



# Workshop – realist methods in context

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# OUTLINE

- Prison leavers project
- Why realist research?
- Aims:
  - Introduce the realist HSR map
  - Propositions for realist working
- Questions of clarification
- Try out the map in pairs
- Discussion

# Why realist research?

Scientific basis:

- Layers of reality, interrelated
- Mechanisms of causation can be present but not always realized – whether triggered can depend on context

Potentially useful for:

Complex interrelated social, psychological and biological systems

When controlling the environment is not just impossible but will stop us understanding effects

# Propositions

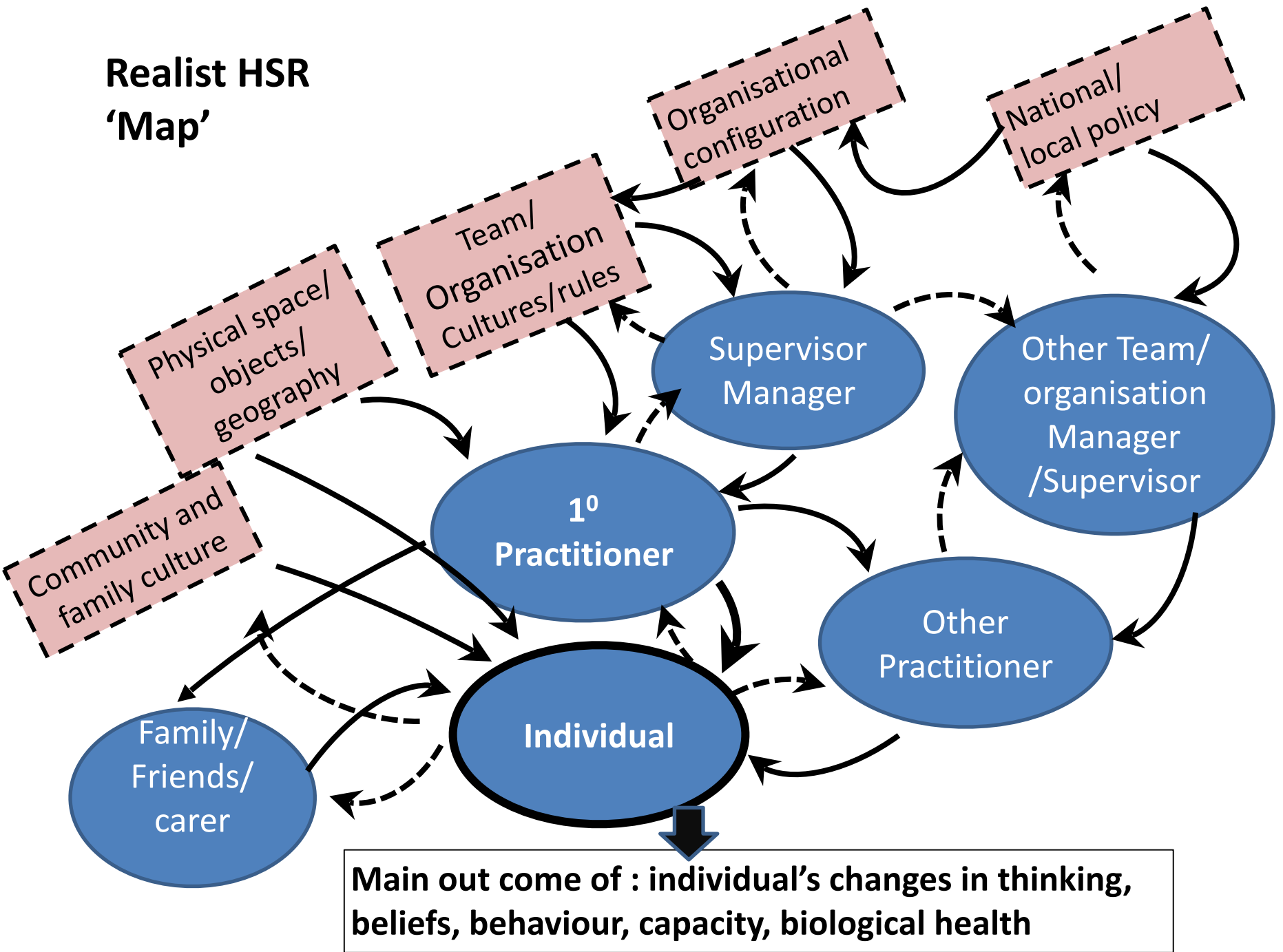
Based on:

Intervention can be evaluated in terms of how participants 'reason in response to resources' the mechanisms. (Pawson and Tilley, 1997)

And also:

- Health care systems can be understood in this way
- Interventions can be designed with this in mind

# Realist HSR 'Map'



# Builds on previous work

- Whole system causal thinking (MacFarlane et al, 2011)
- Outcomes are likely to be the result of multiple mechanisms interacting/adding and series of sequential CMOs produce more downstream (and upstream) effects (Byng et al, 2004)
- Two step models organization to practitioner to individual (Pearson et al, 2015)
- The concept of intervention 'dose' and that outcomes may be graded (Dalkin et al, 2015) – and that heterogeneity/context may partially explain this graded response
- Heterogeneity is key - practitioners and patients/individuals experience and respond to resources in different ways. Eg their capacity or innate responses vary

# A realist 'map' of the HSR terrain

- a. Key interactions and underlying mechanisms lead causally toward primary outcomes of concern - but causal paths are fluid and unpredictable and also upwards
  
- b. When developing theory - CMOs:
  - Worry first about the mechanism and outcome
  - The resources and opportunities within mechanisms, could be human, technological or physical space
  - The mechanism is the triggering of an innate capacity to respond – reasoned or automatic
  - This mechanism therefore influences future thinking, emotions or behavior of individual practitioners and patients – the outcomes of interest

# Context – still disputed

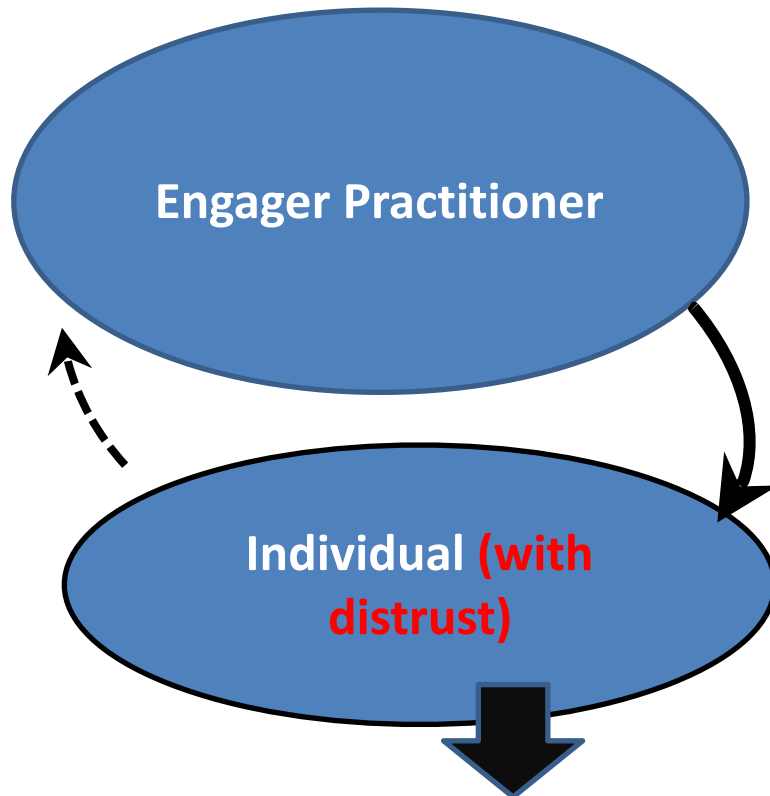
Context – could be

- a) local geography/system or other external factor with causal influence – eg rurality
- b) a (stable) capability (eg cognitive function) within an individual which means they can respond to the resource;
- c) a ‘cultural’ influence, affecting habit/thinking (but this, in the next analytic moment might become the mechanism when it has become a mental habit)

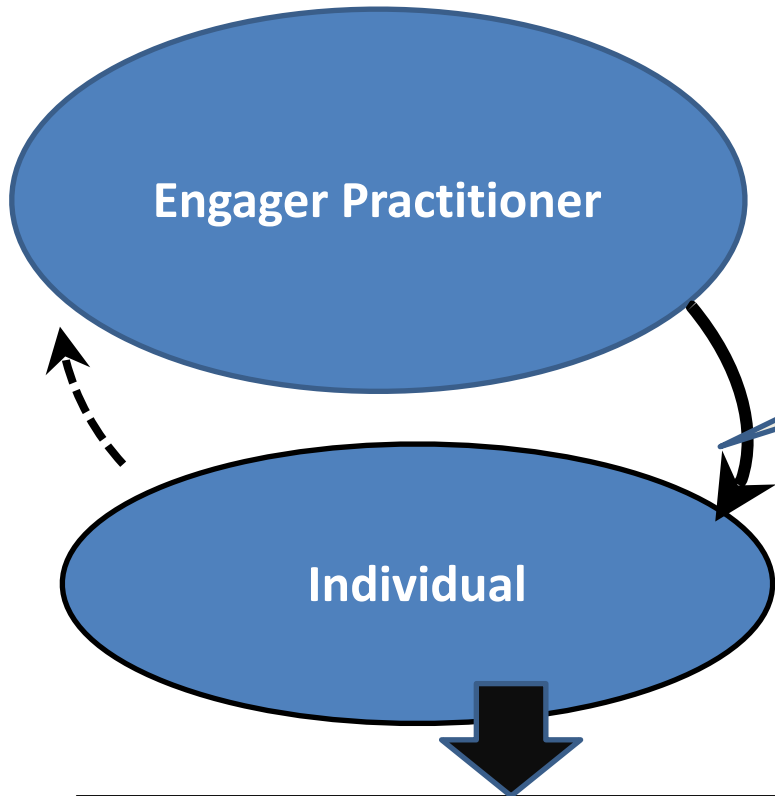
**The ‘analytic moment’ – having time in mind - and the specific resource being responded to at any moment**

**And preceding moments in the chain of causation**





**Outcome of concern – Trust – to help ensure ongoing engagement in the community**



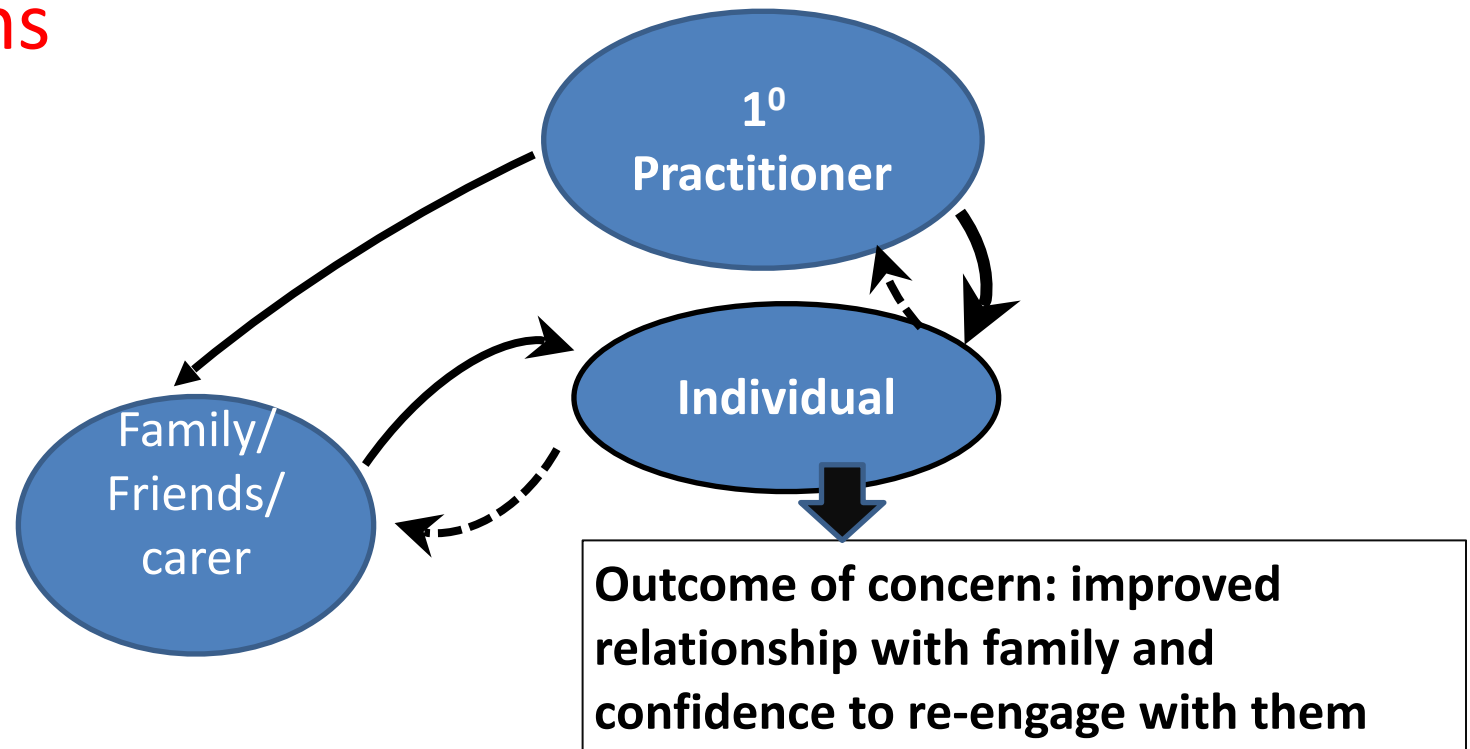
Dress differently from prison staff

Listen to concerns rather than focus on problem behaviours

Quick wins in prison

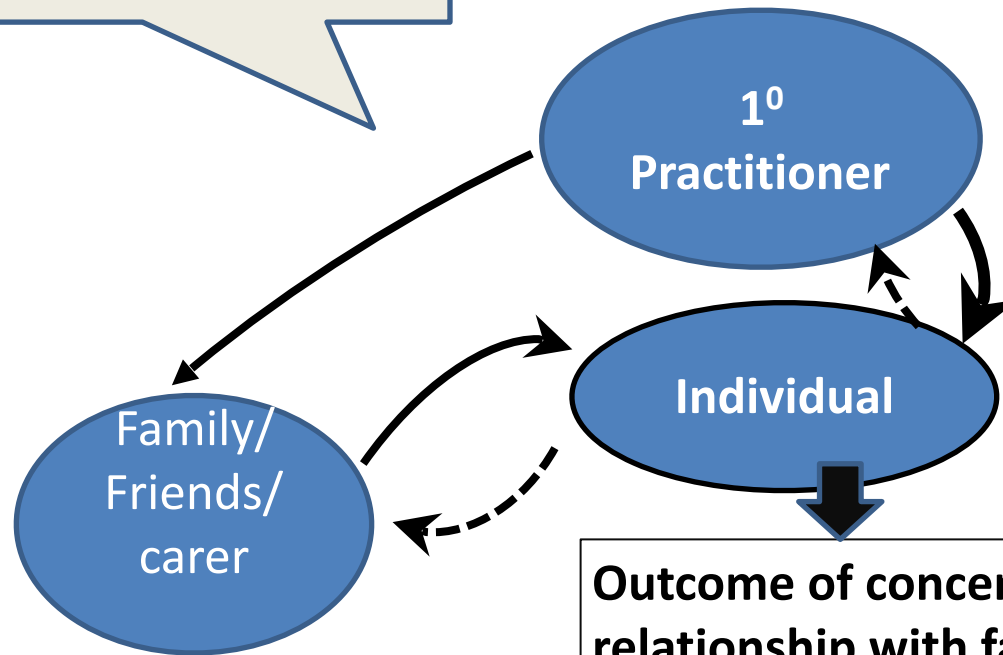
**Outcome of concern – Trust – to help ensure ongoing engagement in the community**

# Individual with strained but not broken family relations



Talk to family to update and promote trust

Update on home situation  
Take home on day of release



**Outcome of concern: improved relationship with family and confidence to re-engage with them**

- Questions of clarification
- Work in pairs

# Work in pairs

Consider a situation that you think might fit onto the map:

- Health services project
- Home situation – eg family or friends illness/healthcare
- Work situation

Try to identify

- the resources operating
- reasoning/automated responses being triggered
- Outcomes of interest
- Context that influences – within and outside individual
- Sequences of mechanisms

# Realist HSR 'Map'

