

THE ONLINE QUESTIONNAIRE AS A DATA PRODUCTION DEVICE IN HEALTH RESEARCH

ARTIGO ORIGINAL

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ABSTRACT

This article aims to present and discuss an experience of applying an online questionnaire (QOL) as a data production device in the universe of health research. This is a survey carried out in a partnership between the Faculty of Medicine of USP and the Research and Training Center of Sesc São Paulo, which proposed to develop a new concept of an online questionnaire, aimed at capturing the life experience of respondents during the period of the Covid-19 pandemic. Based on the theoretical-methodological framework of intervention research, the results of this experience point to the proposition of an in-depth questionnaire, based on the use of different communication techniques and the active incorporation in its form and content of at least 4 dimensions that are inseparable from the production of knowledge in health: (1) its ethical-investigative dimension, (2) the clinical dimension, (3) the aesthetic-communicational dimension and (4) its political dimension. It is concluded that, with the growing process of virtualization of life - which is also expressed in investigative processes in health - the reinvention of online data production techniques can be presented as a strategy for the creation of innovative processes in academic production, which allow for an extensive and plural increase in samples, without losing depth in the production of knowledge and care.

Keywords: Online questionnaire, Research methods, Intervention research.

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INTRODUCTION

In research in general, a questionnaire can be defined as "an investigation technique composed of a more or less high number of questions presented in writing to people, with the objective of knowing opinions, beliefs, feelings, interests, expectations, situations experienced etc." (GIL, 1999, p.128).

Most of the time, questionnaires are used in a structured format, aimed at quantitative or mixed research with representative samples of a group or population set, applied online or in person. However, in recent decades, with the advent of cyberculture and the development of new knowledge production technologies, the use of online questionnaires (QOL) in qualitative research has grown exponentially, both in the field of human sciences (MCGUIRK; O'NEILL, 2016), (CHAER; DINIZ; RIBEIRO, 2011) and in health sciences (RAMJAN; FOGARTY, 2019). This phenomenon became more acute in the context of the Covid-19 pandemic, with the restriction of data collection possibilities in face-to-face contexts, which led to the adoption of new data production practices or the reinvention of old instruments.

Face-to-face interviews and empirical observations are the most traditional strategies for collecting qualitative data (GRAY; *et al.*, 2020) and tend to deepen the research object from the perspective of the participant interacting with the interviewee, to what is usually not achieved in an online questionnaire (QOL).

Precisely for this reason, the present article aims to present a process of construction and application of a questionnaire that, within the scope of an intervention research, faced some limits of its online modality based on the concrete experience of a quantitative and qualitative research in health.

Without intending to replace the face-to-face interaction between interviewers and interviewees, we propose to introduce some elements to the QOL, which allow: (a)



a greater degree of interaction between participants and researchers, (b) an increase in their communication possibilities, (c) the expansion of its potential for intervention in the researched reality. With the confluence of these three possibilities, we propose the creation of what we call an in-depth questionnaire.

Although the conceptual and methodological formulations in this article may be useful for different types of research approaches that use the QOL as a data production technique, the theoretical-practical background that inspired this proposition was that of intervention research.

Intervention-research seeks to promote a break with traditional approaches to the production of scientific knowledge, expanding the theoretical-methodological bases that understand research as a device for transforming the investigated sociopolitical reality (PAULON; ROMAGNOLI, 2010). In this direction, we propose that, more than a data production instrument, the QOL can function as an authentic device that mobilizes the subjective processes of the respondents.

For Gilles Deleuze (1990), devices are machines for making seeing and speaking processes that result from the crossing of regimes of visibility, of statements, of lines of force (the unspeakable and the invisible), lines of objectification and subjectivation – possible expressive dimensions of the problem that one wants to analyze in research.

In this sense, what matters to us, in addition to the data and results that the QOL can produce, is its production process, that is, the activity of constructing and answering the questionnaire is seen by us as a possibility of experience for researchers and participants, which can access, to some degree, the various regimes mentioned.

We propose to build, together with the research participants, other meanings to be added to the process of filling out a QOL. For this, we incorporated elements that reaffirm the dimension of the experience of participating in a research. From an

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existential and aesthetic perspective, we intend to think about the production of knowledge and the construction of its data production devices from the pair experience-affect or, in other words, from the pair knowing-caring, to approach more clearly the research-intervention in health.

But how can we produce knowledge-experience-affection-care, from an online questionnaire, without losing sight of the importance of its theoretical-methodological rigor and without mischaracterizing this instrument? Let's think about the problematization of this question based on an experience that gave us some clues for the construction of possible answers...

REPORT OF A RESEARCH EXPERIENCE: THE CREATION OF A QOL IN DEPTH

To report the QOL production experience in depth, we will initially present the process and context of its construction.

After months of collectively shared experience of the Covid-19 pandemic, the need emerged to investigate the processes of reinventing life and health in times of pandemic, in a context of partnership between the Department of Preventive and Social Medicine at USP and the Centro of Sesc-SP Training Research, which researched the borders between Health and Culture.

Sesc-SP and its units stand out as spaces for the production of cultural and leisure activities and, therefore, have an important vocation for the production of health insofar as, in addition to offering *stricto sensu* health services to salespeople, they favor the promotion of health and the production of commonality for the community in general, in multiple ways, but, in particular, by offering spaces for coexistence and meeting opportunities, mediated by its wide range of cultural activities.

One of the great challenges posed by the pandemic was exactly how to produce common and, therefore, health, in times of restrictions on our interactions, in a

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context of distancing and emptying of public spaces for coexistence. It can be said that the main objective of the research was to answer this question, based on the hypothesis that culture plays a fundamental role in this process. Thus, the investigation dealt with the multiple health production strategies that have been invented in times of a pandemic, identifying the worlds (the common ones) produced in these inventions and how certain "practices and cultural activities" participated in this production.

The very conditions imposed by the pandemic led us to propose a form of online data production. But, as we could not renounce the theoretical-philosophical assumptions of intervention-research that led us to formulate the research problem, the great challenge became that of elaborating a QOL that was capable, ultimately, of listening to the vital normativity being exercised and intervene in it/with it - We return here to the concept of "vital normativity", as proposed by Canquilhem unconscious of certain norms of life. Therefore, in the human species, the stat frequency (2002), for whom normality is constructed as a flexible relationship between the body-organism and the world, the body being a product of the activities that it performs relationally and, therefore, in constant transformation. In this sense:

> "Se é verdadeiro que o corpo humano é, em certo sentido, produto da atividade social, não é absurdo supor que a constância de certos tracos, revelados por uma média, dependa da fidelidade consciente ou inconsciente a certas normas da vida. Por conseguinte, na espécie humana, a fregüência estatística não traduz apenas uma normatividade vital," (CANGUILHEM, 2002, p. 113).

We faced a big challenge because a QOL is a very limited instrument to investigate any more subtle and complex relationships. Thus, to minimize this reduction of complex relationships to numbers and graphics, we included, at strategic points in the questionnaire, seven essay questions, as open spaces for free speech.

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Without disregarding the recognized limitations of a questionnaire, we sought to carry out a systematic and comprehensive survey of structured data on the impacts on relational and affective life and the transformations that occurred in everyday life habits, with emphasis on health, cultural and digital life habits. This survey was enriched by the textual material raised by the open questions, in addition to having made use of other ethical-political strategies that will be deepened below.

We decided on a cross-sectional study, with respondents selected through the snowball sampling procedure, in which the initial "influencers" were the Sesc-SP social networks.

In addition to satisfying the need to gather a certain set of structured data on the subject, the QOL was conceived, prepared and offered to respondents as a path for reflection, in such a way as to give it a certain immediate use value and, with that , enable greater adherence and greater engagement in the experience of answering it.

With the structured questions, we constituted a database that included: sociodemographic data, data on the impacts of the pandemic on personal and family life, and data on changes in respondents' digital, cultural, and health habits. With open questions, we aim to open a space for the expression, in writing, of narratives, feelings, impressions, reflections, experiences and other forms of expression of experience through free speech, in such a way as to constitute a textual database.

POWERS AND LIMITS ON THE USE OF QOL FOR HEALTH RESEARCH

In general, the use of an online questionnaire has some advantages, such as: automatic tabulation and the possibility of monitoring the search field "in real time" and flexibility in filling it out, with the possibility of pausing it, which it is especially



important in larger and more complex QOLs. In addition, questionnaires are low-cost and wide-ranging techniques, and from this financial perspective, they can also be a democratizer of research (GIL, 1999).

But we also identified limitations with this device. Regarding the constitution of the sample, for example, the option for a QOL already confers a first characteristic and restriction on the universe of potential respondents: internet access. We can cite at least four other limitations of QOL as a data production technique (TORINI, 2016) and how we seek to minimize them:

- 1- Respondents' lack of understanding and digital ability: this component, added to the need for access to technological resources, can be a bias factor in the answers. Care to overcome this problem included: formulating brief, objective and concise questions, with the greatest possible simplification and disaggregation of items; simple and user-friendly interface design and the performance of pre-tests contemplating a wide range of respondents.
- 2- Low response rate and impersonality: The absence of an interviewer present eliminates the possibilities of "persuasion" or of creating a "favorable environment" for filling out the form. Care to overcome this difficulty included: a well-targeted, intensive and networked strategy for capturing respondents, using official institutional channels related to the research; contour of impersonality through a "persuasive invitation", combined with a set of strategies to produce a "favorable environment" for completing the QOL: we built a clear and succinct presentation of the questionnaire and its purpose, in addition to the introduction of creative elements to the questionnaire whose completion could become an authentic "cultural activity" or an invitation to reflect on the topic researched.
- 3- Sampling control Generally, it is necessary that the QOL has response control tools, to avoid, for example, that the QOL is answered more than once by the same person, which can be done by IP, by e- mail, by password, by CPF, control of



responses by cookies as a way to ensure the anonymity of respondents, or even, in some cases, by checking the internal consistency of responses. In our case, between gains and losses, we chose to control responses using cookies, without any personal identification, but as a consistency reinforcement to avoid repeated submissions by the same respondent.

4- The possibility for respondents to know the questions in advance - In some surveys, the chance for the respondent to be able to previously reflect on the answers may be a bias factor, but not in our case, in which prior reflection does not compromise and may even qualify the answers. For this reason, in each block of questions, we anticipated what the following set of questions was about, building a synthesis of what respondents would find and what would be expected of them in each block.

In addition, a QOL has limitations related to the possibilities of exploring responses and the way they are produced, reducing the potential for investigating the more complex dynamics that constitute other methodological procedures, such as indepth interviews, for example. In strategies such as the one we propose, it is possible to access more the content of what is said than the experience of saying it, therefore, the conditions for researchers to interfere in this experience are also reduced (but not prevented).

Due to these and other challenges that researchers face in the creation of QOL, the immersion stage in the formulation of the questions and in the aesthetics of the questionnaire is fundamental, and requires a good investment of time and collaboration between the main stakeholders and research partners for adaptation from the questions to the topic studied to the creation of assertive conditions for the participants' responses (LIMA, 2016).

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QOL AS A TRAIL FOR REFLECTION

In addition to formulating the questions, the QOL, with the characteristics sought here, requires a true "scripting" work, in which the order of the questions within each block, the order and division of the blocks within the questionnaire, the selected elements to contextualize the questions and stimulate reflection for the answers and other aesthetic elements mobilized so that it is possible to provide more than a collaboration to the research, but an experience or, in other words, the construction of an authentic trail of reflection and an experience cultural.

Before being published, it is suggested that the QOL go through a pre-test stage, to detect construction errors, flow and comprehension difficulties (FAERSTEIN, 1999). Questionnaire respondents in the test phase may be composed of references in the topic of the researched subject, professionals with experience in the use of QOL and/or people with the same profile as the expected respondents.

To enhance our intention to make research participation an interventional process, we seek to expand the traditional reach of tools like this one, actively incorporating at least 4 inseparable dimensions into their form and content:

- (1) The ethical-investigative dimension, which sought to build adequate questions to answer the initial research problem For this, we made the work of formulating the questions a rigorous and intensive process of intellectual and affective reworking of the problems, including a movement of textual construction as fine-tuned as possible in its potential for intelligibility, simplicity and assertiveness, without losing its capacity for affectation, accessibility and its articulation with our theoretical-practical references.
- (2) The political dimension, valuing the critical potential of transformation that all research can have, of altering the participants' relationship with the very object of investigation, as suggested by the assumptions of intervention research.

(3) The clinical dimension, by understanding that the process of producing knowledge in health, can also be a process of producing care, insofar as it can keep conditions to produce experiences of self-perception/self-knowledge, identification of discomforts, reflections, naming perceived problems, reframing and elaborating on experienced processes, reaffirmation movements or self-displacements.

(4) The aesthetic-communicational dimension - To meet our challenge of transforming the movement of answering an online questionnaire into a reflective trail, we have included different languages and ways of asking questions (multiple-choice questions, open questions, in addition to the use of images and videos).

The incorporation of these four dimensions is updated in the construction of two other methodological strategies: The introduction of videos with accompanying art in the QOL and the choice of the chain of questions.

a) The introduction of accompanying art images and videos.

One of the transversal strategies to these four dimensions was the incorporation of a means of communication between researchers and participants that expressed in its form-content the borders between Health and Culture. This device was initially constituted by the introduction of images in the QOL, especially in a qualitative survey phase, in which it was intended to identify the feelings and emotions related to the pandemic experience.

After answering a series of structured questions referring to the feelings and emotions experienced in the context of imposed social distancing, respondents were invited to select images that best described the feelings and emotions experienced in the pandemic and then relate a word or comment to that Image.

When the question is asked directly about the feelings experienced and a set of structured answers is offered, plus the possibility of expressing these feelings in



written language, it is still possible that important affections remain outside the field of appreciation. It is possible that only more "superficial" layers are scrutinized, not in the sense of being unimportant, but of being more "visible", more ready to be "said". We offer a space for a free association between image and subsequent registration in written language.

The inclusion of a call-to-action video and eight more short videos distributed throughout the questionnaire, starring artists and communicators, rather than scientist-researchers, were also incorporated.

According to Marconi and Lakatos (2003):

"Junto com o questionário deve-se enviar uma nota ou carta explicando a natureza da pesquisa, sua importância e a necessidade de obter respostas, tentando despertar o interesse do recebedor para que ele preencha e devolva o questionário dentro de um prazo razoável." (MARCONI; LAKATOS, 2003, p. 100).

The first video mentioned, aimed to fulfill this function of calling for research, incorporating voice, movement, faces, affections, performances to this call, complementing the notes or letters that tend to accompany the researches with an academic language and not always accessible to the public wider audience.

The first displacement promoted by this simple gesture of incorporating videos into the research was to introduce an audiovisual resource in a QOL and, with that, we built a new aesthetic for this data production technique, which also minimizes the impact of the absence of an interviewer and mobilizes affections related to the performance and text contained in the videos.

The second shift is related to the purpose of these videos in their aesthetic, pedagogical and clinical dimensions. The internal videos, distributed throughout the QOL, primarily had a didactic function, in the sense of situating the

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respondents on the questions of each block, somehow anticipating them, but also humanizing them and introducing the questions into everyday processes.

The clinical function of the videos was inspired by three established devices in the field of health: Humanization, Reception and Therapeutic Accompaniment (TA).

Although it assumes a polysemic character in the health sector, with the implementation of the National Humanization Policy (PNH)[8], Humanization began to be conceived as an ethos, a policy that transversalizes the relationships of care, communication, work and health management, fostering solidary and collaborative exchanges through the invention of a set of principles and guidelines that guided this policy, such as the expanded clinic, social participation and the singularization of therapeutic processes (BRASIL, 2010).

Reception is defined as one of the humanization strategies in health. Reception as a device of a public policy must recognize the uniqueness of health needs, attend and sustain relationships between people, services, environments, territories and their links, with the objective of building relationships of trust and commitment (BRASIL, 2010).

Therapeutic Accompaniment is a clinical practice in mental health, developed in the 1970s in Latin America, with strong influences from Psychoanalysis and the principles of Psychosocial Care in the context of the Psychiatric Reform, which values the construction of care practices in spaces and life contexts of those who are accompanied, outside health institutions.

Based on these theoretical-practical inspirations, the purpose of the videos and their protagonists was to: Welcoming/approaching the research participants, accompanying them (following along with each respondent a reflective path, articulated to everyday scenes and experiences), instigating the presence, permanence and duration in the process of answering the questionnaire.

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The third displacement produced by the videos refers to their protagonists, which we will call accompanying art.

Since the acceptance and humanization of care processes and knowledge production are directly mediated by communication strategies between those who care and those who are cared for (in the case of a clinical process) or between those who research and who are researched (in the case of the investigative process), the choice of protagonists, as well as their performance in these videos, was not indifferent. Therefore, we chose to produce an intersection between art/clinic/communication or, in other words, between Health and Culture, introducing artists and communicators to perform this reception/audiovisual accompaniment.

The choice of the selected art-accompanies went through criteria of representativeness, diversity, ethical-political coherence with the research and plurality of audiences to be accessed.

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Figure 1: QOL disclosure card and participating art-accompanies



Source: authors.

The insertion of artists in the research did not aim only at expanding communication possibilities, but at a true intersection between Art and Science. The concept of Intercession, as suggested by Deleuze, operates in the relationship established between terms that intercede based on processes of interference, intervention through the destabilization of one domain over another (disciplinary, conceptual, artistic, socio-political, etc). The relationship of intercession, more than a relationship of overlapping or approximation, is a relationship of disturbance, of the production of difference, and not a mere exchange of content (DELEUZE, 1992).

For the scripting and production of the videos, we are also concerned with dialoguing with different audiences and with different languages, providing the free creation/performance of each accompanying art. Although we started with a standardization of the content of the scripts, the singularity of form/style of each one in recording them was stimulated, as well as in the choice of words, contexts

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and everyday examples. It was also suggested that the accompanying art avoid terms or statements that would induce responses, either by identification or rejection in relation to the position of the accompanying art.

The tool used to develop the QOL was the LimeSurvey program.

b) The choice of the chain of questions.

The organization and sequence of questions throughout the QOL were inspired by Spinoza's affectology (2009), taking affections and affections as indicative of the variation in the power of existing. Thus, the questionnaire begins with an investigation into the impacts of the pandemic (affections), then investigates the reactions to these impacts (passions) and, finally, the dreams and everyday strategies of reinventing oneself and the world in a pandemic (actions).

At the end of each block of questions, participants had the optional possibility to write freely about that block. This possibility of building free narratives at each major stage of the questionnaire was intended to provide the possibility of recording what was outside the field of hypothesis of the researchers. Likewise, it aimed to escape a structured response, introducing the QOL into another policy of narrativities, which are not reduced to their overcodifiable forms, including more radically narrative positions in their subjectivity:

No trabalho da pesquisa e da clínica é sempre, de alguma forma, de narrativas que tratamos. Os dados coletados a partir de diferentes técnicas (entrevistas, questionários, grupos focais, observação participante) indicam maneiras de narrar seja dos participantes ou sujeitos da pesquisa, seja do pesquisador ele mesmo, que apresenta os dados, sua análise e suas conclusões segundo certa posição narrativa (PASSOS; BARROS, 2009, p. 150).

The narratives allow the participant to incorporate examples, criticisms, absences, additions, perceptions and scenes that escape the surveys or multiple choice

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questions, scenes that place the problem in singular contexts of the respondents, constituted by environments, people, things, affections, ideas, etc...

Throughout the process of capturing responses and experiences, it is also possible to measure the degree of engagement of the participants. In the case of the research reported here, which was the initial experience of using this type of indepth questionnaire, we had a total of 5,635 accesses, 1,118 complete responses, with an average response time of 54.5 minutes.

These 1,118 represent 19.8% of the 5,635 people who accessed the first page of QOL. The graph below, which shows the last QOL page accessed by respondents, indicates a very clear pattern:

Graph 1 - Distribution of hits and respondents



Source: authors.

There is no significant loss of respondents throughout the questionnaire, which could indicate a pattern of tiredness and giving up on answering something longer. Practically 80% of hits abandoned the QOL right on the first page, which contains

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the instructions and the Term of Consent for participation (a good part of these 80% are not humans, but robots that follow links, mainly for content indexing for search engines, called crawlers). The approximately 20% remaining, who started to answer it, demonstrated a high adhesion to the proposal, almost all of them answered until the end, with very few losses along the way, despite being a relatively long questionnaire.

Response time averaged 54.5 minutes, with a median of 35.9 minutes. This means that 50% of respondents took less than 36 minutes to answer it and the other 50% took longer, with greater dispersion (as seen in the graph below), pushing the overall average upwards.

Graph 2 - Distribution of respondents by response time



Source: authors.

These numbers indicate an important aspect in the characterization of our sample, which is the degree of engagement obtained from respondents. Table 1 below complements this assessment, showing the numbers and percentages of

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respondents who dedicated more than one hour, one hour and a half, two or even three hours to the questionnaire, also showing their possible reflective/clinical potential and their possibilities for breaks:

Table 1 - Response time

Tabela 1: Tempo de resposta	N	%
> 60 minutes	221	19,7
> 90 minutes	93	8,3
> 120 minutes	61	5,4
> 180 minutes	23	2,1

Source: authors.

Another particularly important indicator of this engagement is the percentage of responses obtained for each of the seven open questions (all non-mandatory) and the volume of text produced, as shown in Table 2.

We were able to obtain a relatively high percentage of responses, considering that they were non-mandatory questions. In particular, in relation to the last three, which were among the most important for our investigation and in which we obtained the highest percentages of responses, even though they were the last questions of an extensive questionnaire, to be answered in writing.

Table 2 - Answers to open questions

Table 2: Answers to open questions	N	%	Number of words
Emotions and feelings experienced in the pandemic	565	50,5	25.021
Changes with life virtualization	282	25,2	12.133
Changes in the relationship with the body and appearance	197	17,6	8.015
Evaluation of Sesc SP in the pandemic	162	14,5	3.776
Inventions, discoveries, learnings and achievements	815	72,9	20.057
Dreams and wishes for the post-pandemic world	815	72,9	26.982
How do you imagine the post-pandemic world	887	79,3	22.086

Source: authors.

This first characterization of the sample indicates that we obtained not only a quantitatively expressive sample (n = 1,118), but also with a high degree of engagement of the respondents in the proposed reflective path, where we were

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able to collect numerous reflections and rich reports of experiences related to the research problem.

In addition, some of the responses we received from participants through textual content indicate the effectiveness of the questionnaire in terms of its intervention/interference quality:

"Que baita pesquisa! Adorei muito. caramba! Saí tocada, transbordando, e espero que essa mensagem leve meu entusiasmo"

"Bah! Terminando agora e impressionada com o efeito desse instrumento! A ideia das celebridades acompanhando é d+ e a estrutura do questionário parece um bate papo íntimo com eles, no meu caso, a Rita"

"Respondidíssimo! Foi quase um desabafo terapêutico! Muito obrigada pela oportunidade dessa experiência. Amei o acompanhamento da Adriana ao questionário"

"To tão injuriado que até chorei respondendo a pesquisa"

"coisa bonita essa pesquisa, heim gente! Muito legal! Fui com meu colega de profissão, Paschoal. Achei muito bonito propor essas reflexões enquanto pesquisa e aos próprios pesquisadores"

"Respondi em 43 mints, mas não senti que durou tudo isso, por que foi bacana escrever sobre essa experiência da pandemia. Além de tudo, ficou bem fluido com a Rita, bem leve. Algumas perguntas me fizeram refletir bastante sobre a vida."

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POSSIBILITIES FOR THE ANALYSIS OF DATA PRODUCED IN A DEPTH QOL

Conventionally, data produced through QOL are usually analyzed through descriptive statistics (quantitative data) and/or through different content analysis techniques (qualitative data) (RAMJAN; FOGARTY, 2019).

Following this trend, we use 4 analysis plans:

- (1) For the description and stratified analysis of the quantitative data produced by the structured questions of the QOL, analyzes of the sample's profile, descriptive statistical analyzes of the structured questions, filtering for associations and correlations were carried out.
- (2) For the analysis of the images and the answers related to them, from a quantitative point of view, the researcher can associate a word to each image, from a universe of symbols or socially shared representations and descriptively analyze the number of people who identified with each image and/or critically, introducing possible interpretations of images more or less chosen in different possibilities of crossing data (eg gender, race, social class, age group, etc.). But this is just a first layer of analysis.

When the respondent is asked to choose the image that would best express his affection in relation to the pandemic experience, he is summoned to an evaluation operation that takes place, eminently, in terms of affections, without linguistic mediation. What matters in each image is an affective quality, which will be the sole and integral criterion of choice, which raises qualitative analyses. Having made this choice, in this purely "sentimental" operation, we always have the possibility of dialoguing with the different choices on equally "sentimental" bases, exploring the infinite hermeneutical openings that every image offers us. But we also proposed the reinsertion of this imagery choice in a new linguistic fold, asking

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respondents to associate at least one word with the affection described by the chosen image. In the end, we resumed the record in written language, but we believe that this passage through a moment of "eminently sentimental reflection", provoked by the game with images, was fundamental to give way to affections that escape the radar of language and that are, however, it is important that they find an inscription on it.

For the textual contents of the open fields, two other analytical processes were incorporated:

(3) Quantitative analysis of textual data that included statistical analysis techniques of textual content (clouds of words) privileging the analysis of hierarchical classification of contents that give a graphic representation of the frequency of each word within each textual *corpus* and bigrams (sequences of two most frequent words).

The textual *corpora* consisted of the answers to each of the open questions and the written content that accompanied the alternative "others" in the structured questions of the QOL.

It is important to point out that, despite technological advances and the high complexity of analyzing textual data in *corpora* - today available through algorithms - a qualitative analysis, carried out by the researchers themselves, is always necessary. This is also due to the wide range of meanings and senses brought by natural language that cannot be completely apprehended by the machine. The software itself should not be confused with the method of research being carried out, it is actually one of its components.

The quantitative analyzes of the structured questions and the textual database, as well as their filtering possibilities and crossing variables, were practiced from the development of a dashboard (panel), which allows access to the QOL, the exploratory analysis of the data by part of researchers and the general public. The

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results systematized in this panel, as well as the possibility of carrying out new research based on the data produced, are available at this link: [deleted so as not to identify the authors].

In this link, go through all the blocks of questions and each question of the QOL. In addition to accessing the global frequency distributions for each question, it allows the crossing of these data with the main variables worked on in the research and, also, observing whether there are statistical differences in the frequency distributions between the different categories of that variable. The dashboard also allows data filtering so that data from only a subgroup of respondents, corresponding to one of the categories of a variable, can be analyzed. The categories of crossing variables were selected considering those with a frequency equal to or greater than 50 respondents.

(4) Qualitative analysis of the texts: from the first degree of semantic analysis produced by the analysis of word clouds and bigrams, we suggest the adoption of the analytical technique of translating free speech narratives. (KASTRUP; PASSOS, 2013), (JULLIEN, 2009).

FINAL CONSIDERATIONS

In this article, we seek to present the proposition of a QOL as a research-intervention device, based on the possibility of expanding the technologies traditionally related to a data production instrument of this type. For this, in the light of a unique experience of constructing a questionnaire in a pandemic context, it was possible to introduce to this device: (1) a character of greater depth, with the proposition of constructing an "in-depth questionnaire", (2) the diversification of its communicational and aesthetic possibilities, based on the proposition of a path of reflection and cultural experience and (3) the expansion of its intervention possibilities, especially in its interface with care, a central element for qualitative research in health.

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Thus, QOL, which could be reduced to a data production instrument, is transfigured into a device that activates experiences, in an intervention that produces knowledge, but also care, reflection, performance, displacements of the self and, therefore, transformation of the "given" reality.

We used quotation marks around the word above, as there is a central concern in intervention research that misunderstands the hegemonic notion of "given". When promoting an intervention, the very action of researching brings about new processes and realities that were not "given" (BARROS; BARROS, 2013), in this sense, more than collected data, which informs about the investigated object, the data are produced and are characterized as effects of the set of processes that constitute the research - in this case, for example, the encounter with the QOL device, the conditions of participation and its socio-historical-cultural context.

This produced and transformed reality, in addition to the worlds of each participant, also includes an intervention in the research field itself and in cyberspace, as we occupy social networks with a knowledge production strategy that invites deceleration and at the same time is active the collective intelligence (LÉVY, 1999) of the participants as opposed to the oceanic flow of digital marketing consumption (which uses a lot of QOL as an evaluation strategy) that dominated social networks.

Finally, we believe that within the intervention possibilities of this device, we also intended to produce an intervention in the modes of knowledge production, introducing flexible lines in data production techniques limited by the pandemic context, deconstructing the hard lines of a classic instrument of data production.

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APPENDIX - FOOTNOTE

8. Política Nacional de Humanização (PNH).

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