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Letter to the Editor

Reconsidering Rigor in Qualitative Health Research: From Checklists to Contextual Trustworthiness

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Dear Editor,

Rigor remains one of the most frequently invoked criteria for evaluating qualitative research in the health sciences, shaping judgments of credibility, legitimacy, and scholarly value. Yet, despite its centrality, rigor is often treated as a stable, self-evident concept rather than a theoretically situated and methodologically negotiated construct. In recent years, the increasing reliance on standardized appraisal tools and checklist-based frameworks has further consolidated this assumption, subtly redefining how rigor is understood, demonstrated, and assessed in qualitative health research (1). The widespread adoption of checklist-oriented evaluation is not without justification. In interdisciplinary research environments, such tools offer a sense of consistency and provide reviewers and editors with recognizable indicators of methodological adequacy. They also respond to broader institutional demands for transparency and accountability in health research. However, when rigor becomes primarily equated with procedural completeness, there is a risk that qualitative inquiry is evaluated through criteria that privilege formal compliance over interpretive quality. Rather than revisiting established concepts of rigor or trustworthiness, this letter contributes by reframing their relationship in the context of contemporary qualitative health research. It argues that rigor should be understood as a context-sensitive and epistemically coherent practice, with implications for how qualitative studies are interpreted and evaluated during peer review (2).

Qualitative health research is fundamentally grounded in interpretive engagement with meaning, context, and experience. Its analytic strength lies not in methodological uniformity, but in the coherence between research questions, theoretical positioning, methodological choices, and interpretive claims. When evaluative attention is disproportionately directed toward whether specific techniques are reported, the deeper analytic work through which meaning is constructed may be insufficiently recognized. In such circumstances, rigor risks being reduced to a visible set of methodological signals rather than an internally coherent epistemic practice (3). This procedural framing has important implications for peer review. Reviewers may prioritize the presence of commonly endorsed practices, such as triangulation or participant validation, without adequately considering their conceptual relevance or analytic function within a given study. Methods may be expected by default, rather than evaluated in relation to the study's epistemological orientation. As a result, methodological conformity can be inadvertently rewarded, while theoretically intentional deviations are interpreted as weaknesses rather than as analytically grounded choices (4).

These limitations become particularly evident in culturally diverse and contextually complex health research settings. Many standardized appraisal frameworks are rooted in specific academic traditions and implicit assumptions about how credibility is established. When applied uncritically across contexts, they may fail to capture locally grounded analytic practices or culturally situated forms of meaning-making. In such cases, rigor cannot be meaningfully assessed without attention to the conditions under which knowledge is produced and interpreted (5). A more theoretically aligned approach involves understanding rigor as context-sensitive trustworthiness. From this perspective, rigor is not a fixed set of methodological requirements but an emergent quality of the research process. Trustworthiness is demonstrated through analytic transparency, reflexive engagement, and epistemic coherence, allowing readers and reviewers to evaluate interpretations in relation to the study's aims, context, and theoretical commitments rather than against a universal methodological template. Importantly,

this perspective is not intended to prescribe a single standard of rigor across all qualitative methodologies. Rather, it recognizes that different qualitative traditions are grounded in distinct epistemological assumptions, and that appropriate criteria for evaluating rigor should remain responsive to these methodological differences (6).

Reflexivity is central to this understanding of rigor. In qualitative health research, researchers are not neutral observers but active participants in knowledge construction. Reflexive engagement enhances rigor by making interpretive positions, assumptions, and analytic decisions visible and accountable. However, reflexivity is often poorly accommodated within checklist-based evaluations, where it may be reduced to a brief declarative statement rather than recognized as an ongoing analytic stance embedded throughout the research process. Similarly, transparency in qualitative inquiry extends beyond prescriptive reporting requirements (7). Transparent research articulates the reasoning underlying methodological and analytic decisions, including those shaped by ethical, institutional, or contextual constraints. In health research, such constraints are not peripheral but constitutive of the research process itself. A context-sensitive conception of rigor allows these realities to be analytically integrated rather than treated as deviations from an idealized methodological norm (8).

Reconsidering rigor in this way does not require abandoning appraisal tools or reporting guidelines altogether. Such frameworks can serve important communicative and pedagogical functions, particularly for interdisciplinary audiences. When applied thoughtfully, these frameworks can complement interpretive judgment by promoting transparent reporting while allowing methodological decisions to be evaluated within their epistemological and contextual foundations. Their value therefore lies not in replacing critical appraisal, but in supporting more informed and contextually grounded evaluation of qualitative research.

However, their use should remain interpretive rather than prescriptive, informed by an appreciation of epistemological diversity within qualitative inquiry. In practice, this perspective encourages researchers to provide explicit justification for methodological and interpretive decisions, reviewers to assess the coherence between epistemological assumptions and analytical claims rather than the mere presence of specific techniques, and journal editors to promote flexible evaluation criteria that recognize methodological diversity while maintaining expectations for transparency and reflexive accountability.

Editorial and review practices play a critical role in sustaining this balance by prioritizing analytic coherence and theoretical alignment over checklist fulfillment alone (9). In conclusion, while checklist-based approaches have contributed to greater transparency in qualitative health research, their uncritical dominance risks narrowing how rigor is conceptualized and evaluated. Reconceptualizing rigor as context-sensitive trustworthiness offers a more philosophically coherent and intellectually robust foundation for assessment. Moving beyond procedural compliance toward interpretive integrity allows qualitative health research to more fully reflect the complexity, reflexivity, and contextual embeddedness that define its contribution to the health sciences. By offering this conceptual reframing, the letter complements existing methodological discussions and encourages evaluation of qualitative research that is guided by epistemic coherence rather than procedural conformity alone.

Conclusion

Rigor in qualitative health research is best supported through a balanced approach that combines transparent reporting with context-sensitive interpretive judgment. Rather than relying on procedural compliance alone, researchers, reviewers, and journal editors should evaluate qualitative studies according to the coherence between their epistemological orientation, methodological decisions, and interpretive claims. Adopting this perspective can strengthen both the credibility and the meaningful evaluation of qualitative research while respecting the methodological diversity that characterizes the field.

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