

Who knows best? Perspectives on health in low-income communities



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Focus



Final FinWell work package



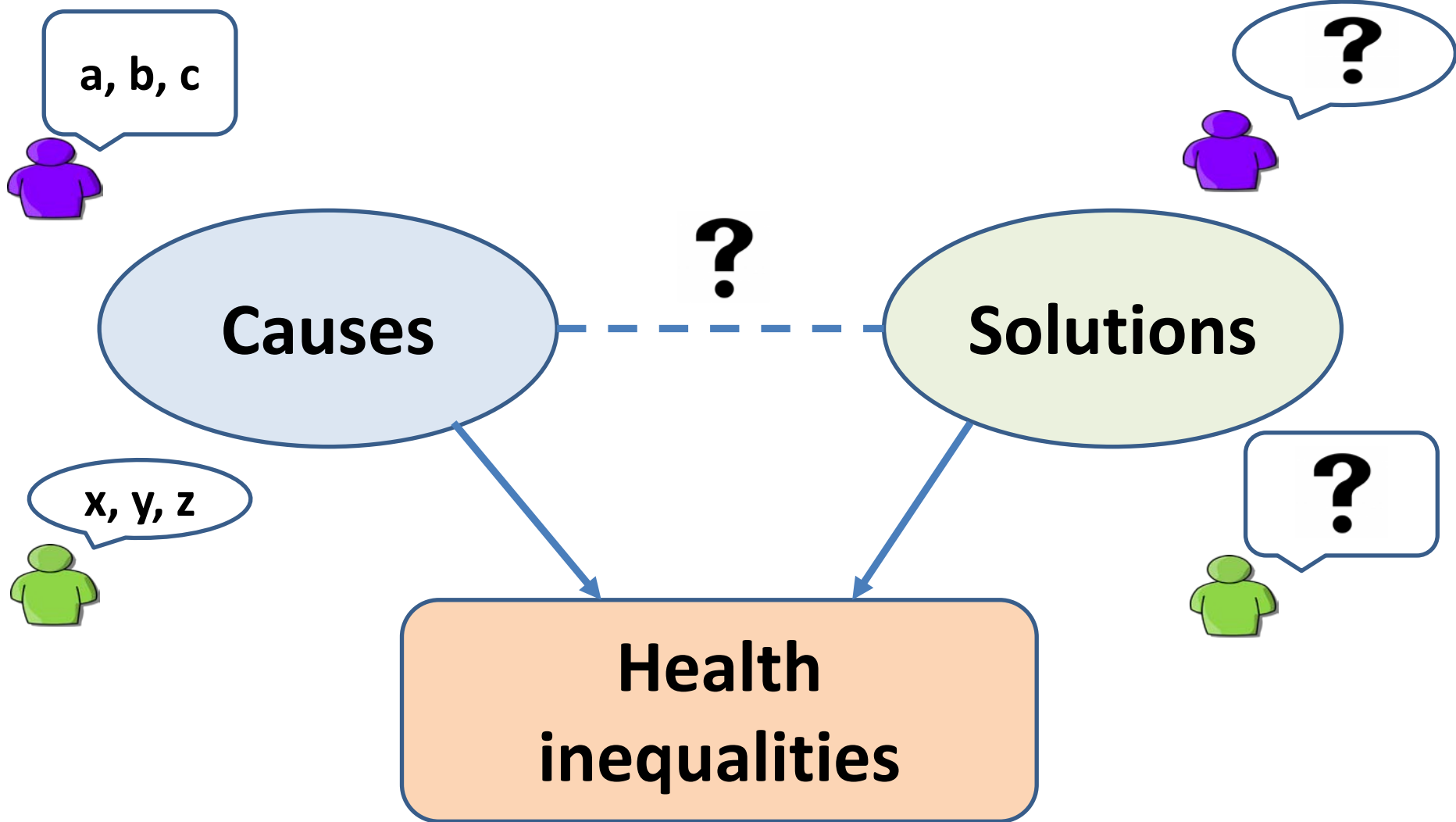
Shared perspectives on:

'Causes' – Why is health worse in low-income communities?

'Solutions' – How could health be improved in low-income communities?

Q methodology

Rationale



What is Q methodology (in 2 slides!)?

Q methodology is a set of connected techniques designed to enable the study of 'subjectivity' (views, opinions, beliefs, values, tastes, ...)

Combines qualitative and quantitative techniques



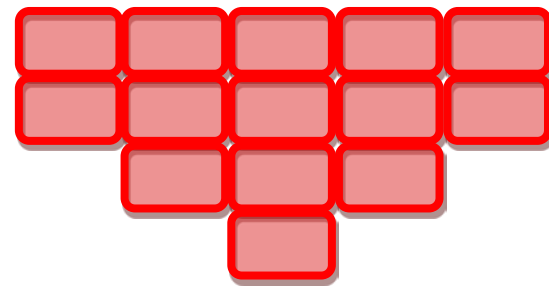
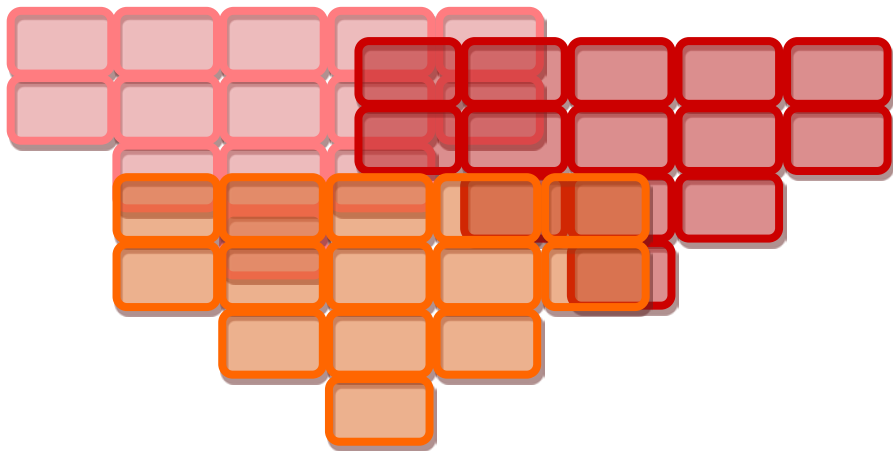
William Stephenson (1935) Nature



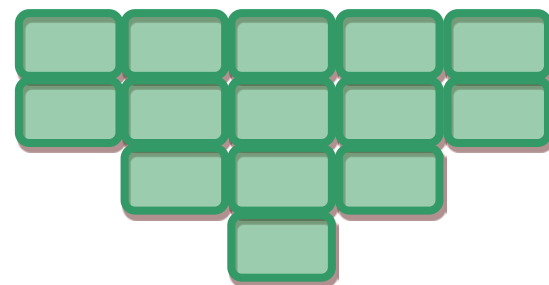
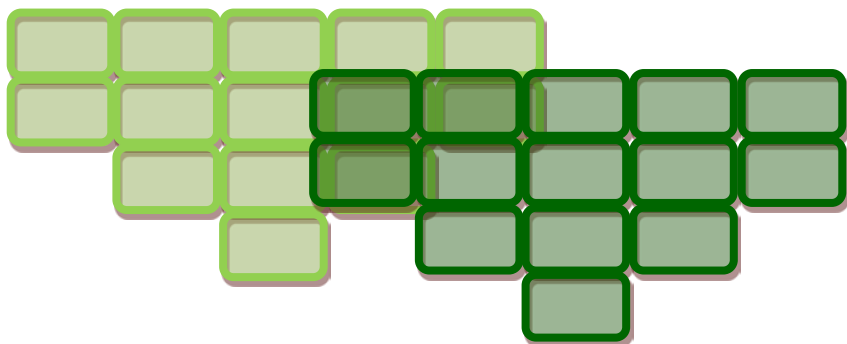
“Only subjective opinions are at issue in Q, and although they are typically unprovable, they can nonetheless be shown to have structure and form, and it is the task of Q technique to render this form manifest for purposes of observation and study.”
(Brown, 1986, p58)

Characterised by:

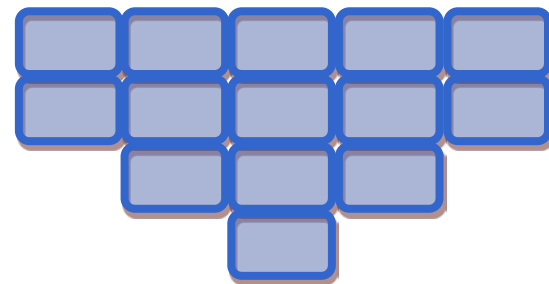
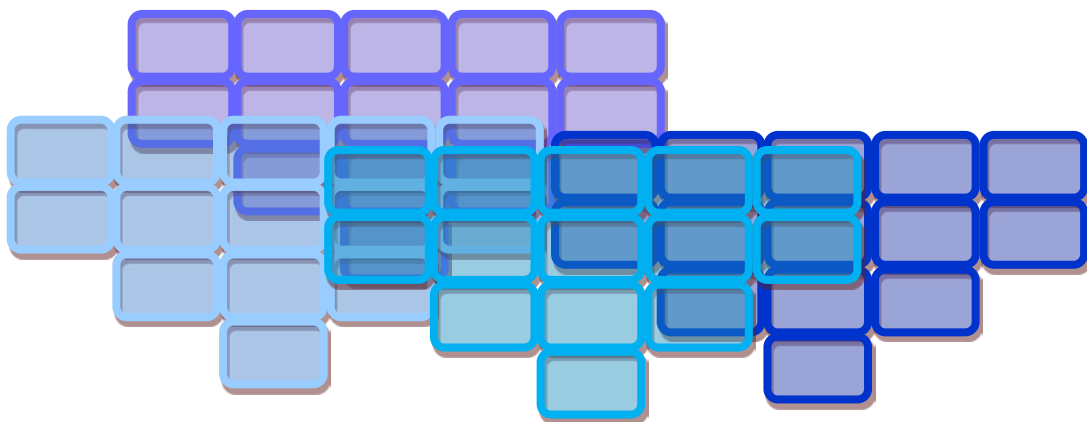
- Card-sorting exercise and by-person factor analysis



FACTOR A



FACTOR B

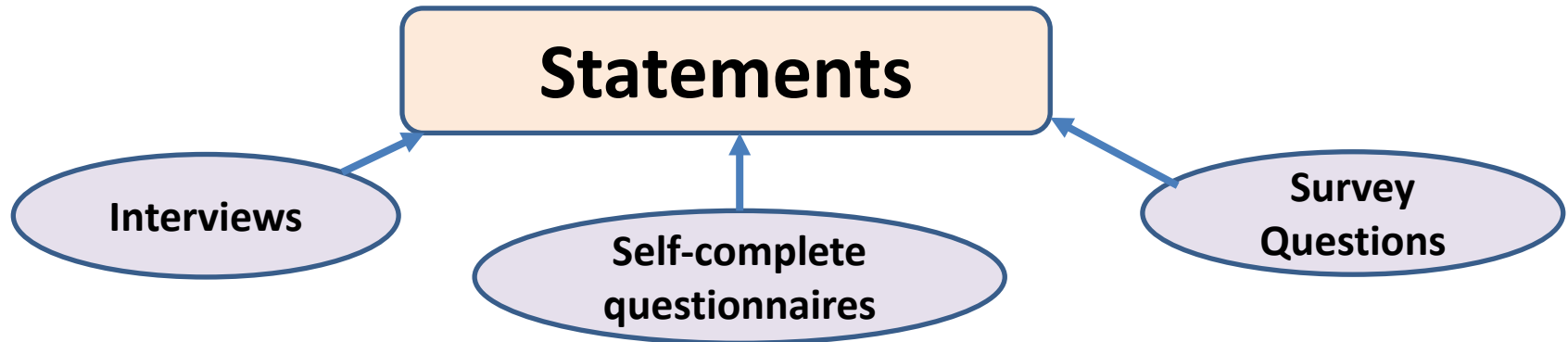


FACTOR C

Study design

Q study 1 - Why is health worse in low-income communities? (**'Causes'**)

Q study 2 - How could health be improved in low-income communities? (**'Solutions'**)



Framework:



Source: Dahlgren and Whitehead, 1991

'Causes': n=34 statements

'Solutions': n=39 statements

Example Statements

'Causes'

Prefix: Health is worse in low income communities because . . .

"... of poor parenting."

"... of unpredictable finances."

"... the people in these communities can't cope with unexpected events or costs."

"... of how the welfare system works."

'Solutions'

Prefix: Health could be improved in low income communities by . . .

"... spending more on the NHS."

"... cutting welfare benefits."

"..... making sure communities have a say in any decisions that will affect them."

"..... making it possible for people to access affordable, flexible loans when they need them."

Sample

Same sample for 'Causes' and 'Solutions'

53 purposively selected individuals:



28 Professional Stakeholders: healthcare professionals, community development workers, public health experts, academics, financial services practitioners, policymakers, social activists, charity workers






25 Community Participants: diarists and individuals living in low-income communities

Results

'Causes'

3 factor solution:

- F1 - Unfair society 
- F2 - Dependent, workless and lazy 
- F3 - Intergenerational hardships 

'Solutions'

3 factor solution:

- F1 - Empower communities 
- F2 - Paternalism 
- F3 - Redistribution 

'Causes' – Factor 1

Unfair society



- Structural issues and politicised environment
- Lack of meaningful and secure employment
- Unpredictable finances
- Welfare system and stigmatisation
- Media and political parties complicit in portrayal
- Rejects view that culture of communities and individual behaviours to blame

'Causes' – Factor 2

Dependent, workless and lazy



- Lost ability/motivation to look after self due to an over-reliance on state
- Complicated relationship with employment & a tendency towards worklessness
- Inability to exert control over their lives
- Conditioned & cleansed of ability to look after self
- Lack of ambition
- Focus on short-term pleasures despite always worrying about money
- Made to feel worthless so behave as such

'Causes' – Factor 3

Intergenerational hardships



- Complicated, generational family issues exacerbated by poorly targeted investment and policies
- Poor children more likely suffer, or be witness to, some form of abuse
- Debilitating effects of poor parenting and lack of role models
- Investment needed in economic and social as well as physical infrastructure
- Insecure jobs and money issues
- Lack of meaning/purpose and daily struggles

'Solutions' – Factor 1

Empower communities



- Devolve power to communities and individuals
- No point doing more of the same i.e. health campaigns
- Empower communities & develop social connectedness
- Invest in community activities and groups
- Support and help (vulnerable) individuals develop skills, confidence and knowledge needed for life
- Money needed to cover basic needs
- Avoid punitive policies

'Solutions' – Factor 2

Paternalism



- Supportive frameworks needed to enable better choices
- Creation of employment opportunities
- Protection from payday/doorstep lenders needed as well as provision of money advice services
- Penalties for welfare recipients spending money on drugs/alcohol
- Children need to be better educated about healthy eating habits
- Reducing price of healthy food
- Health policies – more services










'Solutions' – Factor 3

Redistribution



- Fundamental structural changes required
- Individual interventions or shifting responsibility won't work
- Progressive tax system is key
- Enable funding of well-resourced public services and reduce toxic inequities
- Good work and explore ways to meet basic needs
- Not cutting welfare benefits

Exploring the relationship between 'causes' and 'solutions'

		Solutions		
		F1 – Empower communities	F2 – Paternalism	F3 – Redistribution
Causes	F1 – Unfair society			
	F2 – Dependent, workless and lazy			
	F3 – Intergenerational hardships			

What does this mean?

Plural views

- Disagreement among and between professional stakeholders and community participants
- Broad agreement about issues relating to money
 - Causes: consensus around the unpredictability of finances and job insecurity
 - Solutions: consensus that welfare benefits should not be cut and that having enough money for basic needs is important
- Raises questions to policymakers and funders: why are more initiatives that act on material circumstances are neither evidenced nor enacted?

Questions?

For more detail, please see:

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<https://doi.org/10.1186/s12913-019-3884-9>

BMC Health Services Research

RESEARCH ARTICLE

Open Access

Who knows best? A Q methodology study to explore perspectives of professional stakeholders and community participants on health in low-income communities



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Table Activities

What are the most effective ways to support the health and wellbeing of low income households?

In groups:

- Discuss 20 statements related to:
 - Banking & Finance
 - Community & Services
 - Society & Work
 - Individual Factors
- Prioritise FIVE statements you MOST agree with
- Select THREE statements you MOST disagree with
- There is an option to create your own statements