

28/11/2011

TRIGGER – an email:

From: Monique Lhussier

Sent: 28 November 2011 13:03

To: Natalie Forster; Deborah Goodall; Sue Carr; Lesley Geddes

Subject: TC 'need'

Hi all,

I was thinking about how we may define 'need' over the weekend, so that we can be more precise on our inclusion criteria for the realist synthesis, in relation to our 'to whom' quarter. We've been wrestling with this for some time now and have as yet to come up with a satisfactory solution...

To recap - we established that health needs, generally speaking, have been widely reported in the literature and wouldn't teach us much. Therefore descriptive studies of TC health needs, in comparison to the settled community, for ex, would be excluded. We then decided that we might include studies that detailed needs, in relation to (or assessed prior to) an outreach intervention – this can still be the case, but we are yet to see such a study, which has left us uncertain about what exactly to include...

From our steering group, it seems to me that the roots to most TC health needs reside in a) difficulties in accessing mainstream services; and b) living (and moving) conditions. Outreach services can have a clear impact on a) and are inevitably impacted on by b). I therefore wonder whether we should, from now on as we read FT articles, include qualitative or quantitative research articles that describe a) and b) in some depth...?

REPLY – (SC) This seems useful to me – I wonder if it would help to also consider sth like Bradshaw's taxonomy – would that help define/refine a bit further

See below

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Need

The idea of need refers to

- the kinds of problem which people experience;
- requirements for some particular kind of response; and
- a relationship between problems and the responses available. A need is a claim for service.

Bradshaw identifies four main categories of need:

- *Normative need* is need which is identified according to a norm (or set standard); such norms are generally set by experts. Benefit levels, for example, or standards of unfitness in houses, have to be determined according to some criterion.
- *Comparative need* concerns problems which emerge by comparison with others who are not in need. One of the most common uses of this approach has been the comparison of social problems in different areas in order to determine which areas are most deprived.
- *Felt need* is need which people feel - that is, need from the perspective of the people who have it.
- *Expressed need* is the need which they say they have. People can feel need which they do not express and they can express needs they do not feel. [1]

CHANGE

This is helpful in order to continue refining what 'need' we are looking for. Normative and comparative needs are described in depth in the traveller communities literature. For inclusion purposes, we are therefore looking for qualitative studies, reporting on needs felt and expressed.

In the To Whom quadrant, the question:

What are these needs (in relation to the intervention)?

- a) Are they all met by the outreach intervention?
- b) Have TC members been involved in intervention development? How? (if outreach workers are members of the community, then how did they consult / involve the rest of the community?)

Has been changed to:

What are these needs (felt and expressed needs)?

- a) Has been transferred to the What for quadrant
- b) Has been transferred to the How quadrant