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Layering programme, pathway and substantive theories in realist evaluation

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Exposing the impact of advice services on health and inequalities

How, why, for whom, and in what circumstances are CAB services effective in improving health?

Aim:

Build, refine and test an explanatory framework about how CAB services can be optimally implemented to achieve health improvement



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Focus on three projects

- **Young People's service for people aged 16-25**
- **Project for people with severe and enduring mental health conditions**
- **GP referral project to facilitate access to advice for primary care patients**



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Methods

Qualitative

Interviews with staff (n = 3)

Interviews with clients (n = 25)

Lifestyle questions

Potential further verification interviews with staff

Quantitative

Perceived Stress Scale (Cohen et al., 1983)

Warwick Edinburgh Mental Wellbeing Scale (Stewart-Brown et al. 2009)



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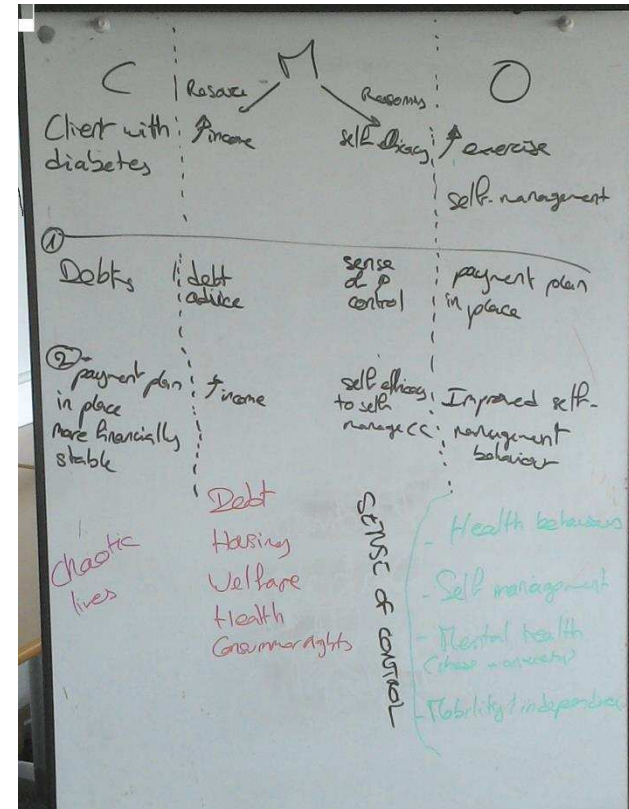
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Theory Hunches

- Visits to CAB and interviews with CAB staff
- Reading project reports
- Wider literature
- Collaborative team meetings





Programme Theory development

<http://www.qsrinternational.com/blog/how-researchers-use-nvivo-to-enhance-transparency>

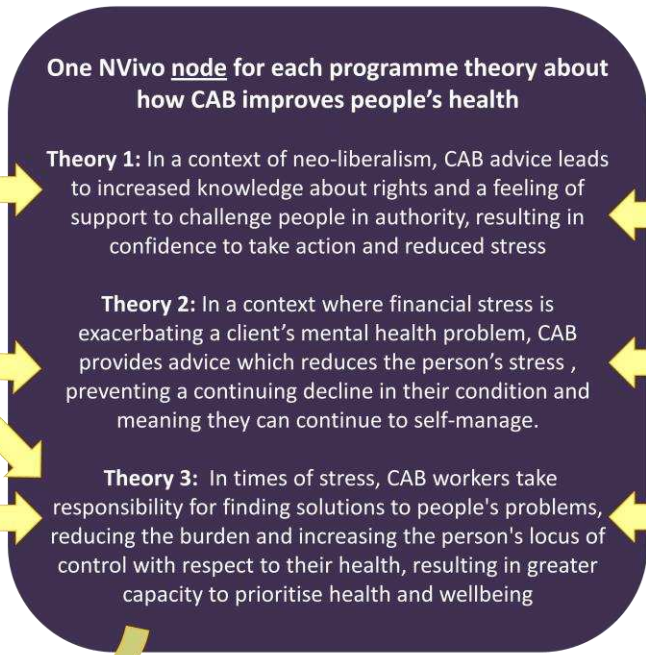
Data management processes using NVivo (illustrated with select programme theories)

CAB staff interview transcripts stored in NVivo as sources and data coded against each programme theory node

“If the client is vulnerable – if the DWP doesn’t do their part – they’re not going to chase them up and they don’t know. So you’ve got to be there and, you know, make sure that everything is, you know, given to that client.”

“The wellbeing benefit of having some platform, for a while, where you’re not scared of being pushed off it at any given point. I mean that, to me, it’s invaluable”

“Most of them [clients] say they feel much better because they feel like that stuff is off their shoulders now, and they can concentrate on some of the other things that are going on in their life”



Linked memo created for each theory node to record debate and decision making during collaborative meetings to develop and refine programme theories

Iterative process whereby theories inform, and are refined in response to interview data



Initial Programme Theories Categorisation

- **Material Pathways: resources required for health / to avoid or ameliorate harmful stimuli**
- **Behavioural pathways: negative health behaviours more prevalent among socially disadvantaged groups**
- **Psychosocial Pathways: a result of the way in which people's social environment makes them feel**

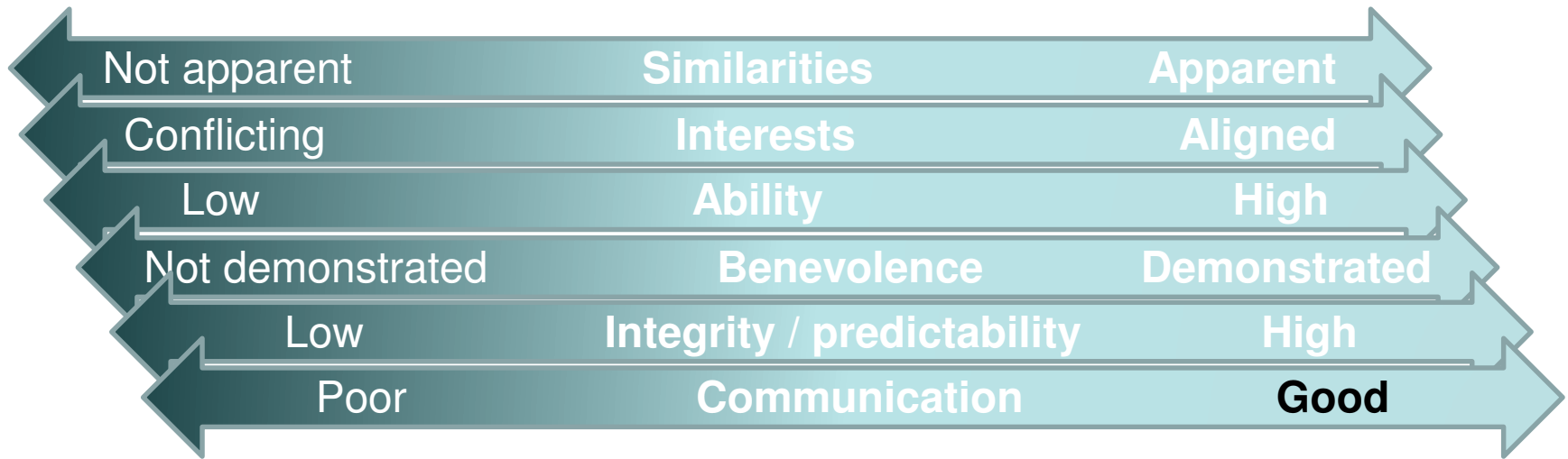


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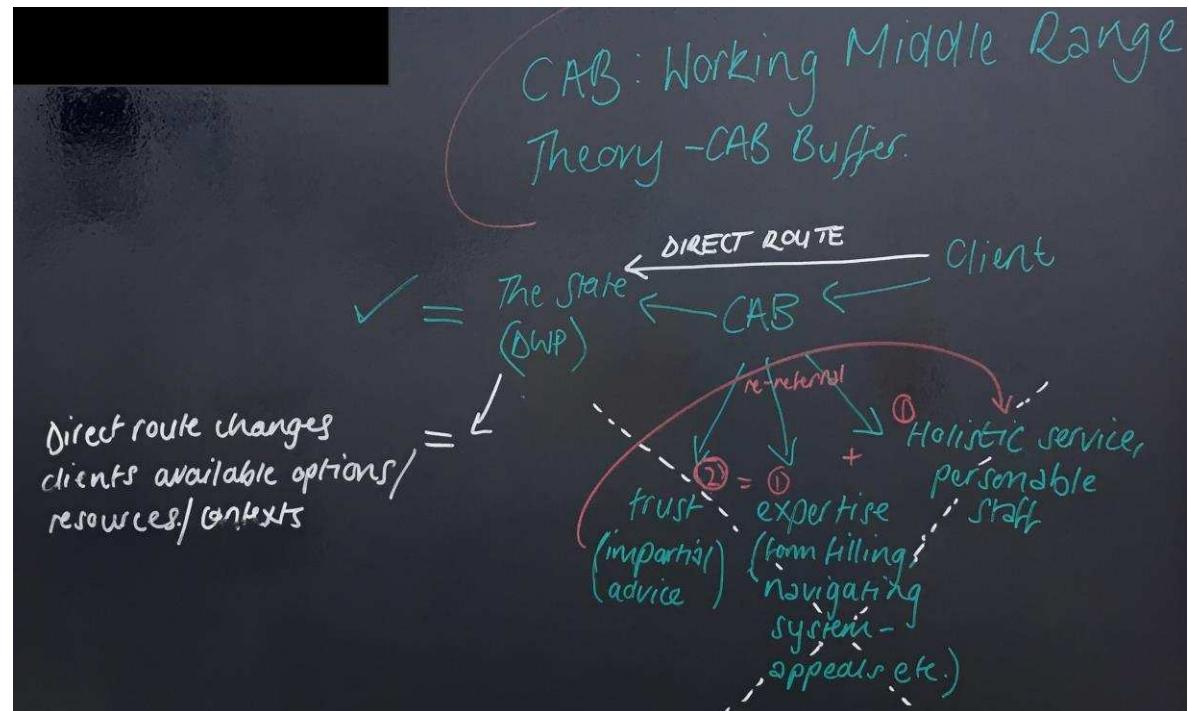


Trust



Hurley RF. The decision to Trust. Harvard Business Review. 2006; <http://altfeldinc.com/pdfs/Trust.pdf>(accessed 14/06/2013).

CAB is a buffer



Formal theories explored...

Behaviour change theory mapping

Health Behaviour Internalisation Model

Social Identity Theory

Third Space Theory



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References

Benzeval M, Bond L, Campbell M, Egan M, Lorenc T, Petticrew M et al. How does money influence health? York: Joseph Rowntree Foundation; 2014

Hurley RF. The decision to Trust. Harvard Business Review. 2006; <http://altfeldinc.com/pdfs/Trust.pdf>(accessed 14/06/2013).



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Questions

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