true that the program worked and really helped the "poor performers," but you can't be sure because there is *no significant difference* between treatment and control groups on the

test. This happened because you did not randomly assign students to treatment and control -this would "fix" the problem. Or you could have given everyone the standardized test before
starting the intervention (a pre-test) and then tested again at 8 weeks (a post-test) and
measured *change in score*. Given that you failed to do either of these things, you can't really
know whether program "works" or not. This is selection interaction bias because the way that
you selected the participants for the treatment or intervention interfered with being able to draw
firm conclusions.

External Validity = Ability to Generalize

We conduct research with a specific set of people, in a specific place, under a specific set of conditions. But we almost always want to be able to *generalize* our conclusions to other people, places and conditions. Being "sure" of what happened with 150 students at the University of Florida in fall semester of 2008 is good, but we want to know if it's true for all students, at all major public universities, every year. *External validity* refers to the degree to which you can extend your conclusions to other people, other places, and other conditions.

There are two aspects to generalization -- statistical and theoretical generalization. We are usually concerned with both of them, and always with the second one.

Statistical generalization refers to the degree to which: (1) any characteristics of the sample of people in our study (descriptive statistics) can be applied to the population as a whole from which they were selected and (2) the degree to which the results of statistical tests (inferential statistics) can be applied to the population of interest.

Generalizing Characteristics of the Sample to the Population. You want to know whether freshmen gain weight during the first year away from home at college (too much pizza, hamburgers and KFC). You get an alphabetical list of every incoming freshman at UF at the beginning of fall semester, 2007. You take a completely random sample of 500 students from that list. You weigh them at the beginning of fall semester. You weigh them again at the end of spring semester, 2008. On average, they gained 4.8 pounds. You can generalize that the average freshman at UF gains 4.8 pounds during their freshman year because there is no reason to believe that a person's surname somehow affects their eating habits and weight gain. This is fine. In fact, you can probably generalize to freshmen at major public universities in the United States because there's no reason to think that freshmen at UF somehow differ in the eating habits they adopt as freshmen from students at Ohio State or Berkeley. However, if you took the same sample of 500 freshmen at UF and measured their average GPA at the end of the freshman year, you would have to be much more cautious. You could generalize to UF freshmen as a whole. But UF attracts very good students. We differ from "large public universities" as a whole in this respect. So you probably could not generalize that the average GPA for your sample -- say 3.1 -- is the average GPA for freshmen at major public universities in the U.S. as a whole.

Generalizing the Results of Statistical Tests from a Sample to a Population. The same general rules hold for generalizing the results of statistical tests. Let's say that in your weight gain study you select *two separate samples* of 500 women and 500 men. On average, freshmen women at UF gain 5.4 pounds and men gain 4.2 pounds. You run a student t-test and it turns out that the difference is statistically significant. Women did statistically gain more than men. Just like before, you could generalize to UF as a whole -- women freshmen at UF on average gain more than men freshment -- and you could generalize to freshmen at major public universities as a whole.

Statistical generalization *depends* on having a *statistically representative sample* of the population you want to talk about. We will discuss this more under sampling, but much of this is just common sense. For example, in your weight gain study you would probably want to ask potential participants if they have any eating disorder and *eliminate those who do*. This is called screening.

A statistically representative sample *does NOT mean a sample that is just like the population as a whole in every way.* It has to be "like the population as a whole" in terms of characteristics that matter to what you are studying. It is common for novices to believe that research findings cannot be generalized because the sample differed from the population as a whole in terms of age, or race, or ethnicity, or gender. These characteristics of the sample are only important to your conclusions and your ability to generalize *if they are likely to affect the attribute you want to study.*

Let's take IQ. You have the same sample of 500 freshmen at UF, chosen by alphabetical listing. The average IQ is 120. As you look at some other *descriptive statistics* about your sample, you see that the sample differs from freshmen at UF as a whole. Perhaps, just by accident, 41% of your sample consists of Hispanic people whereas 23% of UF's incoming freshman class is of Hispanic ethnicity. We say that people of Hispanic heritage are "over-represented" in the sample, compared to the population as a whole. But there is *zero valid evidence* to suggest that ethnicity is related to IQ, the book *The Bell Curve* not withstanding. So you can go right ahead and conclude that the average IQ of incoming freshmen at UF is 120 because ethnicity and IQ are unrelated characteristics.

On the other hand, if 38% of your sample speaks two or more languages, you probably can't conclude that 38% of incoming freshmen at UF speak two or more languages. People of Hispanic heritage are probably more likely to speak a second language than lots of other people who come to UF because of exposure to Spanish in the home. Now the ethnic difference between your sample and the UF freshman class as a whole does limit your ability to generalize.

Theoretical generalization refers to the degree to which you can use your findings to gain a broadly applicable understanding or explanation of the relationships between different phenomena. We base research on theories because theories provide our basis for figuring out how things work not just with one set of people, or in one place, or at one time, but in general. By basing research on a theory, we move beyond **descriptive research** to **explanatory research**. Descriptive research just tells us "what happened with these participants in this study." Explanatory research tells us "what happened with these participants in this study -- **and** how can I make sense of what happened, explain it, understand it. Therefore, we always want to be able to theoretically generalize.

In order to be able to theoretically generalize, you need to ensujre *the theoretical adequacy* of your study. This involves four things, and failure to ensure any of the four is a threat to your ability to theoretically generalize your findings:

- Make sure that the theory actually applies to what you are studying
- Make sure that you actually use the constructs in the theory in your research
- Make your study as "reproducible" as possible
- Select a sample that is theoretically sound

<u>Domain of the Theory.</u> There are no "theories of every behavior." For example, the theory of reasoned action explains purposeful decision making. If you want to understand how people behave in mob situations, you should not use the theory of reasoned action for your study. Mob behavior is not a part of the domain or set of behaviors covered by this theory.

Content (sometimes called construct) Validity. As we have seen the building blocks or components of theories are constructs. But constructs are abstract ideas -- not "real" things. We turn constructs into variables. That's a lot of what research *methodology* is about. Suffice it here to say that you have to make sure that your variables actually represent the concepts or constructs in the theory you are useing. Attitude is an important construct in the theory of reasoned action. We usually use a Likert scale to measure attitudes -- where you indicate how much you agree or disagree with a set of statements. A common beginner's error is to include a statement of fact -- rather than opinion -- in the set of statements. Let's say you want to know about people's attitudes about dieting as a way to control weight. You include the statement "Most people fail to keep off the weight they lose on a diet once the dieting period is over." This is true. It's a fact. Most people gain all the weight they lost back within a year of "going off" of any diet. I could mark that I strongly agree with this statement because I think it's true, and still think that dieting is a very good way to contol weight. In this case, by including a statement of fact instead of opinion, your variable did not adequately represent the construct of "attitude or opinion."

Reproducibility. You almost always want to make your study as reproducible as possible so that other researchers in the future can repeat it or build on it. Sometimes we do want to study very rare or unusual things, but usually not, so you do not want to create a study that depends on some very specific conditions or set of participants that other researchers cannot hope to reproduce. Reproducibility does **NOT** mean that someone else has to be able to find exactly the same participants, or even necessarily a very similar set of participants. It does mean that you want other people to be able to find or create similar **conditions** for a study. For example, if your theory is supposed to help us understand the factors that affect how people perceive of government services generally, conducting a study with people from New Orleans right after Hurricane Katrina is a bad idea. The conditions were extreme and hopefully not reproducible.

Theoretically Representative Sample. This is very different from a statistically representative sample. It just means that the participants in your study adequately represent the population whose behavior the theory is supposed to help us understand or explain. For example, the theory of reasoned action deals with purposeful behavior. If you select a sample of people who are all under treatment for psychotic behavior, your sample is not valid. This theory does not deal with psychotic behavior. On the other hand, if you want to apply the theory of reasoned action to understanding how people decide to smoke (or not), it's fine if your sample consists of middle-class college students. There is no reason to think that their reasoniing process somehow differs from that of poor people, older people, etc. They are a theoretically adequate sample and you could compare your findings directly to those of another researcher whose sample consisted of middle-age bankers.

Other Threats to External Validity. There are two other major threats to our ability to generalize our findings beyond our specific study group, place, etc.

One is **sensitization**. Sometimes just including people in a study makes them act differently than they normally do. Let's say I'm a volunteer in a study about eating habits. I'm not supposed to change my habits during the study -- just write down what I eat. But I can't help but start

paying more attention to my diet when I write it down. "Wow! I'm drinking five soft drinks a day! That's too much." So I reduce my soft drink consumption.

The other is *artificiality*. According to deVaus, this is a big problem for experiments and quasi-experiments. He says: "... the typical social psychology experiment is based on a temporary collection of late adolescent strangers given a puzzle to solve under bizarre conditions in a limited time during their first meeting while being peered at from behind a mirror." He says that this makes it very dubious, if not just plain wroge, to generalize the findings of these studies. I disagree. *IF* the experiment meets the conditions for theoretical adequacy, the findings can be generalized.

There was a fairly well-known social psychology study done many years ago. A researcher wanted to try to understand why guards become abusive toward prisoners and thought it had to do with group identity. He assigned student volunteers randomly to either a "guard" or "prisoner" role and isloated them in a facility where they played out their roles. They were continuously observed. These participants were certainly under "artificial" conditions. The study was supposed to last several weeks. He had to discontinue it after just a couple of weeks because the "guards" started to become extremely abusive of the prisoners -- even when they were acquaintances or friends -- and the researcher became fearful of actual serious physical abuse. People thought this was one of those "artificial" studies -- until the experiences of American servicemen guarding prisoners in Iraq. This study was directly cited as a good example of the group dynamics that occur when some people are placed in control of other people to whom they are "superior" in some sense. In fact, the power of his study to explain these abusive patterns of behavior is probably even stronger precisely because his student participants did not in fact differ culturally, often knew each other, were strongly conditioned to treat each other as equals, etc.

I personally do not know how much to treat artificiality as a threat. You need to think about it. But it's also true that with the very strict informed consent procedures that we must use, almost every study is subject to both sensitization and artificiality threats. Try to minimize them, but don't be paralyzed by them.

Explanatory Power = Thorough Explanation or Understanding

Very few theories in any discipline explain "everything" about what we want to understand. Very few studies can explore every possible relationship. In general, however, one of the goals of research is to provide as full or complete an understanding as possible -- not to settle for understanding just one relationship, or how something works under just one very restrictive set of conditions. You want a powerful explanation or understanding. There are three basic approaches that you can use to make your explanations or understanding more powerful.

Work Hard to Put Your Ideas to a Tough Test. Science is not about "proving" something is true, nor is it just about "disproving" a hypothesis. It's about taking your favorite explanation and putting it to the toughest possible test. Conduct your study under conditions, with a sample, in a situation where "your favorite explanation" will really be put to a test. One of my favorites on this (a **negative** example) is that we have some "great" program designed to improve say selfesteem. We love it. We think it's wonderful. We want to "prove to the world" how well it works. We conduct a pre- and post-test of the self-esteem of our participants. Sure enough – their selfesteem increased. We conclude that our "great" program really *IS* great. This is essentially a "bogus" study. There is no comparison group here. There is no way at all to conclude that our program had any effect. In fact, all of our participants *chose to participate voluntarily* in our

program. Maybe they were all low in self-esteem. Of course, their self-esteem increased – because somebody paid some attention to them. **Any** attention would have worked. Or perhaps they all had high self-esteem. They were, in some sense "self-esteem seekers and reinforcers." Again, our program worked because these are folks who spend a lot of time working on their self-esteem, not because we have a "great" program. Be tough on your own ideas.

<u>Gain Breadth.</u> Try to understand how several different phenomena "fit together," to expand the number of linkages that we can explain or understand, or sometimes to show that a theory applies well beyond the conditions (place, people, setting) in which it was originally proposed. Theory-comparative studies help us do this. Working with a population or under a set of conditions that "stretches" the explanation (like the example of kids from "perfectly nice homes and communities involved in gang") can help with this. Using comparison groups that differ greatly in ways that may affect the outcomes can help. What does *not* help is one more study exploring what is already established by previous research.

Explore the full variance. For example, I participated in a study about the effects of grape juice on cognitive function. As a condition of this study, I had to NOT eat or drink the juice of any red or blue "berry" -- things like cranberry juice, strawberries, blueberries, raspberry jam, etc. Except for raspberry jam, I eat a LOT of these things. But these researchers needed to isolate the effect of grape juice so they had to eliminate these "confounding, non-experimental variables" from the study -- get the study participants to be alike in the sense that our only source of the beneficial compounds (whatever they are) of "red and blue berries" in our diets was grape juice. We took five tests of cognitive ability every week. Let's say that the people in the treatment group (got real grape juice) showed a 30% increase in cognitive function while the control group (phony grape juice) showed no change in cognitive function. The researchers have shown direct cause and effect -- grape juice "works." But the magnitude of the effect -- that 30% increase in cognitive function – may not be generalizable. Perhaps in the "real world," where people eat strawberries, drink cranberry juice and have raspberry preserves on their toast every day, the effects of the grape juice might be minimal, not even measurable. So is grape juice "good for" your cognitive functions? Yes, it is, but you cannot conclude that "on average, people who drink 12 oz per day of grape juice will show a 30% increase in cognitive ability." That depends on what else they are eating and drinking. A person like me who loves strawberries, blueberries, cranberry juice and raspberries might add 12 oz of grape juice to their diet and get no improvement in cognitive function.

This latter step is a common advertising ploy. One of my favorites is an ad for a special (costly) mattress. A "real" scientist in a white coat and all stands up and says: "Eighty percent of participants in a sleep study reported that they slept through the entire night on a X mattress compared to 40% on a conventional innerspring mattress." I'm sure this is a true statement. Otherwise, those folks would be sued. But I always wonder -- what were the experimental conditions? I wake up in the night for a lot of reasons that have nothing to do with my mattress. My 30-pound cat walks on me. My refrigerator sometimes makes this "death rattle" sound. I have to go to the bathroom. So what were the conditions for the study? Did the treatment (mattress X) and the control (regular mattress) group both sleep at home, under all the normal conditions that could wake them up in the night? If so, I'm impressed. Imagine -- I could sleep through the stroll by the 30-pound cat! Or, did these people come into a facility for the study where they (1) did not drink any liquids for at least 2 hours prior to going to sleep, (3) were isolated from strange sounds, (3) didn't have a pet around, etc.? If so, I'm not impressed. Under those very controlled conditions where all the things that wake people up in the night don't happen, the quality of your mattress probably is a really important factor in determining whether you wake up during the night. But in "real life," lots of other things are probably way more

important and spending all that money on this special mattress may make little or no difference in the quality of your sleep.

Summary

Research design has three main goals:

- Provide confidence in the conclusions we reach
- Allow us to generalize beyond our specific study
- Give us a robust explanation or understanding of what we study

There are three major design groups:

- Experiments and quasi-experiments
- Longitudinal and cross-sectional designs
- Case studies

None of these design groups is "better" than the others in any overall sense. They do have different strengths -- and weaknesses. Experiments, for example, are great for demonstrating direct cause and effect. They *can* give us good generalizability, but by nature they involve controlling non-experimental variables. That means holding a lot of things constant that vary in the "real world." It is true that "grape juice works." A true experiment demonstrated this. However, if we now want to know "will drinking 12 oz. per day of grape juice improve cognitive function for Americans over age 60?" we need to move to another design group. We need to move away from the idea of eliminating interactions among many factors and instead explore them. For example, we need to explore things like the relationship between exercise and the efficacy of grape juice, how dietary habits influence or intervene in the effect, and how initial cognitive capacity influences the effect. A longitudinal study or perhaps a repeated measurement cross-sectional study with intervention will be much better for understanding these complex interactions.

Keys to success

Keep the three goals in mind -- don't just ignore them.

Remember – the research question drives the design.

Research Question: What happens when I?

Research Objective: Demonstrate DIRECT cause and effect.

Design Group: Experiments

Research Question: How does that work?

Research Objective: Understand the relationships among several phenomena and processes

at work over time or in different existing groups

Design Group: Observational

Research Question: Why did that happen?
Research Objective: Explain an outcome state

Design Group: Case Study

Used a multi-stage design if possible. Get the strengths of different designs. You will gain in all three areas.

Every study has some limitations in terms of internal validity, external validity, and explanatory power. Discuss them openly in your thesis or research article and let the reader decide for him/herself how applicable your results are to their situation. It *is* your responsibility to inform the reader of the limitations of your study. It is *the reader's* responsibility to decide whether those limitations restrict the applicability of your conclusions to his/her intended application.