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Conducting Go-Along Interviews to Understand Context and Promote Health

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Abstract

Go-along interviewing is an innovative approach to obtaining contextualized perspectives by conducting mobile interviews in which the participant acts as a navigational guide of the real or virtual space within which he or she lives. In this study, we used go-along interviews to obtain college students' contextualized perceptions of sexual health resources. Seventy-eight undergraduate students showed and described the resources on and near five campuses in a Midwestern state. In this article, we focus on the methodology of go-along interviews. The go-along, a relatively new methodology in health research, is a format in which participants take an active role in shaping the interview, and it facilitates identification of resources that might be overlooked using traditional interview formats. The go-along methodology is promising for researchers wanting to ground health-promotion efforts in the context of environmental or community-based strengths and needs.

Keywords

data collection and management; health behavior; health information seeking; interviews; sexuality / sexual health; visual methods; young adults

It is expected that researchers conducting studies to understand participants' experiences and perspectives describe the context in which participants are offering their views. Typically, the contextualization of qualitative research has been accomplished through researchers' observations and subsequent descriptions of setting and context. Through some techniques, such as reflective journaling and mapping techniques, researchers invite participants to actively contribute to contextualizing their experiences.

In a go-along interview, the researcher is able to move one step further, exploring the context with the participant in real time, with the participant in the role of expert guide explaining the meaning of the environment. A go-along interview entails embarking on a participant-guided tour of the real or virtual space within which the participant conducts his or her life (Carpiano, 2009; Jones, Bunce, Evans, Gibbs, & Ricketts Hein, 2008; Kusenbach, 2003). A researcher who values the role of place in the fluid interdependence of life experiences and society might benefit from the go-along technique (Sheller & Urry, 2006). Through multiple interviews with diverse participants, a research team gathers rich and varied perspectives of a contextualized environment. Consequently, the go-along interview is gaining attention as an approach to use when understanding relies heavily on knowing how participants perceive their environment.

In our study, we anticipated that (a) the go-along method would be a tool to contextualize our questions about sexual health resources on college campuses by offering a vivid portrayal of the campus, and that (b) discussion of sexual health resources would be facilitated by an indirect "talk-as-you-walk" manner more so than in a face-to-face sit-down interview. In this article, we describe the go-along interview method as used for evaluating resources based on our experience conducting go-along interviews with college students.

Why Go-Along Interviews?

Go-along interviews, also called walk-along interviews or walking interviews, have been used in numerous disciplines including health studies, anthropology, sociology, and geography (Anderson, 2004; Carpiano, 2009; Hall, 2009; Springer, Black, Martz, Deckys, & Soelberg, 2010). Because of the increasing attention being directed

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toward contextualizing understanding and engaging in participatory research, it has been argued that research methods such as go-along interviews capture the natural relationship between health and place in a participatory manner (Cummins, 2007). Most recently, the go-along approach to collect data has been endorsed by researchers who adhere to a "new mobilities paradigm," particularly within the social sciences (Sheller & Urry, 2006).

Carpiano (2009) conducted go-along interviews in Milwaukee neighborhoods and credited an urban planner with initial use of go-along interviews in the 1950s (Lynch, 1960). A familiar use of go-along interviews might be the work of Jonathan Kozol (1995) within school districts in low-income neighborhoods. Go-along interviews have been used to explore social activism (Anderson, 2004), neighborhood public health resources (Carpiano), urban social work outreach and the transition from adolescence toward adulthood (Hall, 2009), and health disparities (Springer et al., 2010).

Trell and Van Hoven (2010), in a multimethod qualitative study of Canadian children's perceptions of their school environment, contrasted their findings from go-alongs to their findings from the same participants using other methods including the traditional sit-down interview. They concluded that the go-along interview added a layer of depth to their findings; for example, as students saw their school, heard ambient noises, and ran into friends while discussing their environment, they added to or even contradicted their statements from the traditional interview, which was based primarily on recollection of environmental experiences. In this study, there was a clear difference in information obtained between the interview approaches. It is important to recognize, however, that although the knowledge gained varies by approach, neither result is inherently inferior. Instead, the value of the insights gained is largely dependent on the knowledge sought and the study purpose.

The use of go-along interviews in sexual health research has not been documented in the literature to date. Five topical areas particularly suited to go-along interviews have been proposed: environmental perception, spatial practices, biographies, social architecture, and social realms (Kusenbach, 2003). Students' perceptions of sexual health resources available on a college campus represent two of the topic areas conducive to using a go-along approach: environmental perception and social realm.

Discussion of sexual health resources available on a college campus might be difficult for some students, even in a one-to-one interview format. Although Downing-Matibag and Geisinger (2009) demonstrated successful recruitment of college students to discuss personal sexual behaviors in face-to-face interviews, we believed that a go-along approach might be more attractive to students who could be reluctant to sit down and talk about the topic of sexual health. The go-along approach encourages collaborative participation that some have found conducive to participant openness and frankness (Anderson, 2004; Carpiano, 2009). Brown and Durrheim (2009) posited that in a go-along interview, the environment itself might shape some of the discussion, taking some of the perceived focus, and pressure, off the participant and interview script while allowing a dynamic conversation. Ross, Renold, Holland, and Hillman (2009) similarly found,

> The interactions that took place on the move were dynamic, characterized by a more free flowing dialogue, moving from topic to topic, returning to previous topics, allowing unstrained gaps and pauses. The pressure to converse was removed somewhat from these research encounters. (p. 619)

Researchers have described go-along interview approaches as effective ways of balancing the power dynamic inherent in research and thus encouraging a more collaborative approach (Anderson, 2004). Carpiano (2009, p. 267) found go-along interviews to be a "rapport builder" that was of help in overcoming potential perceived power disparities of education and race and allowing him to interact with community members on a deeper level. Researchers working with youth cited similar experiences (Ross et al., 2009; Trell & Van Hoven, 2010).

Researchers have also described some limitations to the method, notably including logistics, possible safety concerns, required time investments (particularly in larger neighborhoods), susceptibility to weather and other outside factors, and analytic issues (Carpiano, 2009; Hein, Evans, & Jones, 2008). Additional considerations include research conditions, such as the need for additional parental consent when the participants were minors and additional complications when desiring to conduct go-along interviews with groups of people (Trell & Van Hoven, 2010).

College Sexual Health Resources

Unplanned pregnancy and sexually transmitted infections (STIs) disproportionately affect young people (Finer & Henshaw, 2006; Weinstock, Berman, & Cates, 2004). The rate of unplanned pregnancy is highest among women ages 18 to 24—the traditional college ages—with more than one unintended pregnancy for every 10 women (Finer & Henshaw). Data from the American College Health Association's National College Health Assessment show that nearly 80% of college students have ever had sexual intercourse (American College Health Association, 2008); this is an increase from 47% of high school students

(Eaton et al., 2006), which indicates that a significant number of college students have their first intercourse experience in a college context.

The college years are a crucial time for examining and intervening on high-risk sexual behaviors. Although college health services are well positioned to be a health care home for students, including the provision of sexual health services, they are often not treated as such by students. Approximately 50% of students who received STI testing or treatment did so at a community clinic (Boynton Health Service, 2009) rather than on their college campus; some colleges have contracts with off-campus clinics to provide these services, but, for others, this represents missed opportunities for colleges to meet students' health needs. Sexual health resources and, in particular, students' views on those resources have not been widely studied. Obtaining students' perspectives regarding ways in which services could be offered or expanded to better address their sexual health needs is a critical step toward making necessary improvements.

In this article we discuss our experience using go-along interviews to identify the sexual health resources as perceived by undergraduate students in a college campus setting. This methodological article is meant to highlight the go-along process, its application in this environment, and lessons learned that might guide future researchers considering this method. Data are used to highlight successes and challenges in using the go-along method in this context; detailed findings with respect to college students' perspectives on sexual health resources are available elsewhere (Eisenberg, Garcia, Frerich, Lechner, & Lust, in press).

Method

Participants and Recruitment

Ethics approval for the study was obtained from the University of Minnesota Institutional Review Board and from the respective ethical review boards at each of the participating colleges. Participating institutions included two community colleges and three 4-year colleges in metropolitan and nonmetropolitan areas of one Midwestern state. Between 12 and 18 participants completed semistructured interviews at each of the five institutions.

Participants were recruited by study staff positioned at a table in a high-traffic area on campus. Fliers were posted in public campus areas and staff at some colleges announced the study in a weekly mass email sent to the entire student body. Snowball sampling also occurred, with several participants indicating they heard about the study from other students on campus. Participant diversity was sought, and efforts were made to ensure gender balance. Students were told they did not need any prior experience with college sexual health services, or related knowledge, to participate. College health services employees and volunteers were not eligible to participate; we anticipated they would have levels of knowledge about the sexual health resources available on campus that were not representative of the average college student. Study staff screened interested students for eligibility and scheduled the interview, which generally occurred within a week of initial contact.

The final sample of 78 participants was between the ages of 18 and 24, with an average age of 20. In all, 38 women (49%) and 40 men (51%) participated. Of the participants, 52 (67%) self-identified as White and 26 (33%) as people of color. Participating colleges' student bodies ranged from 4.8% to 22.6% of their students identifying as people of color. Participants came from a broad range of student communities, including dormitory residents; commuters; transfer students; first-year and advanced students; the gay, lesbian, bisexual, transgender (GLBT) community; the Greek community; military; athletes; pregnant and/or parenting students; those who identified themselves as sexually active; and those who identified themselves as having never been sexually active. Sexual activity status was not a formal question and was provided only by participants who chose to disclose the information.

Data Collection

Three researchers conducted the walk-along interviews: a faculty member and two graduate assistants. Each graduate assistant received instruction and shadowed before conducting an independent one-to-one go-along interview. The interviews lasted an average of 48 minutes (range = 24 to 88 minutes). Interviews took place during hours in which health services were available to ensure that students would have access to health services if they wished. After a review of how the go-along interview would proceed, and of the recording devices used, participants provided consent and completed a demographic form. Each participant received a $50 retail store gift card as a token of appreciation. The one-to-one interviews were audio-recorded with a discrete lapel microphone and began in a public meeting space on campus. Interviews were conducted on foot within the physical campus boundaries and included accessing physical and online resources.

Each interview began with an exercise that included "warm-up" questions about where to find a snack on campus; this was done to familiarize participants with the format of a go-along interview. The interview guide comprised four primary questions for the go-along interview on sexual health resources: (a) How do you find information on sexuality or sexual health at [name of college]? (b) If you had a sexual health concern—say a friend came to you and thought they had an STI—what could [name of college] do to help? (c) Do you have a clear idea of what [name of college] wants for students in terms of their sexual health? (d) You've given me a lot of examples of sexual health resources at [name of college]. Can you tell me what your top five most important or helpful resources on campus would be, including what is actually here and any other ideas you might have? When the participant named a specific resource, the researcher asked to be shown it, and the two walked to the physical resource or went to a computer for online resources.

Analysis

Interview data were uploaded to a secure server and deleted from the devices. Interviews were professionally transcribed and checked for accuracy against the audio recording by one of the researchers. The transcripts were uploaded to ATLAS.ti (Muhr, 2010), a qualitative software program that facilitates coding organization. We used a constructivist paradigm in our content analysis to identify students' perceived sexual health resources and gaps on their respective college campuses (Denzin & Lincoln, 2000). Operating from this paradigm, we acknowledged the coconstruction of knowledge that organically occurs between the researcher and participant during the go-along interview. We recognized that knowledge gained about sexual health resources on college campuses is the result of a collective, cocreation process between the interviewer and participant. We conducted descriptive, simultaneous coding (Saldaña, 2009) to inductively generate a codebook. Carolyn Garcia had primary responsibility for the analysis process, including the computer-assisted coding, organization of codes into categories, and identification of overarching themes. Initially, each of the three interviewers independently coded the same interview to examine intercoder reliability (Richards, 2009). Duplicate coding occurred eight times, offering confidence of consistent coding reliability throughout the analysis of all 78 transcripts. Codes were collapsed into descriptive categories informed by the study aims for within- and across-group comparisons (i.e., differences and commonalities by campus type).

Results and Discussion

In conducting go-along interviews, the researcher faces unique benefits as well as challenges. Our results and discussion focus on methodological insights gained about (a) the dynamic nature of the method, (b) data richness, and (c) logistics.

Dynamic Nature of the Go-Along Interview

Through the use of go-along interviews, the participants seemed to be put at ease, and a natural conversation with participants ensued. Initially unfamiliar with the go-along interview, participants exhibited curiosity about what it would entail. We observed that this lack of familiarity encouraged candidness in part because participants could not necessarily predict or anticipate what would come next. The warm-up question, perhaps superfluous in a traditional interview, seemed particularly useful to participants, many of whom were visibly relaxed after going through a loose example of what the go-along interview would be like. This lack of expectations, coupled with the interviewer's assurances that the participant's viewpoint was of interest rather than a "correct" answer, appeared to contribute to collaborative and flexible conversations. Many participants seemed to forget they were being interviewed as they walked around the campus on a "scavenger hunt" for sexual resources. Participants were able to literally set the pace of the interview, some choosing to walk through campus the entire time and others stopping often for a seated conversation. One participant commented on the dynamic nature of the walk-along: "Cool, this is an awesome survey. It's not like the traditional pen and paper where you get bored."

The dynamic nature of the interview was also demonstrated in the diversity of routes participants chose and the amount of movement that took place within the interview. The loosely structured interview guide was designed to encourage this open-ended, iterative process while maintaining the focus of the interview on sexual health resources. As a result, all but one of the participants led the interviewer to their campus health services office. However, depending on students' connections to campus, unexpected areas were also included in the guided tour, such as bike rack locations (for safe transportation), athletic training rooms (for athletes who identified that as a comfortable place to access resources), and dormitories (for resident students who commented on the availability of condoms). The go-along interviews were perceived by the interviewers as quite natural, and this was partially evidenced in the lack of attention given to the duo by other persons in the environment. At times, the participant was approached by a friend on campus, and they casually conversed about something briefly and then went on their way, the friend unaware an interview was being conducted.

Participants chose different ways to seek out information. For example, one participant preferred books as resources and spent a significant amount of time exploring the college bookstore. Some participants stated they would search online and demonstrated their search techniques, others preferred to personally approach staff to ask for information or suggestions of resources, and one participant voiced a desire to "phone a friend." The weather, construction, participants' physical limitation/preferences, and geographic distance contributed to how the go-along interview progressed through campus.

All participants sought out and appeared to think about resources in their own manner. This variety of perspectives yielded interviews that intuitively seem to have realistically reflected the breadth of participant experiences, and that offered insights into the range of communication methods and locations that could be used on campus to enhance utilization of resources. However, because the interviewers did not independently walk through the campuses, it is possible that some useful contextual information or key sexual health resources were missed, even with our relatively large sampling on each campus.

Data Richness

The interview guide was purposefully short and open-ended because we expected, accurately, that walking through campus would trigger participants to share examples and experiences (De Leon & Cohen, 2005). For example, a participant leaving one location looked around and noticed the building that housed the training room for athletes. He then took the interviewer to that location to look for sexual health resources. The following dialogue demonstrates another instance of a participant stumbling across a resource:

> Participant (P): Oh, we apparently, I didn't know this before actually, we have a sexual violence prevention task force, so . . . yeah, if you read the fine print at the bottom I guess you can find out a lot.
> Interviewer (I): You mentioned in here would be the groups?
> P: Yes, yes, that's in the basement down here.
> I: More pamphlets?
> P: Oh, yeah, there [are] more pamphlets over there, I guess. I actually didn't notice this before.

In addition to walking cues, participants were at times presented with the opportunity to verify their ideas about resources or available information during the go-along. In one interview, a participant stated that the college bookstore would not have condoms for sale but, after walking with the interviewer to the bookstore, discovered that they were available for sale. In contrast, a participant confidently identified the college's information booth as a place with pamphlets about a variety of health resources. After leading the interviewer to the booth, she was surprised at the lack of pamphlets:

> P: And right now, it looks like they do not have anything of a health nature.
> I: Have you seen health-nature types of things here?
> P: I feel like I have in the past. I'm sort of surprised that there isn't anything, at least in general about [the health clinic].

In some cases, participants did not appear to be fully aware of their physical environment, which was something the interviewer could not necessarily observe in a traditional interview format. For example, one participant, when asked what he would change at college, responded,

> I'd have them hand out condoms and stuff. . . . A lot of people probably don't have protection. You can get them free from doctors, but that's out of the way and it can get expensive to get them from a store. I think it'd be pretty legitimate if they just handed them out.

At the time, the participant was sitting at a desk with a free bowl of condoms that he did not notice. When the interviewer observed sexual health resources that were not noticed or described by the participants, she did not identify the resource to the participant until after the go-along interview had been completed. Because the study aimed to understand student perceptions of sexual health resources rather than simply to list available resources, observations of participants overlooking desired resources were valuable data.

Interview Logistics

Many of the key logistics in the go-along interview were similar to those of a traditional sedentary interview. The go-along interviews did not take more time than traditional interviews would have been likely to take because the interview took place simultaneous to the tour. Even on the larger physical campuses, the go-along interview process was completed within the allotted time, typically 90 minutes, which included time for consent processes and documentation. Likewise, the cost of conducting interviews and the required equipment were similar to other interview approaches. However, our research demonstrated some key differences between the go-along and traditional interviews, as shown in Table 1.

Confidentiality of participants and nonparticipating students and staff was a main consideration in using the go-along approach. In transcription of the audio recordings, which occasionally included nonparticipants (e.g.,

Table 1. Comparison of Go-Along Interviews and Traditional Interviews

Aspects	Traditional One-to-One Interview	Go-Along Interview
Pros	Standardization of protocol Reduced vulnerability to weather, safety issues, environmental challenges Easy accommodation of physical needs (for participants with limited mobility, and so forth)	Participatory Allows "walking cues" Requires little additional training for researchers versed in traditional interviews Appeal might facilitate recruitment Data are identified in context Silences are naturally comfortable while walking Indirect attention toward participant
Cons	Can result in researcher–participant power dynamic Dependent on participant recall of environment Participant might feel uncomfortable in direct one-to-one format, which could limit what is shared	Vulnerable to weather, safety issues, environmental challenges Analytical/logistical difficulty of integrating environmental observations with transcribed verbal data Management of confidentiality/ethics for nonparticipants Potential participant discomfort walking in public with researcher
Similarities between both types of interviews	Importance of interviewer being able to set participant at ease Importance of comfort with technology (checking audio recording, batteries, quality check of transcription, and so forth) Importance of interviewer recording nonverbal impressions Amount of time per interview	

participant talking to a staff person, acquaintances walking by), we preserved the anonymity of all speakers. Similarly, researchers reminded participants to respect the privacy of nonparticipants.

The dynamic and contextualized nature of the interviews gave rise to logistical data recording and analysis challenges. For example, in many instances, the participant gestured or indicated something nonverbally about a sexual health resource. To address these potential gaps in audio-recorded data, the interviewer needed to remind the participant to verbally describe what was being pointed out. These instances occurred in the natural and electronic environments. Even though interviewers were diligent to remind participants to verbalize observations, there were some missed opportunities for verbal clarification of resources. For example, the interviewer asked how a participant would help a friend with an STI. He replied, "I would say go ahead and [unspecified hand gesture]. I'm sorry; I talk a lot with my hands." The interviewer did not clarify verbally what the participant was gesturing toward or about. Other times, participants' suggestions of adding signage or pamphlets were simply to have them available "over there," and the interviewer did not always remember to ask the participant where "there" was located.

Logistical considerations also relate to participant recruitment and the natural climate. Because the go-along interview required moving around physically on campus, it is possible some people excluded themselves from enrolling because of physical limitations. Go-along interviews can be subject to environmental limitations. In our study, there were no serious disruptions caused by weather or construction.

The size of the campus can be an inhibiting factor; some participants on larger or more spread-out campuses chose to describe a relatively distant resource rather than walking there. One participant on a smaller campus noted about the go-along interview, "It's not a big campus so it can't be hard." An alternative approach to the walking go-along could be using a vehicle; these options are dependent on the study purpose, safety considerations, and the setting or community being explored.

Finally, the use of recording technology "on the go" presented challenges in addition to those inherent in conducting a stationary interview, such as recorders being inadvertently turned off while walking, muffled recordings because of wind or passing airplanes, lapel microphones falling off, and encountering nonparticipants. Recommendations for successfully using technology in go-along interviews are shown in Figure 1.

Before the interview:
- Ensure adequate supply of batteries/fully charged devices
- Check function of each device by turning it on and off
- Review ethics of confidentiality with participant (i.e., protocol of discussions with others during the recorded interviews)

At the start of the interview:
- Attach lapel microphone securely to participant
- Confirm recording device is recording
- Secure recording status using the hold feature of the device

During the interview:
- Confirm recording device is recording every 15 minutes, approximately

After the interview:
- Document environmental factors or circumstances (i.e., weather conditions, construction)
- Upload and check recorded interview
- Document any technological difficulties that occurred; if dialogue was lost, immediately journal recollections of the discussion
- Delete data from devices upon confirmation of successful upload to secure computer/server

Figure 1. Technology checklist for go-along interviews

Conclusions

Go-along interviews are a unique approach to understanding phenomena by obtaining contextualized real-time perspectives. Alongside participants, interviewers observe and reflect on a range of environmental factors. Prevention researchers might benefit from using a go-along interview approach to more deeply understand risk and protective factors or resources, for example, in the lives of adolescents. Health promotion researchers could use go-along interviews to examine contextualized barriers and facilitators to intervention effectiveness.

We used this approach in settings with definite borders: college campuses. It is possible go-along interviews are ideally suited to studies with specific physical boundaries, such as homes, schools, neighborhoods, or communities. It is also possible that go-along interview methods could be suitable to any study setting with adaptation. For example, a go-along study examining health risks for taxi drivers would entail driving. A study exploring experiences of first-time mothers might use a go-along interview protocol that requires spending multiple days in the day-to-day activities that could include being in the home, a park, a grocery store, or a health care clinic.

Go-along interviews proved to be valuable in our research with college students about a particularly sensitive health topic. It is an approach that might be more attractive to some study participants, such as adolescents, than a traditional one-to-one interview format. Researchers employing a go-along method might consider using a protocol that includes the interviewer conducting an independent tour of the research setting or a tour with an expert (e.g., the director of health services on a college campus) to ensure complete knowledge of resources. This addition could enhance interpretation of the participants' perspectives but has potential to also influence the interviewer's behaviors during a go-along interview, such as the probes that are asked when visiting certain locations. To minimize this potential limitation, the independent tour could occur after all interviews had been conducted.

Formalizing the interview structure, for example, the places that will be visited during the interview, is one strategy for minimizing differences across interviews. Although this was not appropriate to our research question regarding what students thought of as sexual health resources, a more structured protocol might be appropriate for some studies. Future researchers might explore the benefits of various levels of protocol specificity when conducting go-along interviews. In addition to protocol details outlining how the go-along is conducted, researchers need to be clear regarding processes to ensure confidentiality or anonymity of nonparticipants, such as those who could be approached or spoken with during the study, casually or for the purpose of the study.

Our study is not without limitations. Because we did not conduct face-to-face stationary interviews, we are unable to make a data-informed methodological comparison with go-along interviews. Notably, the purpose of this study was focused on obtaining environmentally contextualized perspectives of college students about sexual health resources. The choice of methodology allowed us to ascertain the existence of resources, key factors and barriers to accessing them, and the degree to which students were aware of them (these findings are detailed elsewhere). The study was not specifically conducted to evaluate interview methodologies and therefore was not designed with a comparative element; future methodological research exploring interview approaches and the subsequent knowledge gained would contribute to our understanding. Also, we did not explicitly ask participants about the go-along interview experience, which would have contributed specific insights about the process. As a result, our observations are limited to examining what participants organically shared about the process.

Finally, interviews were scheduled at different times on the participating campuses that occurred over a period of several months; this approach encouraged participation because interview periods were scheduled around campus-specific breaks. However, it also presents a limitation in that interviews conducted during a narrow window of time would enable broader contextualization of the go-along interview data. For example, if all interviews across the campuses had been conducted during the same month, analysis could include campus happenings or broader societal events that could contribute to the participant perspectives that were shared during that time frame. This would be particularly important to consider in studies addressing topics that are more obviously linked to current policy topics or social happenings.

For example, a study conducted to understand how families prepare for possible disasters might yield certain knowledge during a time frame in which natural disasters are more likely to occur in that geographic region that could potentially differ from the insights shared during the off-season. This example points out a final limitation to consider. Our study conducted go-along interviews with participants at only one time; conducting a follow-up go-along interview could provide valuable information through confirming, clarifying, or elaborating ideas and insights that were shared in the initial interview. Despite these limitations, our study contributes to advancing understanding of how go-along interview approaches can be used in a variety of inquiries that fundamentally seek out contextualized, and participatory, data.

In summary, go-along interviews have been used in a variety of disciplines to elucidate contextualized understanding in a manner distinct from traditional interview approaches. Go-along interviews are consistent with participatory research methods in which participants more actively guide an iterative data sharing process. For some areas of inquiry and many populations, go-along interviews might represent a valuable approach to engaging participants and offer potential for contextualized understanding. This potential makes the go-along interview approach valuable for adequately knowing and intervening on complex factors experienced by individuals, families, and communities.

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