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The websites of in-vitro fertilization (IVF) clinics have become privileged vehicles for search and provision of information by gamete donors and recipients seeking for fertility

treatments with donated eggs and sperm, as well as relevant sources of psychosocial support for patients. The importance of ensuring quality of health information made available online to the public is consensually recognized, and there are different instruments to assess the formal quality of health-related websites. However, such instruments are only based on quantitative approaches and do not evaluate the accuracy of the information on specific topics. Moreover, their conceptualization and operationalization have been primarily based on expert views, which does not guarantee that their evaluation and the contents provided effectively meet people's needs. Aiming to strengthen the evidence base for quality assessment of IVF clinics websites, we developed a qualitative study to obtain information about the adequacy of the contents related with gamete donation to people's needs. This communication seeks to discuss three main methodological challenges we faced during the design of the research protocol, associated with selecting a sampling strategy, the techniques for data collection and a topic guide. First, the participants in the study: who should we interview (e.g. representatives of patient organisations, representatives of national registries on assisted reproductive technologies (ART), and policy making institutes)? How to include (open and anonymous) gamete donors? Second, the methodologies facilitating the involvement of these stakeholders in knowledge co-production: is a joint Delphi panel the most suitable option or should we use different methodological strategies for different groups? Is there a need for individual and group interviews, and how to combine them? Third, the topic guide: should it consider, simultaneously, questions about the contents to be included in the website (for example, information about risks and benefits of gamete donation; accuracy and robustness of the information about success rates, costs, and donor's anonymity; circumstances under which IVF-clinics recruit and select donors and match donor-recipient; protection of personal data), and those that should not be presented in websites (for example, suggestive overestimation of success, problematization of families or family relationships after using ART)? We call for the development of a culturally sensitive instrument to assess the quality of IVF clinics websites that takes into account people's needs, national regulatory frameworks and health policies, as well as local, cultural, socioeconomic and clinical dimensions of reproductive medicine.

Interviewing parental couples together: Interaction between gender and occupation beyond child's birth weight

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Challenging the under-representation of fathers in the literature about parenthood in sociotechnical environments, recent health studies have resorted more often to couple interviews. Undertaking qualitative health-related research with heterosexual couples raises several ethical and methodological challenges regarding data collection and analysis. However, there is a scarcity of both population-specific guidelines and literature grounded on researchers' experiences in this field.

This study contributes to advance innovative study designs and protocols to investigate parental roles and knowledge in Neonatal Intensive Care Units (NICU) by discussing the influence of gender, occupation and child's birth weight in parents' narratives in joint couple interviews. Twenty-seven semi-structured couple interviews with mothers and fathers of very preterm infants were conducted 4 months after delivery (November 2013 - July 2014). The interview schedule included the following topics: quality of life; uncertainty, doubts and decisions about parental care and treatment options; information and communication; and social support. Heterogeneity sampling was used to obtain maximum variation of views and experiences until reaching thematic saturation. Interviewees were purposively sampled to include parents of extremely low (<1000g) and nonextremely low (≥1000g) birth weight infants. Although health professionals suggested a replacement of infant's birth weight by gestational age as the main criteria to be used for sampling, invoking evidence-based knowledge produced in the field of health sciences, the researchers opted for grounding their decision regarding sampling criteria on empirical evidence obtained through an ethnographic study at the NICU, which showed that parents interpret infant's birth weight as the best proxy for the degree of their infant's vulnerability. However, content analysis showed that father's occupation was the main variable influencing the following emergent couples' narratives: 1) 'emotionally-driven narrative', enacted by fathers employed as health or teaching professionals, who talked about their experiences in depth, sharing an intense emotional repertoire with mothers; 2) 'control-need narrative', enacted by fathers working in business, civil construction or armed forces, who tended to control the interview, both by leading the couple's narrative and questioning the study aims and its implications for clinical practice; and 3) 'emotionally-silenced narrative', enacted by fathers working in artisanal or skilled manual jobs and clerical support, who tended to silence their intimate experiences and emotions. The influence of occupation was buffered in mother's narratives. Mothers tended to provide detailed answers and

their discourses revealed the reproduction of intensive motherhood and gender stereotypes, according to which women are mostly guided by emotions.

These results call attention to the need for including fathers' occupation in future qualitative and quantitative studies in order to account for its influence on participants' responses. They also highlight the need for reflecting about the potential effects of methodological decisions on the analysis of joint couple interviews involving fathers of different occupational groups. Undertaking these precautions can help to pre-empt research biases that arise in connection to the under- or over-representation of specific occupations among male participants in research conducted with people in situations of vulnerability as is the case of parents of preterm infants.

Sensitive research; ethics; innovative methods.

SYMP261

Research Ethics and Integrity in Qualitative Research: opening perspectives

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Each in its own way, qualitative research methods aim to reveal adequately the multiple realities and lived experiences of the respondents involved in the study. The term 'research integrity' in these qualitative studies refers to a variety of concepts. As the conception of 'integrity' at least also includes making wise judgments about people and situations, this involves inevitably a balancing of relevant value principles, as situationally appropriate (Macfarlane 2009 in Hammersly, 2017). Thus all concepts that are related to this issue of 'integrity' may be prone to varying interpretations.

However, integrity cannot be reduced to a concept of relativity and personal interpretations. We want research to be auditable, transparent, trustworthy. Investigators may describe scientific integrity as having uniform methods, with consistent results, and that investigators were honest by presenting all of their findings. The need for investigators to remain faithful to their methods, follow protocols, be rigorous and systematic in their efforts, and protect human subjects is viewed by most researchers as crucial to the value of any scientific study (Kraemer et

Yet, the question at stake then is: how can this be kept in balance with all epistemological requirements of our research methods (Hammersley and Traianou, 2011).

In this introducing presentation, we comment on the most burning question: what are the core concepts at stake when qualitative research is willing to be highly trustworthy? Trustworthiness has to do with making the steps and influences that were part of the study visible. Referring to Stiles (1993), Merrick (1999) states that elements of trustworthiness include at least a disclosure of the researcher's orientation and a thorough discussion of findings and research process".

But there are many other issues involved. In this seminar, throughout 4 complementary presentations, each of which depart from an own angle, several questions related to integrity and ethics that raise whilst overthinking the dignity of a qualitative study and of the researcher are brought into discussion. references

Kraemer, A., Spears, C., Arcury, T. (2013). Variation in the interpretation of scientific integrity in communitybased participatory health research. Social Science & Medicine, 97, (2013) 134-142.

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The virtues of transparency: Scientific integrity in qualitative research reporting

Balachandran Nair, Lakshmi (Utrecht University);

Scientific integrity by definition assumes ethical reflection, self-discipline and self-critical assessment from the part of researchers. By maintaining the reputation and respectability of science, integrity helps in sustaining a meaningful dialogue amongst researchers themselves as well as between researchers and society. Thus integrity plays a major role in the development of science. Most of the discussions on scientific integrity happen at the level of plagiarism and fake data. Many articles have been withdrawn (refer retractionwatch.com) following allegations of cooking up results. However, scientific integrity expands beyond these two malpractices. Other