Ahmad, N and Morgan, A. (2021). Using online surveys to capture health and social care data. In: L. Tilly and B. Fox, (Eds). *Understanding Health and Social Care Research: Methods in Context.* London: Routledge.

Book chapter pre-print version

Introduction

Social work, health and social care practitioners work in a variety of roles; in community settings such as GP practices, children's centres and community centres, and in statutory organisations such as NHS trusts, Local Authorities and the family court. Whilst a large part of these jobs is to deliver care to patients and service-users, there is also a variety of roles and tasks which do not have direct contact with care receivers, but which are nonetheless vital to the provision of good quality care. These tasks are often positioned in 'back office' type roles which are not client-facing, such as management, commissioning, planning, strategy and service design (Broekhuis, De Blok and Meijboom, 2009). Research and evaluation will be a key feature of these roles (Bamberger, Rugh and Mabry, 2012; Robson, 2017). Additionally, with the rise of evidence-based practice, involvement in research and evaluation is increasingly becoming part of frontline roles – this ensures that service providers and deliverers are informed in the most up-to-date methods, models, and findings – ultimately ensuring that patients and service-users are receiving the best care and support possible. In this field, real-life research is therefore vital to delivering good quality care (Caldwell et al, 2007; Raithby and Ring, 2010; Swinkels et al, 2002).

Further education colleges and universities that provide education and training for students preparing to take on roles as health and social care practitioners are an ideal training ground for learning the research process, both in the classroom and in placements. In these courses, the skills learnt will have real relevance for both the future careers of these students and in contributions to wider society. For health and social care students, acquiring research skills is therefore not just about passing courses: it is about making a difference in the real world, which is after all the motivation for those entering these professions. The final year project or dissertation of an undergraduate or Apprenticeship course often brings about anxiety and trepidation for students at its mere mention. However, it should be viewed as an opportunity for students to get excited about research. Excitement comes from the selection of a topic meaningful to the student and further enquiry into this topic in order to plan, design and execute a method which generates findings of real interest. Often this is the beginning of further, more sophisticated research for students, either in postgraduate education and training, or in future job roles. It is the first opportunity a student has to really make their study their own.

In health and social care courses there is an emphasis on contemporary issues, which is often where interest in specific areas is sparked for students, especially where patient and public involvement is needed (van Schelven, Boeije, Mariën and Rademakers, 2020). This is a good starting point for generating research ideas. Exploiting the technological advances of the digital age in which we live helps to bring alive the study of contemporary issues. This chapter focuses on the use of online surveys and how these can aid research inquiry in health and social care. It draws on a case study to show how an online survey was used to research the contemporary issue of parental alienation (Morgan, Ahmad and Webster, 2020), a subject highly relevant to those working with children and families, whether in health, social work or social care. Whilst this method of surveying can no longer be considered new, it – along with other virtual methods – is rising in prominence, particularly in the context of the Covid-19 pandemic, which dominated research decisions at the time of conducting the case study research, and also at the time of writing this book.

There are a multitude of web-based survey platforms and tools available which will help you design your survey – Table 1 lists a few which have been extensively used in health and social care. The functionality and usability of these are comparable. They are generally user-friendly, come with survey templates and guidance, and generate a hyperlink which enables you to send the survey electronically, perhaps by copying and pasting the link into an email. When selecting the tool that is right for you, your main consideration will be the cost implications to you personally. You should be able to design an undergraduate level online survey study without any personal cost; find out whether your academic institution holds any licences or subscriptions to online survey tools, as you may be able to use these without paying for them.

<TABLE 1 HERE>

<LEARNING ACTIVITY 1 HERE>

<BOX 1 ADVANTAGES OF ONLINE SURVEYS HERE>

<BOX 2 DISADVANTAGES OF ONLINE SURVEYS HERE>

How to create an online survey

Online surveys, like any method of social science research, are used to gather data about your topic of interest, analyse these data, and synthesise them into results which are presented as research findings in engaging ways. When embarking on a research project where you would like to use an online survey method, you will first need to ensure that method is suited to answer the research aims and questions.

There are five main components to creating your online survey which are explained here:

1. Planning – ensure you have researched your topic of interest and that your research questions can be suitably answered through this method.
2. Designing – select your survey tool (perhaps one of those outlines above), and enter your survey questions, ensuring you consider different response types.
3. Reliability testing and piloting – make sure your survey measures what you intend it to measure and that it is user-friendly.
4. Distribution – ensure you pilot the survey for functionality and sense-checking, before distributing to your sample of interest.
5. Reporting – use the analytics and export functions to summarise, describe, and analyse your findings, before presenting them in meaningful ways to your audience.

Plan

The quality of the results of any survey depends mainly on the implementation of the survey including sensible sampling methods, tool development, and proper administration. So achieving a good quality survey is reliant on understanding the importance of the planning stage. While online surveys allow the creation and editing of a series of questions, it can be tricky to begin this process when you are inside the software unless you have used it before and feel competent; you may find yourself going backwards and forwards, especially the first time you try the method. It's always a good idea to try out the free version that usually accompanies an online survey.

In a professional context, the survey findings should help to make future health and care decisions, show what has and has not worked well from both a service-user and patient perspective as well as a management perspective, and inform future health and social care strategy and service delivery.

Design and question response types

Online survey platforms do not have a spell checker so, using a Word document, begin by writing a series of questions, then editing and arranging them in the order you need, making sure there is a logical flow. Next, determine which answer choices you want for each question, for example, you may like to use closed question (for example, 'Yes', 'No', 'Unsure' response options), which generate quantitative data. Single or multiple response questions (which generate quantitative data) can also include an 'other (please specify)' option where respondents can explain their response (which generate qualitative data).

You can set up a question as an open-ended or free-text entry. Open-ended questions require narrative responses, or in-depth views and experiences that generate qualitative data to provide a deeper understanding of responses to closed questions. Respondents are given freedom to share their views in their own words. Character limits can be set to the length of narrative responses in order to control the amount of qualitative data for analysis purposes. This allows for a richer interpretation, where the analyst can look across the responses and summarise key themes. This can be more time consuming than the quantitative analysis, so a careful balance between these two types of questions needs to be considered.

A closed or forced-entry question can be set up so that respondents can only give one answer from a list of pre-set responses, although these single response questions may have different layouts. The advantage of this type of question is that the analyst is able to generate statistical data such as whole numbers of percentages and visually represent a summary of all responses.

Multiple response questions allow respondents to choose more than one answer from a list of possible answers. Such questions can also include 'None of the above' or 'All of the above'.

Grid questions present a set of statements as rows in a table, allowing an answer for each statement. Because of the table format, each row must have the same options, perhaps as in a Likert scale. Such questions can have a single response or multiple responses per row.

You might also like to consider asking demographic questions, i.e., questions that ask for personal information about a respondent such as their age group, gender, etc., as this information may actually link to the research goal. Responses to these questions can be used for subgroup analysis. Depending on the nature of the research question, demographic questions are always located at the beginning or at the end of the survey, and it is always advisable to enable responses to be optional for data protection purposes.

Logic and flow of questions

You can construct logic along the way. Logic, in the context of an online survey, means the ability to skip over certain questions or sections and continue at a future question or section. For example, if your service-user respondents answer a question saying they receive care in their own home, then you might want them to skip the next few questions which ask about their experiences of care in a hospital or care home setting. An example of survey logic that was applied in the case study discussed below can be found in Appendix I.

If there are some questions that you think really *must* be answered, you can design the survey so that responses to those questions are required in order to progress through the survey. There is also the choice for you to enable some responses to be optional.

Other tools that provide for more flexibility include piping, which is the ability to insert information from previous questions. For example, if a respondent said they work in a care home, then a follow-up question could be personalised by using that information. It could be phrased as, 'You said you work in a care home. What are your views on the implementation of a new games activity for residents?' as opposed to simply ticking the box for 'other (please specify)'. This function personalises the survey and is more likely to achieve higher respondent engagement.

Once you have a finished creating your questionnaire, review it once again from the view of those responding to it. For example, does each question flow logically from the previous one and onwards to the next? Have you included clear instructions? Can those with low literacy skills or who have a learning disability access the survey easily? Is it written in plain English? Could those for whom English is a second language understand it easily? Given the multi-cultural society we live in it is essential to be aware that understanding of key concepts written in English are well understood by speakers and writers of the language in which you wish your survey to be used (Ustün, Chatterji, Mechbal and Murray, 2003).

Pilot test for reliability

When you are happy with your survey tool, it is time to test it, and to do this it should be piloted. For any survey, designers will need to aim to have the best instruments and measures to ensure it is fit for purpose, have good measurement properties and that it has passed through a pilot testing phase to ensure its feasibility. There will usually be a facility within online platforms, such as a flowchart, for previewing the question set and its flow. Pilot testing acts as a 'dummy run' and should only take a few days. Piloting should include testing the functionality, for example, whether the logics work, whether the forced responses prevent progression through the survey if unanswered. So double check whether responses to each question are 'required' or 'optional'.

Effort should be given to examining the data gathered to ensure the survey is fit for purpose or whether changes are needed. We suggest asking three or four other students or friends to respond to the survey, consider what training you would provide and send them the hyperlink where they can access it. Review the data and ask your 'respondents' for their views on the usefulness of the survey from their perspective. Were there any problems with data entry? Have you gathered the kind of data you need? If necessary, revise and re-pilot.

Distribute

Once your survey has been designed and piloted, it is ready to go live. There is a space for you to include the start and end date for your survey on whichever platform you use. At any point you can enter the survey and amend these dates. This is especially helpful if your survey has very few responses and you wish to extend it for another few weeks. All packages provide a hyperlink that can be posted on a website or social media, or embedded into an email as a method of recruitment as well as data capture. It is worth noting that you can appoint another administer of your survey, a very helpful feature if, for example, you would like your lecturer to be able to access it for supporting and/or marking your work.

Report and analyse data

As soon as survey responses start to come in or when a survey is complete, you'll want to see how people responded. All online surveys have the ability to see how individual respondents answered all questions as each respondent will automatically be allocated a unique identification number. They can also generate bar and pie charts to provide simple visualisation of data. There is also an inbuilt mechanism to download the dataset as a portable document format (pdf) and export the data into a spreadsheet.

A case study example

This chapter draws on a recent study on legal and clinical management of parental alienation for which an online survey was used. The aim of the research was to gain views and experiences of parental alienation from the sectors of family law, mediation, and psychological therapy. We were also interested in hearing about successful interventions which minimise the effects of parental alienation. The survey was compiled using the JISC online survey tool, distributed across England and Wales by e-mail with a participant information sheet to 59 organisations and individuals known for their professional standing in the sectors. The sample was developed from professional networks and organisations and individual practitioners identified through a literature review. The survey remained 'live' for a month during the summer of 2020. The online survey received a total of 29 responses. Data from the online survey were both quantitative and qualitative, and were analysed with descriptive statistics and thematic analysis.

<BOX 3 HERE>

Why research parental alienation?

In the modern world family systems are diverse, with the number of single parent and blended families on the increase. A third of families in the UK do not contain a

couple in a marriage or civil partnership. Fifteen percent of families are single parent families, and households containing multiple families have increased the most over the last two decades – by 2019 these had increased by three-quarters to 297,000 households (Office of National Statistics, 2019). Change in the family system, for example through separation or divorce, is a feature of these modern family types. If managed well, change can be positive and enrich the lives of those involved especially children (Luckock, Lefevre, Orr, Jones, Marchant and Tanner, 2006)

However, if change is characterised by conflict, this can be both painful and damaging. In the case of parental alienation, the child(ren) and the parent who is alienated bear the brunt of this. The field of parental alienation is still a little known field and the literature shows key gaps in research and knowledge, however the effects of parental alienation are well documented. It not only affects the relationship between the child and alienated parent, but can have long-lasting impacts on both. For children who are the victims of this form of emotional abuse, the effects can last into adulthood, and include mental illness/depression, low self-esteem, substance misuse, lack of trust, low achievement, and a range of issues in their own romantic relationships (Baker, 2005; Baker and Verrocchio, 2013; Carey, 2003; Sher, 2015). For alienated parents, the picture is also grim, with them having higher than average levels of depression, symptoms of trauma, and risk of suicide (Harman, Kruk and Hines, 2018; Sher, 2015). The need for supportive interventions for families undergoing separation is therefore evident.

Why use an online survey to gather data?

Before we come to the reason we selected an online survey, it is important to reflect on why other methods were discounted. One method option which could have given us the answers to our key questions was semi-structured interviews. The advantages of using this method would have been that we would have achieved a more thorough exploration of our participants' views and experiences. However, a key consideration in real-world research is the cost implication both to the funder and to your own organisation of your chosen method. There is usually a finite budget and timeline attached to any research. As a practitioner embarking on a research project, you will also have to balance the project against other key job tasks. In our case, these restrictions meant that we would not be able to commit the time and other resources (transcription takes approximately 10 hours for a one-hour interview) which would be required to speak to each participant individually. A focus group method was also ruled out. Although this would not have been as time-consuming as individual interviews in terms of conducting the fieldwork, the coordination would have taken considerably longer than the survey development. The participant burden would also have been greater, as people would have had to attend either in person or virtually at the same fixed time. This risked low engagement and therefore a low response rate (Monroe and Adams, 2012).
[Location of Learning activity 2]

The online survey was selected as it suited the limited budget and scope of our research, and could also be conducted in a short timescale. Other considerations were also better met by an online survey: we were interested in views from participants in multiple locations across the UK, and we as a research team were also working from three different locations, so the project was being remotely managed by the project manager. An online survey allowed us to use a mixed-method analysis, where we were able to combine quantitative and qualitative methods by utilising the different question types.

What did we have to think about?

During the planning stage we had to consider the pros and cons of our chosen method, in particular how well it would allow us to answer the research question in the time frame we were allowing. This again had to be revisited once the pandemic hit, in terms of how feasible it was to still continue as planned.

We also had to consider carefully the potential ethical concerns related to the research, especially confidentiality and anonymity. Once the pandemic had hit we had to consider further ethical issues this presented, the main one was in terms of participant response burden. Given the changes to the UK infrastructure during the lockdown of March 2020, we had to ensure that it was still feasible to place research demands on the already stretched health and social care workforce. There was a need to rely on the voluntary nature of research participation and, for these reasons, anticipated a lower response rate than we might have achieved under different circumstances.

At the time of writing the research proposal, we were not aware of the volatility of the wider economic, health and social conditions although it became ever more apparent after starting the research that a pandemic of Covid-19 was on its way. The result of this was the practical issue of trying to secure a good enough sample size by effective recruitment, whilst ensuring undue burden was not placed on potential respondents (for example by too lengthy a survey, too short a deadline for responses, and number of reminders sent). The low survey response rate is likely to have been due to the impact of the pandemic, with much of our population of interest having moved from centralised offices to working from home, plus organisational preoccupation with supporting the development of online services for practitioners which would have taken priority over requests for research participation. Certainly, as far as survey distribution was concerned, the sudden move to home working made it difficult (sometimes impossible) to make direct contact with the relevant people in those organisations we were relying on to distribute the survey – we also had the added concern of not wanting to place undue burden by continued 'chasing'. Contact by email provided limited opportunity to ensure that we were reaching the right people at the right time for effective distribution.

Research outcomes: lessons learned

Current restrictions in the context of the Covid-19 pandemic presented challenges for in-person social science research methods. This research added to health and social care values in that participants were enabled to share their views anonymously in a field that is highly charged with emotion – and during a time when face-to-face methods were not feasible. It enabled individual empowerment and voice in a forum that was confidential and secure. It also allowed for ease of completion through standard tick box questions, whilst also allowing narrative responses in open-ended questions.

The main challenge for this study lay in the inability of many individuals and organisations to respond due to the overwhelming pressures of work that the pandemic had caused, which resulted in a less than average response rate. Another external pressure came through the need to adhere to research governance processes in other organisations. For example, after following this process for the Child and Family Court Advisory and Support Service (Cafcass), we were advised that in the current climate it would not be possible for them to disseminate the survey to its members to complete individually due to their high caseloads. In the event, we received a corporate response which, whilst important in terms of statutory context, was actually meaningless as what we required for the research was to learn the views and opinions of individuals who follow Cafcass guidelines in dealing with parental alienation.

Nevertheless, insight was gained that added value to what is already known in the field of parental alienation.

Table 2 shows how the research process and findings link to health and social care values.

<TABLE 2 HERE>

What did we do with our learning?

The research was disseminated in the January 2021 edition of Parental Alienation International, the published bimonthly newsletter of the Parental Alienation Study Group (PASG). The report was subsequently disseminated internationally through the PASG wider networks. At the time of writing this chapter, a paper was being written for the journal *Seen and Heard*, the quarterly journal of the National Association of Guardians Ad Litem and Reporting Officers (Nagalro). By attempting to publish in *Seen and Heard*, we hope our research will be read by children's guardians, family court advisers and independent social workers who work with children, parents and carers in family court proceedings.

The low survey response rate was insufficient from which to draw firm conclusions and recommendations, although an attempt to draw insights was made. For instance, the findings showed evidence for the need for reform of the UK family court system, in order to significantly reduce the potential for the courts and legal processes to exacerbate existing conflict and harm to children caused by alienation.

One recommendation included considering amending the widely used Domestic Abuse, Stalking and Honour Based Violence (DASH) risk assessment to identify, where children are affected by domestic abuse, if they are also subject to parental alienation behaviours.

The findings indicated that research is needed on social workers' and family court advisors' understanding of parental alienation and what interventions they are aware of both outside and inside of the family court system. Knowledge of how they experience and deal with allegations or issues of alienation, the strength of evidence they rely on, their perceived impact of alienating behaviours on children and training needs would help inform education and practice development.

Given the opportunity to run this research differently, future proofing and adaptability to the unpredictability of wider economic, health and social conditions should be considered more thoroughly. Whilst this is always an issue when developing a risk assessment for research, during a pandemic where only virtual methods could be used due to changing social restrictions, it is difficult to think of an alternative virtual method that would have produced a higher response rate.

<LEARNING ACTIVITY 4 HERE>

References

Baker, A.J.L. (2005) 'The long-term effects of parental alienation on adult children', *American Journal of Family Therapy*, **33**, pp.289–302. https://doi.org/10.1080/01926180590962129

Baker, A. J. L. & Verrocchio, M. C. (2013) 'Italian college student reported childhood exposure to parental alienation: Correlates with well-being', *Journal of Divorce & Remarriage*, **54**, pp.609-628. https://doi.org/10.1080/10502556.2013.837714

Bamberger, M., Rugh, J. and Mabry, L. (2012) 2nd Ed. *Real World Evaluation: Working Under Budget, Time, Data, and Political Restraints.* Los Angeles: SAGE.

Broekhuis, M., De Blok, C. and Meijboom, B. (2009) 'Improving client-centred care and services: the role of front/back-office configurations', *Journal of Advanced Nursing*, 65 (5), pp. 971-980. https://doi.org/10.1111/j.1365-2648.2009.05014.x

Caldwell, K., Coleman, K., Copp, G., Bell, L. and Ghazi, F. (2007). Preparing for professional practice: How well does professional training equip health and social care practitioners to engage in evidence-based practice? *Nurse Education Today*, 27(6), pp. 518-528.

Carey, K. M. (2003) 'Exploring long-term outcomes of the parental alienation syndrome', *Dissertation Abstracts International: Section B: The Sciences and Engineering,* **64** (5-B), p.2381.

Harmen, J. J., Leder-Elder, S. & Biringen, Z. (2019) Prevalence of adults who are the targets of parental alienating behaviors and their impact. *Children & Youth Services Review*, **106**. https://doi.org/10.1016/j.childyouth.2019.104471

Luckock, B., Lefevre, M., Orr, D., Jones, M., Marchant, R. and Tanner, K. (2006) *Teaching, Learning and Assessing Communication Skills with Children and Young People in Social Work Education*. Bristol: The Policy Press.

Monroe, M.C. and Adams, D.C. (2012) 'Increasing response rates to web-based surveys', *Journal of Extension*, **50** (6), Article number: 6TOT7.

Morgan, A., Ahmad, N. and Webster, M. (2020) *The Clinical and Legal Management of Parental Alienation in the United Kingdom.* Research report. Wolverhampton: University of Wolverhampton.

Office for National Statistics (ONS) (2020) *Child emotional abuse in England and Wales: Year ending March 2019*, London: Office for National Statistics.

Raithby, M., and Ring, C. (2010) Evidence Based Practice in Health and Social Care. In. A. Barnard, *Key Issues in Health and Social Care: A Companion to Learning.* London: Routledge.

Robson, C. (2017) *Small-Scale Evaluation*. London: SAGE.

Sher, L. (2015) 'Parental alienation: The impact on men's mental health', *International Journal of Adolescent Medicine and Health,* **29** (3), pp.98-104. https://doi.org/10.1515/ijamh-2015-0083

Swinkels, A., Albarran, J. W., Means, R. I., Mitchell, T. and Stewart, M.C. (2002). Evidence-based practice in health and social care: Where are we now?, *Journal of Interprofessional Care*, 16:(4), 335-347, DOI: 10.1080/1356182021000008265

Ustün, T.B., Chatterji, S., Mechbal, A. and Murray, C.J.L. (2003) 'The World Health Surveys'. In: C.J.L. Murray and D.B. Evans, (Eds). *Health System Performance Assessment: Debates, Methods and Empiricism*. Geneva: WHO.

van Schelven, F., Boeije, H., Mariën, V. and Rademakers, J. (2020) 'Patient and Public Involvement of young people with a chronic condition in projects in health and social care: A scoping review', *Health Expectations*, **23** (4), pp.789-801. https://doi.org/10.1111/hex.13069

Bibliography and further reading

Online survey and virtual methods reading

Callegaro, M., Manfreda, K.L. and Vehovar, V. (2014) *Web Survey Methodology: Research Methods for Social Scientists*, London: SAGE.

Fielding, N., Lee, R.M. and Blank, G. (2008) *The SAGE Handbook of Online Survey Methods*. London: SAGE.

ICF. (2020) *Online Surveys: A Guide to Good Practice*. London: ICF Consulting Services Limited.

Ustün, T.B., Chatterji, S., Mechbal, A. and Murray, C.J.L. (2005) Quality assurance in surveys: Standards, guidelines and procedures. In: United Nations, *Household Sample Surveys in Developing and Transition Countries.* Studies in Methods, Series F, No. 9. New York: Department of Economic and Social Affairs Statistics Division, pp.199-230.

Parental alienation reading

Barnett, A. (2020) 'A genealogy of hostility: Parental alienation in England and Wales', *Journal of Social Welfare and Family Law*, **42** (1), pp.18-29. https://doi.org/10.1080/09649069.2019.1701921

Child and Family Court Advisory and Support Service (Cafcass) (2019) Available at: https://www.cafcass.gov.uk/

DASH https://www.dashriskchecklist.co.uk/

Doughty, J., Maxwell, N and Slater, T. (2018) *Review of Research and Case Law on Parental Alienation.* Cardiff, Cardiff University and Welsh Government.

Doughty, J., Maxwell, N and Slater, T. (2020) 'Professional responses to 'parental alienation': Research-informed practice', *Journal of Social Welfare and Family Law*, **42** (1) pp.68-79.

Early Intervention Foundation. (2020) *Commissioner Guide: Reducing Parental Conflict*, London: Early Intervention Foundation (EIF).

Gardner, R.A. (1985) 'Recent trends in divorce and custody litigation', *Academy Forum*, **29** (2), pp.3-7.

Haines, J. Matthewson, M and Turnbull, M. (2020) *Understanding and Managing Parental Alienation: A Guide to Assessment and Intervention*, Oxon: Routledge.

Harman, J.J. Kruk E and Hines, D.A. (2018) 'Parental alienating behaviors: An unacknowledged form of family violence', *Psychological Bulletin*, **14** (12), pp.1275-1299. https://doi.org/10.1037/bul0000175

Office for National Statistics. (2019) Statistical Bulletin. Families and Households in the UK: 2019. London: Office for National Statistics.

Skills for Care (n.d) *What values do I need to work in social care?*

Templer, K., Matthewson, M., Haines, J. and Cox, G. (2016) 'Recommendations for best practice in response to parental alienation: Findings from a systematic review', *Journal of Family Therapy*, **39** (1), pp.103-119. https://doi.org/10.1111/1467-6427.12137

Woodall, K. (2017) *Understanding and Working with the Alienated Child.* London: Family Separation Clinic.

Woodall, K. (2020) *Court of Appeal Judgment: Parental Alienation as a Child Protection Issue.* Blog post 3 May 2020.

Woodall, N. and Woodall, K. (2019) *When the Child Says No: Understanding and Responding to the Needs of the Alienated Child*. 17 February 2019.

Table 1: Examples of survey tools

Survey tool	Access
Survey Monkey	Can sign up for free, with up to 10 questions per survey, and 25 responses per survey.
JISC Online Survey (formerly Bristol Online Survey)	The online survey tool designed for academic research, education and public sector organisations. If your education provider is not subscribed to this, there will be a personal cost to you.
Qualtrics	If your education provider is not subscribed to this, there will be a personal cost to you.
Voxco	If your education provider is not subscribed to this, there will be a personal cost to you.

Table 2: The link between the research process and findings with health and social care values

Health and social care values	Research process and findings
Dignity and respect - spend time listening to people to get to know them and their needs; respect people's right to make their own choices and decisions; communicate with people in a clear, open and straightforward way using appropriate language.	The survey was developed in plain English, avoiding jargon, and most questions were made with an optional response as opposed to a required response. The report was written in plain English, with clearly defined conclusions and recommendations.
Working together - offer people a range of realistic options and choices; be committed to working as part of a team and support others in the team; understand and respect that other people have different priorities and needs.	We accepted the corporate response from Cafcass as it was the only realistic option available to them, and incorporated it into the findings. Our research team comprised multidisciplinary researchers including academics, researchers, a therapist and mediator and every decision taken was done so unanimously.
Commitment to quality care and support - give people your full attention and help people when they need it most; be warm, kind, reliable, empathetic and compassionate towards others; be flexible and react calmly to whatever happens, making changes as necessary.	We achieved this by swift and effective communication between the research team and prospective respondents, answering queries as they arose. We showed acceptance towards the difficulties experienced as a result of the pandemic and remained flexible in the way they wished to take part, reminding them that participation was voluntary and there was no compulsion to participate.
Learning and reflection - accept and think about any feedback you are given about your work and learn from the feedback; be honest and transparent and are not afraid to admit when you have made a mistake; know your own limits and can identify when you need help and support and are feeling stressed by your work.	The research team met frequently to update on progress, risk assess the project, support each other's contribution and consider formative feedback on survey implementation and findings. We asked the funder for comprehensive feedback on a 'headlines summary' of the literature review and the draft report, and was prepared to make amendments where required. The whole research team offered and accepted both academic and pastoral support throughout the project, the latter in relation to the pandemic.

Learning activity 1

Research and identify the key features of each of these web-based survey tools.

Learning activity 2: Pause for thought

Read the advantages and disadvantages of online surveys in Boxes 1 and 2, and think about each as you continue to read through this case study. Can you think of any more pros and cons of this method?

Learning activity 3: Rewind and rethink

Consider this online survey and what you might have done differently, if anything. Think about the different kinds of families as outlined above in the section that explores why parental alienation is an important subject for research: couples with disabilities; same-sex couples; ethnic diversity and mixed race families; one or both parents with a mental health disorder or alcohol/drugs issues, cultures where honour-based violence exists, or domestic abuse. What about other family members such as grandparents?

Learning activity 4: Test your knowledge of how to design an online survey in health and social care

Imagine you are a children's social care worker. Your manager wants to know the experiences and opinions of social care staff in the region about how they have managed implementing new regulations for children in care: they want the information within the next four weeks. Your colleague suggests you run a survey. So your task now is to design a set of questions for a survey that you think will give your manager the information they need. Select an online survey tool of your choice and develop your survey by using closed questions, questions with multiple choice responses, questions which require Likert scale answers and open questions requiring a narrative response. Consider what is reasonable in terms of completion time for busy health and social care staff. Do not enable the survey to go live, but pilot it as above. Consider whether to revise your questions.

Box 1: Advantages of online surveys

Advantages of online surveys
- Precise project management by one person - useful in your final year project
- Low cost (if any) compared with other survey modes which rely on paper-based questionnaires
- Adaptability - survey closure date can be manipulated to ensure maximum data capture. Helpful when working to tight deadlines
- Associated material such as the research proposal and conceptual definitions for the study can be linked to the survey
- Design flexibility - quantitative, qualitative or mixed; can design for diversity and different learning styles; routing patterns and logic can be used effortlessly for a smoothly functioning survey that is relevant to sub-samples
- Incorrect contact details for respondents is known immediately if using email distribution
- Ensures data security - surveys can be password protected, and web servers encrypted and hidden behind organisational firewalls
- Reliability - test-retest between researchers or by piloting with colleagues can be easily achieved before survey goes live
- Automation in data input and handling - automatic data storage and quick download of dataset
- Inclusive and potential wide reach of participants through large geographical spread
- Absence of interviewer - no interviewer bias or desirability bias; no interview appointments required. Helpful when accessing busy health and care professionals
- Convenience – respondents can complete survey in their own time and pace; ability to save responses and return to the survey multiple times, so not having to complete in one sitting
- Tracking and real-time access - swift and accessible analysis as responses come in; instils confidence in the data

Box 2: Disadvantages of online surveys

Disadvantages of online surveys
- Sample selection bias
- Survey fraud - less accountability; no validity to responses (ticking boxed just to finish quickly)
- Limited sampling - inability to reach challenging populations and respondent availability; lack of access to the Internet, e.g. elderly, learning disabled, physically disabled, blind or those having no digital skills
- Low respondent engagement - respondents can simply delete the email and survey link; having to send reminders
- Absence of researcher - a trained interviewer would be able to probe and clarify responses
- Almost impossible to achieve 100% response rate - response rates are generally low
- Anonymity disallows data removal if respondent wishes to later withdraw
- Not appropriate method for some samples - where respondents are potentially vulnerable; sensitive topics need to be teased out by a skilled interviewer.
- Respondents can respond multiple times to a survey thereby skewing the results – unless of course the survey is set up so that respondents are only permitted to reply once.

Box 3: What is parental alienation?

What is parental alienation?
The term was originally developed in America by Gardner (1985). It can be understood as a child's resistance or hostility towards one parent which is unjustified; rather it is the result of psychological manipulation by the other parent. Manipulating behaviours include strategies to control or prevent contact, to denigrate the other parent, and to align the child with the alienating parent. Role distortion occurs between the alienating parent and child, where an unhealthy alliance positions the child as a partner to the parent.

Appendix I - Figure 6: Survey logic

NATIONAL SURVEY ON PARENTAL ALIENATION

Informed consent statements

Section A: to be completed by respondents who work in the legal sector and/or social work

Section B: to be completed by respondents who work in mediation

Section C: to be completed by respondents who work in therapy or counselling

Section D: To be answered by all survey respondents

Section E: Demographic questions

Reminder of consent

THANK YOU
(List of support services)