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Workshop: Realist interviewing in primary healthcare research

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Workshop Outline



1. Introduction to realist approaches
2. Introduction to realist evaluation
3. Introduction to realist interviewing
4. The PriCARE Program
5. Nine steps for realist interviewing
6. Exercise 1: Developing a realist interview guide
7. Exercise 2: Interviewing like a realist

Realist Approaches

Theory-based evaluation approach

Based on a realist philosophy:

- there is a real world and our knowledge of it is processed through human senses and thought, language and culture.

Assumes that:

- nothing works everywhere or for everyone
- outcomes depend on context
- social interventions are complex systems



Pawson R, et al. 2004; Wong G et al. 2013; Westhorp G 2014.



Realist Approaches

A way to grasp the complexity of interventions

Appropriate for evaluating:

- new initiatives, pilots and trials
- programs that will be scaled out
- programs that have previously demonstrated mixed patterns of outcomes

Proposes a theory for explaining program outcomes, expressed as:

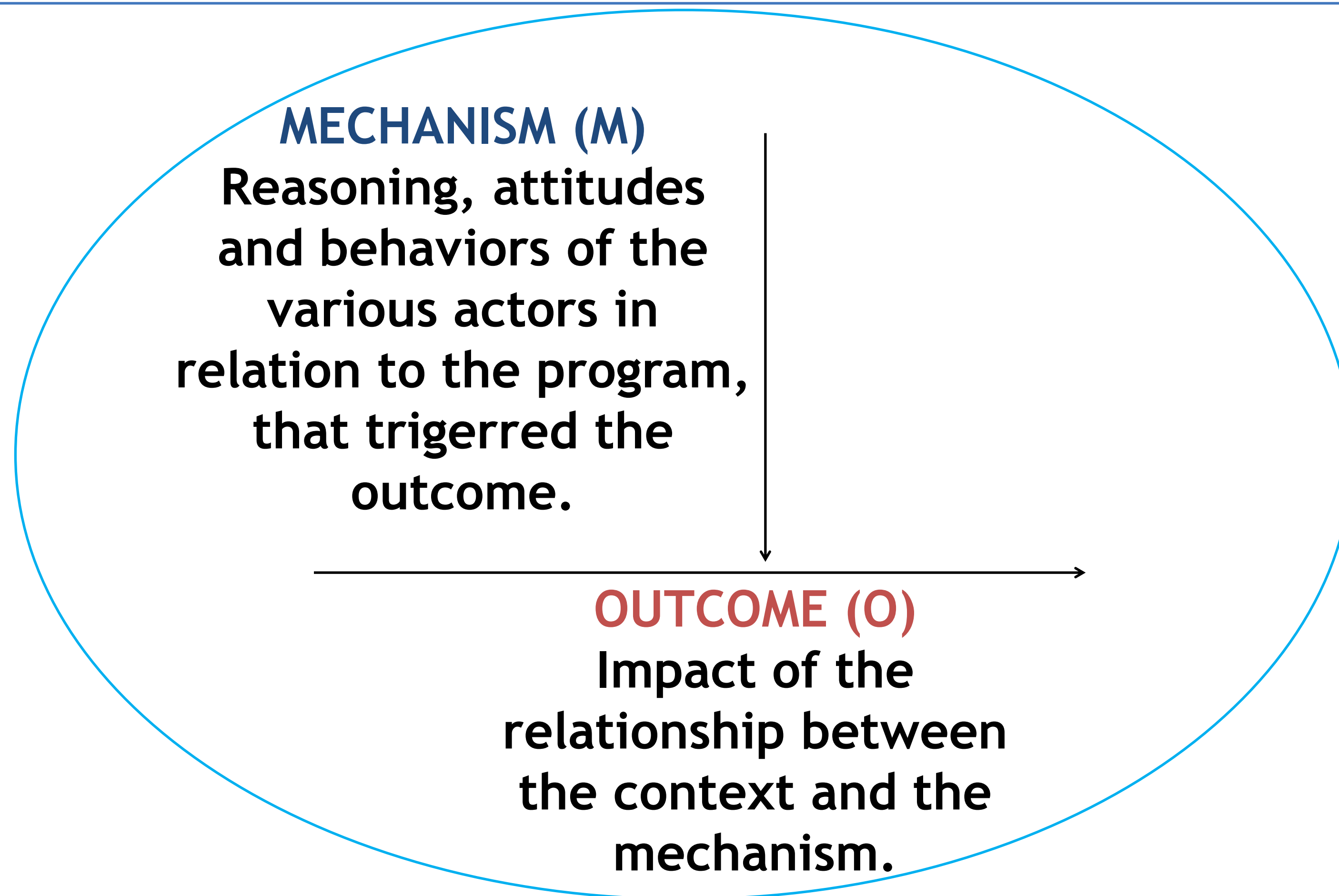
Context + Mechanism = Outcome (CMO)

We implemented the same program in two locations. For some reason, we had very different results.



Image credit: The RAMESES II Project

Realist Approaches



CONTEXT (C)

Background of the program that triggered the mechanism : informant's characteristics, interpersonal relationship, social, economic and political contexts, and structures.

Figure adapted from: Pawson R and Tilley N. 1997.



Realist Approaches



Two Key Realist Approaches:

1. Realist Review
2. Realist Evaluation

Realist Evaluation

A multi or mixed-methods approach to evaluation

Collects **mainly primary data**: survey data, documentary or observational data, and interview data

Goal is to develop, test, and refine a program theory to explain **for whom and in what circumstances** an intervention or program works



Begins with a program theory and ends with a revised, more nuanced, more powerful program theory



The RAMESE II project 2017

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Realist Interviewing

Unique technique

1. Teaching-learning function: present description of the initial program theory for examination
2. Conceptual focusing function: allow the respondent to explain and clarify the thinking of the researcher

Goal: to elicit information about the interactions between contexts, mechanism and outcomes of the program

- But, little guidance available on how to design and conduct realist interviews



Brönnimann A 2022, Manzano A 2016, Mukumbang FC 2020

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The PriCARE Program: Realist Evaluation Study

Case management (CM) intervention:

- 4 primary care clinics in 4 Canadian provinces
- for patients with chronic conditions and complex needs who frequently use healthcare services
- collaborative approach to assess, plan, and coordinate care and provide self-management support

Objective: to explain and understand how, under what circumstances and for whom a case management (CM) intervention in primary care works



Two Steps:

1. Stating a program theory
2. Testing and refining the program theory



Hudon C et al. 2018

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Program Theory on Case Management for Frequent Users in Primary Care

Context

Experienced and trusted case manager

Easy access to case manager

Comprehensive approach

Positive interactions

Demi-regularities

Development of a trusting relationship fostering patient and provider engagement

Case managers with other healthcare providers and sectors engage and support patients in their care planning.
CARE PLANNING

Patients: feel supported, respected and accepted; engaged and committed to understanding the care plan and how to access relevant healthcare services; feel their concerns are heard; are less anxious and more secure; are empowered to self-manage.

Case managers provide self-management support (motivational interviewing, education, goal setting, problem solving, counseling and emotional support).
SELF-MANAGEMENT SUPPORT

COORDINATION AND HEALTHCARE NAVIGATION
Case managers develop collaboration with other healthcare providers and sectors, and coordinate patient care through the healthcare system.

Healthcare providers: feel supported and have a deeper understanding of the patient's situation.

SUPPORT TO HEALTHCARE PROVIDERS
Healthcare providers have the ability to refer patients to the program and to receive support from the program.

**Resources/
Mechanisms**

Outcomes

Improved self-management skills

Improved adherence to care plan

Improved satisfaction

Improved health status

Improved quality of life

PATIENTS

Improved quality of care

Reduced healthcare overuse and cost

SYSTEM

Nine Steps for Realist Interviewing



Preparatory Phase

1

Defining the philosophical basis



Position your team early in the process on your philosophical position and base your methodological decisions on this

2

Building a common understanding of realist concepts



Agree on same definition regarding the key concepts: C-M-O

3

Eliciting a program theory



Identify or develop a program theory



Mukumbang FC 2020; Pawson R and Tilley N 1997; Wong G *et al.* 2013



Designing Realist Interviews

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Determining knowledgeable informants

→ Purposive sampling: select key informants based on 'CMO investigation potential'

→ Number of interviews: depend of the extent to which 'evidence of reality' has been explored during an interview

→ Possibility to re-conduct an interview with the same informant

→ Start doing interviews with informants who best know the program



Manzano A 2016.



Designing Realist Interviews

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Developing a theory-driven interview guide



Think about the interview guide based on the program theory



Determine the realist interviewing phases in which their study is conducted




Decide which components of the program theory need to be explored



Think that some elements may be missing from the program theory and need to be explored

Manzano A 2016, Pawson R 1996, Pawson R and Tilley N 1997.



Phase	Aim	Type of question	Example of questions*
Theory gleaning	To construct a program theory	Start with general questions about participant's role, experiences, and perceptions about the program (before, during, and after the program) Then, ask specific questions on participant's experiences and challenges.	-What is the purpose of the program? -How was your work different before the program was implemented? -Is this new program going to work for everyone? -Could you explain to me the types of people and places where you think it may be more effective?
 Theory refinement	To review, adjust, modify a program theory	Ask questions to explore patterns observed in phase 1 (theory gleaning) Find unobservable events or thought processes not already noted. Show the program theory to the participant to have their input and feedback.	-When this program was implemented in other clinics, a problem with patient engagement was described; have you seen that in your clinic? If not, why? How is your clinic different? -So this is how we think this program works. We think that the trusting relationship between the providers and the patients motivates the patients to adhere to the program, empowers them, which improves their health and ultimately, leads to fewer Emergency Department visits. So in your opinion, how does the program work?
Theory consolidation	To further refine a program theory for different stakeholders and their reasoning	Start with direct questions to the specificities of the individual cases Then, directed into the general program . Ask questions on a specific and smaller number of CMO configurations .	-How important are the patient-provider relationships on patient engagement in the program? -Do you think that this relationship really has an impact on healthcare use? What are the reasons for this? Can you give me an example?

*Examples of questions adapted from Manzano A 2016 and Mukumbang FC 2020 publications.

Designing Realist Interviews

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Drafting interview guide questions like a realist researcher

→ Focus on the program theory

→ To elicit **CONTEXT**: compare the informant's situation before/during program. Ask questions about a specific group of people.

→ To elicit **MECHANISMS**: Use "why" and "how" questions. Explore the informant's feelings.

→ Probe with specific questions:

- Can you give me an example?
- Can you expand a little bit?
- What do you think is the reason?

Westhorp G 2017; Westhorp G and Manzano A 2017.



Drafting Interview Questions like a Realist

	General questions	Example
Context	For whom does the program work and not work, and why?	Could you explain the types of people and care organizations where you think this program may be more effective?
Mechanism	When the program works, how does it work? When it doesn't work, why?	What were the main challenges in this program and why?
Outcome	What are the impacts of the program	What do you think this program may have changed for the patient?



The RAMESE II project 2017, Westhorp G 2017, Westhorp G and Manzano A 2017.

Conducting the Interviews

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Training and supporting realist interviewers



Provide training sessions on realist approach, key concepts, realist evaluation, realist interviewing and program theory



Promote and develop «realist reflex» among the interviewers

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Conducting the interviews, reviewing and modifying



Conduct the interviews like a realist



Review and modify the guide over the course of the data collection and analysis

Manzano A 2016, Pawson R and Tilley N 1997.



Exercise #1a Determine what we are looking for

Questions to a nurse case manager

- Do you think that the outcomes of the case management have been the same for all patients? Why?
- What was your role in the case management program? What was different from your usual role?

Questions to a patient

- Can you describe how you felt while you've been meeting with the nurse case manager? Why do you think you felt that way?
- Would you recommend the case management program to other people? If so, why and to whom? If not, why?



Exercise #1b Formulate a question to explore context or mechanism on patient-nurse case manager relationship

Here some tips:

To elicit CONTEXT:

- Compare what the informants usually did to what they do in the program
- Ask questions about a specific group of people

To elicit MECHANISM

- Use "why" and "how" questions
- Explore the informant's feelings

To elicit CONTEXT and MECHANISM

- Explore what works well and not well (success, challenge, etc.)
- Target a particular context or mechanism, and try to determine what impacts they had, in what ways, for what reasons
- Target a particular outcome, and try to determine which elements of the relationship lead to this outcome, in what ways, for what reasons.



Discussion and questions

Exercice #2 Conducting the interview like a realist

- Form into groups of 2: one is the interviewer, the other is the informant
- Groups on our right side: the informant is very quiet, don't talk much, answers are short, not very detailed.
- Groups on our left side: the informant talk too much, give a lot of details on his condition, but not related to the CM intervention.
- Interviewer uses our patient interview guide and try to elicit the desired data (context, mechanism, outcome).
- When the interview is over, everyone changes roles, i.e the informant become the interviewer and the interviewer become the quiet or chatty informant.



Exercise #1b Formulate a question to explore context or mechanism on patient-nurse case manager relationship

Here some tips

For silent informant

- Probe with more specific questions: ‘Can you give me an example?’; ‘Can you expand a little bit?’
- Leave room for silence

For talkative informant

- Let them speak for a while and then gently bring them back: ‘That’s interesting what you just said and it reminds me of a question I’d like to ask you.’
- Ask specific questions
- Rephrase to make sure you understand
- Be directive



Discussion and questions

Thanks you

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