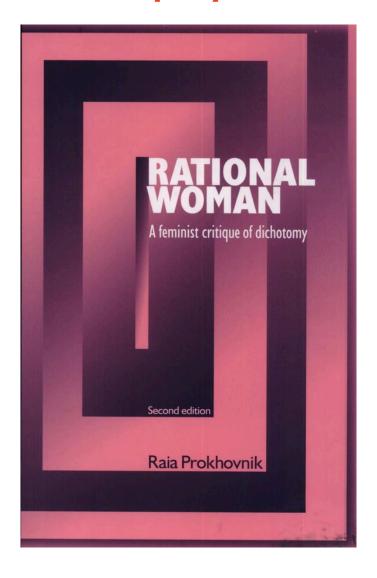
The limitations of 'barriers and enablers' approaches in qualitative research

Abby Haynes and Victoria Loblay

We acknowledge the tradition of custodianship and law of the Country on which the University of Sydney campuses stand. We pay our respects to those who have cared and continue to care for Country.



Seeds of inquiry about 'Barriers and Enablers'



1990s feminist ethics began questioning logic of dualisms grounded in Western philosophy and culture:

- man/woman
- reason/emotion
- mind/body

"Dichotomous thinking necessarily hierarchizes and ranks the two polarized terms so that one becomes the privileged term and the other its suppressed, subordinated, negative counterpart."

- Elizabeth Grosz (1994) Volatile Bodies

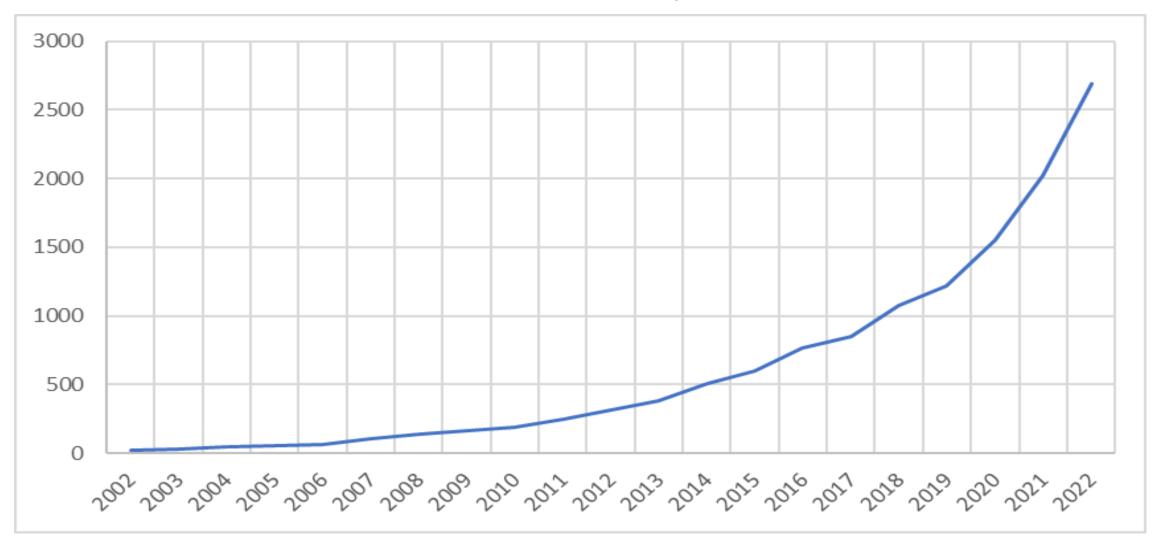
What are we asking, and why?

- Intervention study of research utilisation in a health policy agency
- What are the barriers and enablers?
- Findings:
 - Misalignment of the 'research utilisation' model with participants' real world policy context and processes
 - Some rejected the intervention's development,
 premise and outcomes
 - Different concepts of what 'evidence' and 'using research' meant (and should mean) in their context



Barriers and enablers/facilitators: a default approach?

SCOPUS search for: ("barriers and enablers" OR "barriers and facilitators") health 2002-2022



Asking fit-for-purpose questions



Pitfalls in developing qualitative research questions



- Too broad/vague to offer guidance
- Too narrow/specific, creating "tunnel vision"
- "Smuggling unexamined assumptions"
- Tactical but compromised: meeting scientific/strategic norms

Maxwell JA. Research questions: What do you want to understand? in Qualitative Research Design: An Interactive Approach. 3rd ed. Thousand Oaks, CA: SAGE; 2013:73-86.

Pitfalls in framing research questions in terms of barriers and enablers

B&E approach asks: 'What is getting in the way (of this desired behaviour)?' and 'What is assisting it?'

This appears to provide conceptual guidance but is a false friend...

- It's convenient and ubiquitous: why bother looing at other options?
- It's a framework isn't it? Who needs theory?
- It's common-sense: non-qual people will like it

B&E approach bypasses critical thinking, and often produces shallow research findings that neglect context and complexity



Analysing and interpreting research findings



Making the most of qualitative research

"Everyone thinks they can do qualitative research now... [papers] that report six themes and don't explain what the relationship is between the themes and so don't really go anywhere in terms of trying to explain the data.... A real strength of qualitative research is induction—interpreting the data. That's where you find the unexpected. I sometimes worry that we don't push qualitative research far enough. I'd like it to be less descriptive and for us to try harder to explain things..."

Pope C, Mays N. Critical reflections on the rise of qualitative research. *BMJ. 2009*

Barriers and enablers can lead to shallow research findings

- They tend to generate lists of 'good' and 'bad' things often the same list \pm
- They often do not describe how those things relate to one another: associations, dependencies, nested relationships?
- They seldom wrestle with explanation and causality:
 - How do B&Es work?
 - What causes something to become a barrier or enabler?
- They don't explain what B&Es actually are:
 - 'real' phenomena, or simplified 'top of mind' proxies for complex underlying realities, or just handy familiar explanations?

Checkland and colleagues highlighted this in their study of the implementation of clinical best practice guidelines in general practices. The GPs they interviewed listed commonsense implementation barriers such as **lack of time**. However their accounts could not be understood literally; instead, they related to the GPs' **underlying beliefs** about how work should be allocated in a general practice and what it meant to be a GP. The things that stopped GPs implementing guidelines actually had little to do with information management and shortage of time, which were the main reasons they gave to the interviewer."

Pope C, Mays N. Critical reflections on the rise of qualitative research. *BMJ. 2009*

Shallow findings

Four overarching facilitators were observed: support for patients and healthcare professionals, skilled staff, coordination and effective communication.

Internal factors were attitudes, perceptions, and knowledge whereas format and usability of guidelines, resources, leadership, and organizational culture were external factors influencing guidelines use

Factors related to the individual provider were associated with their attitude, knowledge/skills, behaviour and provider characteristics. Individual patient factors were mainly related to knowledge and attitude. Factors related to the social context included mainly professional teams and professional development. Frequent factors in the organisational context were available resources, organisational structures and work routine

Barriers & Enablers, Context and Complexity



Barriers and enablers can gloss over context and complexity

- B&Es frame tends to focus on 'here and now', neglecting broader context, history and social processes
- The appeal of B&Es may lie in the fact that it presents a simple solution to potentially complex scenarios
- Many problems in health are 'wicked'—characterised by emergence, uncertainty and flux—but B&Es often identify static problems and suggest universally applicable gold standard 'best practice' solutions are possible

The 'problem' of contextual barriers and facilitators in implementation



Implementation science is often described as addressing contextual barriers and facilitators to enhance innovation uptake

This is based on a linear model of research in which contexts are described as "sources of obduracy and interference" that impede smooth implementation

- May, C. R., Johnson, M., & Finch, T. (2016). Implementation, context and complexity.

Implementation Science

But contextual barriers are normal conditions of practice

"Context and 'confounders' lie at the very heart of the diffusion, dissemination, and implementation of complex innovations. They are not extraneous to the object of study; they are an integral part of it. The **multiple (and often unpredictable) interactions** that arise in particular contexts and settings are precisely what determine the success or failure of a dissemination initiative"

- Greenhalgh et al. Diffusion of innovations in service organizations: systematic review and recommendations.

Milbank Quarterly. 2004

B&Es encourage focus on dichotomies rather than dynamics

B&Es suggest a binary framework but B&Es are not fixed realities:

- Can't something be a barrier and an enabler?
- Is a barrier always a barrier, in all contexts, for all people and in all circumstances?
- Contextual factors that are barriers in one place might be a facilitator in another

Contexts are dynamic – just as interventions may be adapted to local contexts, interventions can reshape contexts

How a food box program shaped food distribution systems during COVID lockdowns



Critical Public Health



ISSN: (Print) (Online) Journal homepage: https://www.tandfonline.com/loi/ccph20

Can adaptation to 'extraordinary' times teach us about ways to strengthen community-based chronic disease prevention? Insights from the COVID-19 pandemic

Victoria Loblay, Kate Garvey, Alan Shiell, Shane Kavanagh & Penelope Hawe

- Food box program acquired funding to deliver 30 boxes a week over 2 years beginning in 2020
- Within a fortnight of lockdown they were delivering 60 boxes a week to a broader geographical footprint than originally planned
- Repurposed music festival site after the music event was cancelled – used the big tent and festival staff worked as builders building food crates

Alternatives and Enhancements to B&E approach



Different approaches and methodologies

- Inductive approaches: inductive thematic analysis, grounded theory etc
- 'Whole package' methodologies offer 'scaffolding' that can strengthen a B&E approach



RESEARCH ARTICLE

A new grounded adjustment to HIV adjustment and reclinical practice

Ben Huntingdon^{1*}, Louise Sharpe¹, Joh

Abstract

Background: Life expectancy of people methods (treatment as prevention and p nations. Therefore, research into quality of Yet, sexual adjustment of PLWH has been adjustment to HIV which explores the dy overtime.

Method: Thirty PLWH (19 male, 11 fema completed semi-structured interviews wl grounded theory.

Results: The model of sexual adjustmen during sex and/or fear of rejection by se sexual adjustment over time. Within the to overcome such fears, including: partnaccurate knowledge of risk of transmissic Adjustment is inhibited when undue fears.

An interpretive phenomenological exploration of the barriers, facilitators and benefits to make mental health

help-seeking.

Hannah Erdem, Gemma Wilson, Helen Limbrick,

SSSHL Psychology, Centre for Applied Psychologi

Research output: Contribution to journal > Article > peer-





Fingerprint

Abstract

Barriers, facilitators and benefits associated with remen's gendered experiences. The present study ut a mental health condition to explore their lived ex structured interviews revealed three themes: 'denient empowerment'. While denial was found to act as a seeking as a valued masculine enactment was a fa

Open access

Protocol

BMJ Open Identifying the facilitators, constraints and barriers of community indoor walking programmes: protocol for a

Shaminder Singh , ¹ Lin Yang, ^{2,3} Sonia Butalia, ^{1,4} Hude Quan, ¹ Tanvir C Turin ⁰ ^{1,5}

To cite: Singh S, Yang L, Butalia S, et al. Identifying the facilitators, constraints and barriers of community indoor walking programmes: protocol for a realist synthesis. BMJ Open 2020;10:e034342. doi:10.1136/ bmjopen-2019-034342

▶ Prepublication history for this paper is available online. To view these files, please visit the journal online (http://dx.doi. org/10.1136/bmjopen-2019-034342).

Received 16 September 2019 Revised 21 May 2020 Accepted 25 June 2020

ABSTRACT

Introduction Physical inactivity is a costly and leading health risk factor. Engaging in moderate or more intense regular physical activity reduces premature mortality at the population level. Walking is a viable option for achieving the recommended level of physical activity. Yet, the sedentary lifestyle is trending. Determinants of physical activity may be personal, social or environmental. Health promotion endeavours aiming to enhance population-level physical activity are reported in the literature. However, a full range of factors influencing the development and implementation of sustainable indoor walking programmes is unclear. The current review protocol is aimed at describing a process of realist synthesis to uncover contexts, mechanisms and outcomes of indoor walking intervention programmes, which might reveal facilitators, constraints and barriers of planning, implementing and

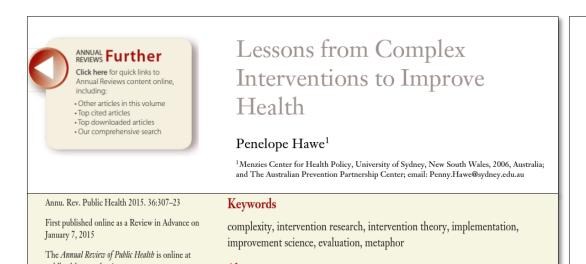
realist synthesis

Strengths and limitations of this study

- In addition to reporting the outcomes, the realist synthesis will explore contexts and mechanisms to review the success and failures of the programmes.
- A wide range of expertise of our transdisciplinary team might be helpful in developing an inclusive initial programme theory, thereby reducing selection
- ► The explorative and iterative approach of the discovery might reveal relevant components of indoor programmes and what drives the successes and failures for various stakeholders.
- This protocol lacks a step-by-step review procedure because the realist synthesis is inherently an iterative and interactive process.
- ► English language, rehabilitation and treatment-

Theories, conceptual frameworks and sensitising ideas

- Theory is your friend!
- Use 'sensitising ideas' to guide your inquiry
- Use a framework that specifically serves your research
 - Health services research: Shahin et al. A scoping review of theoretical models and conceptual frameworks used in public health services and systems research. Global Journal of Medicine and Public Health. 2020:9(1):1.
 - Research syntheses: https://lib.guides.umd.edu/SR/research_question
 - Implementation: https://dissemination-implementation.org/tool



From complex social interventions to interventions in complex social systems: Future directions and unresolved questions for intervention development and evaluation

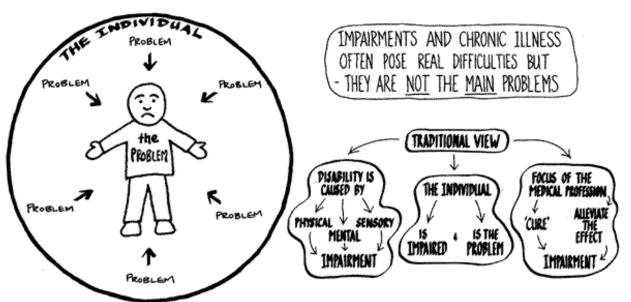
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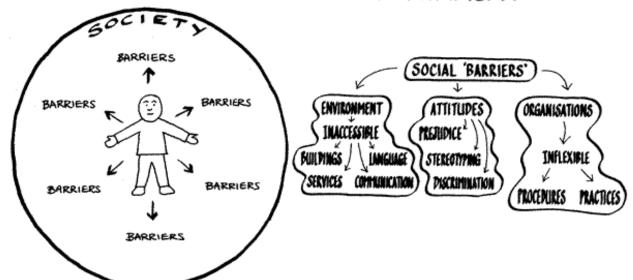
Graham F. Moore

Cardiff University, UK

THE MEDICAL MODEL OF DISABILITY



THE SOCIAL MODEL OF DISABILITY



Critical perspectives and participatory methods

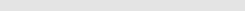
- Adopt a critical perspective
 - E.g. social visibility rather than barriers to explain failure of obesity interventions
- Use participatory methods to better understand stakeholders' experiences of B&Es

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journal homepage: www.elsevier.com/locate/socscimed





On the limitations of barriers: Social visibility and weight management in Cuba and Samoa



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ARTICLE INFO

Keywords:
Obesity
Weight loss
Comparative research
Ethnographic research
Barriers and facilitators
Social visibility

ABSTRACT

Obesity is an enduring global health challenge. Researchers have struggled to understand the barriers and facilitators of weight loss. Using a cross-cultural comparative approach, we move away from a barriers approach to analyze obesity and overweight through the lens of social visibility to understand the persistent failure of most obesity interventions. Drawing on ethnographic data from Cuba and Samoa collected between 2010 and 2017, we argue that social visibility is a framework for analyzing some of the reasons why people do not participate in weight management programs when they have high rates of health literacy and access to free or low-cost programming. Comparing these two places with very different histories of obesity interventions, we trace how weight management practices make people socially visible (in positive and negative ways), specifically analyzing how gender and economic inequalities shape the sociality of obesity. Our findings show that regardless of barriers and facilitators of weight loss at an individual and population level, the ways weight loss activities are incorporated into or conflict with the social dynamics of everyday life can have a profound effect on weight management. Employing visibility as a analytic framework de-individualizes weight responsibility, providing a contextual way to understand the difficulties people face when they manage their weight.



Using photovoice to increase social inclusion of people with disabilities: Reflections on the benefits and challenges

Delphine Labbé 🔀, Atiya Mahmood, François Routhier, Mike Prescott, Émilie Lacroix, William C. Miller, W. Ben Mortenson

First published: 22 July 2020 | https://doi.org/10.1002/jcop.22354 | Citations: 4

The peer review history for this article is available at https://publons.com/publon/10.1002/jcop.22354

SECTIONS









Abstract

The aim of this study was to understand the mobility experiences of mobility device users regarding the environmental and social barriers and facilitators in their community and to discuss the benefits and challenges of using photovoice, as a participatory

Advance existing knowledge about barriers and enablers

- In-depth investigation of an identified barrier or enabler
 - E.g. In-depth investigation of "lack of time"
- Develop and test implementation strategies for addressing B&Es

Research has been focused on identifying barriers to and facilitators of deprescribing in clinical practice... However, with continuing research around barriers and facilitators, we need to be mindful to undertake research that builds on existing knowledge, addresses known gaps, and advances the field... [by] translating existing knowledge into strategies and tools that can impact clinical practice and lead to practical and sustained deprescribing...

(Thompson W, Reeve E. Deprescribing: Moving beyond barriers and facilitators. Research in Social and Administrative Pharmacy. 2022)

 Use the existing B&Es literature to develop a new model or theory



Advance existing knowledge about barriers and enablers

Research Article

From Qualitative Meta-Summary to Qualitative Meta-Synthesis: Introducing a New Situation-Specific Theory of Barriers and Facilitators for Self-Care in Patients With Heart Failure

Oliver Rudolf Herber^{1,2}, Sabrina Kastaun¹, Stefan Wilm¹, and

Abstract

Situation-specific theories provide nurses with a vehicle to interpret situations, gui assumptions about factors influencing a health problem. In this article, we used meta-synt statements of findings pertaining to barriers and facilitators to heart failure self-care through meta-summary techniques leading to a new situation-specific theory. According self-care behavior is the result of a patient's naturalistic decision-making process. This key concepts: "self-efficacy" and the "patient's disease concept of heart failure." Numer factors have been identified influencing these two key concepts as well as the decision-menabling or hampering the execution of effective heart failure self-care. Further resear model through empirical testing. Once fully matured, the model may be useful in developaiming at enhancing adherence to self-care recommendations.

JAN

Informing Practice and Policy Worldwide through Research and Scholarship

REVIEW PAPER

Reconceptualizing children's complex discharge with health systems theory: novel integrative review with embedded expert consultation and theory development

Jane Noyes, Maria Brenner, Patricia Fox & Ashleigh Guerin

Accepted for publication 14 September 2013

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Patricia Fox PhD RN Lecturer and Programme Co-ordinator School of Nursing, Midwifery and Health Systems, University College Dublin, Ireland NOYES J., BRENNER M., FOX P. & GUERIN A. (2014) Reconceptualizing children's complex discharge with health systems theory: novel integrative review with embedded expert consultation and theory development. *Journal of Advanced Nursing* 70(5), 975–996. doi: 10.1111/jan.12278

Abstract

Aim. To report a novel review to develop a health systems model of successful transition of children with complex healthcare needs from hospital to home.

Background. Children with complex healthcare needs commonly experience an expensive, ineffectual and prolonged nurse-led discharge process. Children gain no benefit from prolonged hospitalization and are exposed to significant harm. Research to enable intervention development and process evaluation across the entire health system is lacking.

Design. Novel mixed-method integrative review informed by health systems theory.

Data sources. CINAHL, PsychInfo, EMBASE, PubMed, citation searching, personal contact.

Review methods Informed by consultation with experts English language

