

TEMPLATE ANALYSIS

Template analysis is based on using themes to code interviews or other textual data. In this respect it is not dissimilar to content analysis. The themes can arise from previous research or 'emerge' from the transcript data. In dissertation research it speeds the analysis and grounds it in more established theory if existing codes are used. These may be identified, and perhaps modified, from published research that has been explored and critiqued in the literature review. The themes are coded for ease of analysis - you can use the existing coding or devise your own coding system. In dissertation research, it is sometimes useful to simplify the themes and coding systems because it may speed up the analysis process. The themes and codes are normally, but not always, arranged in hierarchical form. Each theme should have an accompanying theme definition, characteristics list and scope definition.

Template analysis is completed by taking the following steps:

1. Use existing theory and literature to define the themes and the codes.
2. Format the transcripts in such a way as to allow easy coding - a very large right-hand margin.
3. Code the transcript using the existing themes and codes.
4. Where part of the transcript does not fall under one of the existing codes, highlight or mark it as 'code pending'.
5. Complete the coding of the transcript in this manner.
6. Return to the 'code pending' sections and do one of the following:
 - Modify the definition of a code to include the uncoded section
 - Create a new theme and code.

In any transcript there will also be sections that are not significant and therefore do not require coding. Code even these sections (as 'uncoded') because later revisions may require a reanalysis of these sections.

Deciding when to start the analysis is crucial. The traditional approach is to collect all the data and then to carry out the analysis on all the cases. But because you will have a restricted time-scale you may want to start the analysis as soon as the first interview is completed. This may mean that you have to revisit some of the early cases to ensure that you are coding with the latest revised template.

The template must be revised in the following circumstances and for the following purposes:

- changing the definition or characteristics of a code - what it is
- changing the scope of a code - what can be included in the code
- creating a new code
- changing the hierarchical level of a code
- removing a code.

Some of these changes require a reanalysis of all of the cases. This will not be too lengthy a task because the transcripts are coded. It is a much easier task if you are using qualitative analysis software. At all stages you must keep a definitive master template

that represents the current template. It is also a good idea to keep a copy of all the earlier versions of the template in case you decide to revert to one of them. If you are not using qualitative data analysis software, a Word document in outline view may represent the template very well. Mind maps can also be used to display the final template - this affords more practicality in exploring the relationships between themes.

Outputs from template analysis are the template, definitions and characteristics of the categories, the scope of the categories, and a reflective account of how the template developed. Excerpts from interviews should be used as evidence to support the characteristics and development of the template. This will lead to a discussion in the findings section related to the categories, the expression of behaviours and concerns, and ideas for easing problems related to categories. In developing the findings of template analysis, it is unlikely that all the themes will be explored - be selective and develop arguments, explanations and recommendations based on the most important themes.

Example of a coding template

Participants' reactions to renal disease	
<i>First-level code</i>	<i>Second-level code</i>
Immediate reactions on diagnosis	Strong negative emotion Lack of emotion Confusion Blame, and sense of injustice
Participants' explanations of renal disease	Earlier lack of control Lack of information/misinformation from medical staff Fate Inheritance
Living with renal disease	Impact on lifestyle Involvement with the medical system Coping strategies
Hopes, fears and expectations for the future	Outlook Treatment Development of the condition Uncertainty

Two integrative themes are stoicism and uncertainty.

Source: King, N., Carroll, C., Newton, P. and Dorman, T. (2002). You can't cure it so you have to endure it: The experience of adaptation to diabetic renal disease. *Qualitative Health Research*, 12(3), 329-46

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