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SUDDEN IMPACT

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Suddenly it feels, every discussion about research seems to get round to “impact”. The world of Qualitative Psychology is no exception. In the QMiP strand of the recent BPS Annual Conference, the term came up again and again in presentations, and in conversations afterwards over tea and coffee (or stronger beverages). I certainly don’t remember it receiving such attention at previous QMiP conferences in Nottingham (2010) and Leeds (2008). The immediate stimulus to this upsurge in interest is obvious: the forthcoming Research Excellence Framework (REF) exercise in the UK includes a strong, explicit emphasis on the “impact of research”. Performance on this criterion has the potential to make a significant difference to the overall ratings of the Units of Assessment (UoA) that institutions enter, and from that to have consequences for research funding and profile. I’m sure many readers of this Bulletin will have had their writing plans this year interrupted by the requirement to produce “impact case studies”. Beyond the pressing concerns of the REF, recent years have seen an ever-increasing emphasis on the “value” of research to society, and especially to the economy in these financially straitened times. And though
assessment mechanisms may vary from country to country, demands on researchers to prove the worth of what they do are an international phenomenon.

I have many reservations about the REF process, and the form and focus of Governmental emphases on “impact”. However, I do think the underlying question – “what are we getting for our money?” – is a fair one for society to ask of its (largely) publically-funded academics. If we can set aside the frustrations of jumping through research assessment hoops, I think the current obsession with impact can serve as a useful cue for us to reflect on the ways in which our research can and should relate to the world we live in. So what I want to do in this article is to share my own reflections on the impact of qualitative psychology, from the position of my slightly uncomfortable realization that I’ve spent more than half my 50 years on the planet engaged with it! None of what follows should be taken as a prescription; rather, my aim is to stimulate further discussion and debate.

Our impact on each other

Any consideration of the impact of our research must include its impact on other qualitative psychologists. An interesting issue here is how particular methodological approaches and methods of data collection and analysis come to be prominent in some substantive areas and not others. For example, IPA has a very high profile in health psychology (Brocki & Wearden, 2006) but is much less well-known in organizational psychology. My own work on template analysis (which is a style of thematic analysis rather than a methodology) seems to be
very popular in organizational research and to some extent in more generic qualitative health services research (King, 2012a), but less so in health psychology and educational research. Of course, to a considerable extent such patterns of spread reflect the interests of influential figures associated with particular methodologies and methods, and their publication choices, but I don’t think this is the whole story. The ways in which new ideas diffuse tend to say something about those who adopt -or fail to adopt – them (as I found many years ago in reading for my PhD on the topic of innovation in elderly care institutions). A careful examination of how trends in qualitative methods and methodologies develop in particular areas could usefully inform debates about methodological branding and “methodolatory”, as raised in Chamberlain’s (2012) “View from the Top” piece in the previous issue of this Bulletin.

Discussion of the impact of qualitative research within qualitative psychology leads almost inevitably to questions about the impact of qualitative psychology within the wider discipline. This is a big and at times hotly-debated topic, that really requires a separate article to address it properly. However, I would like to spend a little time reflecting on the implications for qualitative psychologists of the growing interest in mixed methods¹ in recent years. Many substantial research funders in the UK now explicitly recognize the value of mixed method designs, and it is now common for major projects to include a qualitative element. This clearly offers opportunities to qualitative psychologists to become involved in larger scale projects of a kind that were previously only accessible to

¹ I am referring here to designs involving a mixture of qualitative and quantitative methods. Pluralism of qualitative methods is also an interesting issue, but beyond the scope of this article
our colleagues in mainstream (quantitative) psychology. We can now find ourselves in the flattering position of being invited to collaborate on significant funding bids in order to bring our methodological credentials and expertise to the table. I am in no doubt that this is a positive development for us, but we do need to be aware of some dangers that may accompany such opportunities. One risk stems from the fact that large, multidisciplinary projects in areas such as health, education and criminal justice are often not led by psychologists – indeed, if you join such a project you may find yourself to be the only psychologist involved. This can make it difficult to retain a strong psychological angle on the research, and across a succession of such projects your identity as a psychologist may become diluted.

Perhaps more importantly, in mixed methods research there is a danger that the qualitative part is always seen as playing a secondary and supportive role to the quantitative. In the longer term, this could actually make it harder for purely qualitative projects to be funded in certain areas, because funders may come to see the value of qualitative methods purely in terms of how they support quantitative work. In health, this tendency is exacerbated by the existence of a widely-agreed “hierarchy of evidence” that places randomized controlled trials (RCTs) as always and inevitably at the top. Such a view has been challenged even from within mainstream medical and health research (e.g. Kaplan, Giesbrecht, Shannon & McCleod, 2011) and it is important that qualitative psychology adds a constructively critical voice to the debate.

Our impact in organisations and communities
A great deal of qualitative research that might be described as “applied” or “real-world” (and I am well aware of the problematic nature of such terms) takes place in specific organizational and/or community settings. This raises important and sometimes quite complex questions about whether and in what ways our research can have a useful impact on these. In some cases, research projects mainly seek to have an impact beyond the settings where they take place – the specific contexts are chosen as exemplars from which it is hoped potentially transferable lessons can be learned. In other cases, it is at least as important for projects to make a difference for the host organization/community as to contribute to wider understanding – for example, in Action Research and in many evaluation studies. Whatever the aims, it is important to always remember that organisations and communities are complex entities, in all likelihood encompassing individuals and groups with quite different perspectives and agendas. Often these may not be apparent from the start of a project, so researchers may need to revise their original dissemination plans to take account of their increased understanding of the “local politics” of their research setting.

It is very easy for any applied research to have a negative effect on at least some people within host organisations or communities. But because qualitative research tends to seek a rich understanding of the settings within which it is carried out, it can give us more of a chance to tailor the way we conduct studies and disseminate findings to minimize risks of harm or distress. In contrast, it can be hard for quantitative researchers to gain sufficient knowledge about specific settings to do this; indeed, they may never learn about negative impacts as
participants can be reluctant to formally complain, and the researchers may have minimal direct contact with the setting. At the same time, the local knowledge that we as qualitative psychologists are well-placed to gain can help us shape the way we conduct and present our research to help achieve a positive impact for those we work with. For instance, in a number of qualitative evaluation projects that my team carried out with Healthy Living Partnerships\(^2\) we were able to target our feedback in ways that were as helpful as possible to the community initiatives and activity groups we had studied (King, 2012b; Kirkby-Geddes, King & Bravington, 2012).

Political impact

The impact of research within the academic world - and even more so in organisations and communities - always has a political dimension to it, as the previous section illustrated. For some projects, though, political impact is the major goal. It may seem that qualitative psychological research is severely disadvantaged in this respect, as policy-makers and politicians are used to the language of big numbers and positivistic notions of what counts as good evidence. However, processes of political influence are multi-faceted, and there are some ways in which qualitative research is well-placed to get itself heard. Individual cases can have enormous rhetorical influence, especially when they tap into areas of widespread current concern. Similarly, research that draws in a direct and powerful way on the lived experiences of those who are the focus of political and policy attention can be effective in challenging assumptions. The

\(^2\) Healthy Living Partnerships were a programme initiated by the previous Labour Government in the UK to support and develop community-based activities and schemes to promote health and well-being. They were focused on areas of high deprivation.
area of sexuality illustrates this well; qualitative psychologists have made a
notable contribution not only in highlighting negative stereotyping and
discrimination in general, but also in influencing policy and practice. Examples
include Paul Flowers’ research on HIV risk-management amongst gay men (e.g.
Flowers, Duncan & Frankis, 2000), and Meg Barker’s work on sexuality,
relationships and counseling/psychotherapy (Barker, 2012; Barker, Iantaffi &
Gupta, 2007).

One thing we certainly need to do is to make better use of the media. We have
not had anyone with a press liaison brief in the QMiP committee up to now,
unlike many other BPS subsystems. More generally, it is very rare to see any
qualitative psychologists as ‘talking heads’ on popular news, current affairs and
entertainment shows. I’m sure many of us have sat gritting our teeth at “media
psychologists” offering explanations in terms of personality types or “alpha male
behaviour”. Interacting with the media may well require the use of the
proverbial long spoon, but if we don’t bother to communicate some of the key
insights of qualitative psychology in a way that makes sense to the public, we are
complicit in our own marginalization.

In conclusion, I believe that as qualitative psychologists we should be grateful
that we have been pushed towards thinking about the impact of our research,
even if we are uncomfortable about the immediate imperatives for this, and
suspicious of the motives of those doing the pushing. Long after the dust has
settled on the REF 2014 (and similar exercises elsewhere) we will have had
much to gain from thinking carefully and critically about how the work we do touches the lives of others.

References


