

# Hub Tool: Developing an Outcomes Measurement Approach

## Tool overview

**Suggested use:** By teams who are developing or reviewing their research and evaluation plans for projects addressing mental health promotion for children and youth. This tool will help teams identify their main outcome concepts and how to measure them. Teams will find it most useful if they have completed previous steps in a typical study planning process. They will have a shared understanding of their project's theory of change and stage(s) of development, know how results from their intervention studies are going to be used, and have at least a starting set of intervention study questions.

**Tool content:** This tool fills common gaps and tailors content to child and youth mental health promotion (CYMHP). It briefly describes some measurement basics, provides an overview of main outcomes for CYMHP, and offers tips and examples for developing and operationalizing outcome measures. The tool concludes with some guidance for selecting measurement instruments and pre-testing measures for project participants and contexts.

The Hub uses the term *intervention study* as more generic than *research and evaluation* and interchangeably with them. Project teams may use any of these terms. All terms involve systematic inquiry about interventions/ innovations.

**Tool format:** 11-page document

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## SOME MEASUREMENT BASICS

An important starting point for any measurement activity is the recognition that all measures are, to lesser and greater degrees, imperfect. They are only approximations of what you are trying to understand (e.g., well-being, coping ability, empowerment). This includes measures that are quantitative (primarily numbers), and qualitative (primarily words and visuals). There will always be some degree of error or bias in the measurement process and understanding possible sources of error is important. Within these limits, the aim is to use measures that are as close a representation as possible (validity/ trustworthiness) and which, when used over and over in the same conditions, provide similar results (reliability/ consistency). For example, if a project is interested in how engaged participants are in their intervention, and they only ask those who are present for all activities, the measure of engagement will be more positive than it would be if they had asked everyone (a positive bias). Similarly, even if a project surveys all participants about engagement, there may still be random error in responses to survey questions.

### Indicators versus measures<sup>1</sup>

The terms indicator and measure are often used interchangeably in discussions about research and evaluation. They are also used differently by different organizations and programs. In general, indicators are flags, markers, or signals of progress, or of concepts you may want to measure but which may not be directly, fully, or easily measured. Measures are generally more direct assessments of a project's progress and concepts of interest. Measures tend to be comprehensive and often multi-dimensional. Examples of **indicators** might be the percent of youth in a community involved in volunteer work, or youth perceptions of volunteer work on their well-being. Examples of **measures** might be a 40-item questionnaire on youth experiences with volunteer work, or themes arising from in-depth interviews with youth on how volunteer work has impacted their well-being.

Measurement frameworks variably include constructs, concepts, indicators, and measures. There is no universally agreed terminology. The approach to outcome measurement in this tool refers to outcome concepts (general and specific) and measures. Projects using this tool can use terms that best fit language used for research and evaluation within their teams, often influenced by guidelines and expectations of funders.

### Three types of measures

While there are many ways to categorize measures, a simple and time-tested approach groups them as structure, process, and outcome.<sup>2</sup> The focus of this tool is outcome measures. Measurement of structure and process is essential to understand how any outcomes are achieved and are addressed in other Hub tools and annotated resources.

**A structure measure** relates to aspects of the intervention that can be thought of as its 'package' at the outset, including its location, physical setting, resources invested, equipment, supplies, staffing including training, and basic characteristics of participants.

**A process measure** relates to the activities or actions of the intervention, such as the content covered, the activities, the numbers of events or touchpoints, the amount of time participants are involved, the degree of engagement, 'satisfaction' with involvement and so on.

**An outcome measure** is about what happens to participants (or communities, society) *resulting from* the structure and processes of the intervention. Outcomes at the individual level are most well-developed and include changes to things like knowledge, behaviour, functioning and quality of life.

## OUTCOMES FOR CHILD AND YOUTH MENTAL HEALTH PROMOTION

A leading theory of outcomes specific to child and youth mental health promotion<sup>3</sup> includes outcomes at individual, community and structural or system levels. The following table gives examples of outcomes at each of these three levels.

Level	Sample outcomes
<b>Individual</b>	<ul style="list-style-type: none"><li>• Increase control over one's life</li><li>• Manage thoughts and feelings</li><li>• Acquire social and emotional skills, emotional resilience, and the ability to cope with stressful or adverse circumstances</li></ul>
<b>Community</b>	<ul style="list-style-type: none"><li>• Positive sense of belonging</li><li>• Social support and inclusion</li><li>• Sense of citizenship</li><li>• Participation in society</li></ul>
<b>Structural- or system-level</b>	<ul style="list-style-type: none"><li>• Environmental, social, economic, and cultural conditions are supportive of positive mental health – e.g., living environments, housing, education, employment, transport, political and social structures, and cultural values</li></ul>

As the field of mental health promotion develops, some main outcome concepts are gaining prominence and can be explored at individual, community and/ or system levels. Some common outcome concepts include positive mental health, resilience, empowerment, hope, purpose, inclusion, well-being, participation. The rest of this tool offers guidance on how project teams can identify and measure outcome concepts relevant to them.

## TIPS FOR IDENTIFYING OUTCOME MEASURES THROUGH CO-DESIGN

1. Start with your intervention study questions. Consistent with guidance in other Hub tools, your questions will be informed by your theory of change (reflecting your project worldviews), intended use of information by relevant stakeholders, and project stages of development. Within your intervention study questions note what kinds of changes (likely in broad terms) your project is aiming to achieve. Think about changes at different levels (e.g., individual, community, system) and realistic expectations for how long it will take to observe progress towards achieving different outcomes.
2. Getting more specific about the desired outcomes for your project is an excellent opportunity and reason to re-engage stakeholders who intend to use results from your project. Seek their input on what kinds of outcomes matter to them. While everyone typically wants similar ‘big picture’ outcomes like healthier, more resilient people, different stakeholders will value, or place greater emphasis on different outcomes. Policymakers/ decision-makers might want to know about costs and benefits and higher level, longer-term impacts on society. Parents and providers might be more interested in functioning of children and youth at school or work. Children and youth themselves will likely care about social relationships, positive connection and engagement, and quality of life. There may be common ground across stakeholders on important outcomes like improved equity. While trying to measure ‘everything for everybody’ is not recommended, coming up with a set of outcomes that balances different perspectives can increase support for your project. If this can be done through open dialogue that acknowledges diversity of views and values, it can also help to inform everyone of other relevant perspectives. If done through individual input, a summary report could be shared with those who participate.
3. Once you have consolidated input and identified a short-list of outcomes, include your stakeholders once again in individual or group discussions about the overall balance of the set, including what might still be missing. While there is no single best number of outcomes, a goal is to bound the number of outcomes without being blind to unanticipated changes resulting from a project. To achieve this goal, a reasonable approach is to choose 3-5 outcomes that are *most likely* to be influenced by your project, along with another 3-5 outcomes that *may* be influenced by your project yet are more exploratory. To avoid ‘fishing’ for positive outcomes when results are in, identifying these exploratory outcomes in advance is a sound practice. Even so, all possible outcomes (positive or negative) may be difficult to anticipate and are generally best explored by including open-ended, qualitative approaches (as is done in complementary mixed methods designs).
4. Please remember that not all outcomes will be achieved at the same time. Especially with population interventions, ‘failed’ projects (those that do not demonstrate their outcomes) are often a result of ‘failed’ expectations (usually too much change in a short time, especially with limited implementation). Your theory of change is an excellent place to include a temporal (or time) dimension; assumptions about what can be expected to happen (with structures, process and outcomes) over what period of time.

## OPERATIONALIZING YOUR MEASURES

The process of operationalizing measures typically starts with study questions, moves through increasing specification of the measurement concepts and ends with a specific operational definition for each. The following tables (one at each level of measurement) provide example definitions. Examples purposely include some measures that are relatively simple (e.g., percentages) and others that are more specific.

### 1. System level examples

Intervention Study Question	General Concept	Specific Concept(s)	Operational Definitions “How will we know it when we see it?”
Does the intervention reduce vulnerability among children entering school?	Vulnerability at school age	Social emotional vulnerability at the time of school entry in children in a jurisdiction and specific time period	<p>The percent of children entering school in the jurisdiction and year that score at the 25th percentile or lower on the social-emotional subscale of a standard development instrument</p> <p>% of parents of children entering school in the jurisdiction and year reporting concerns about their child’s social-emotional development (average score of 25 or above on a 10-item scale of concerns)</p> <p>Emerging issues about social-emotional developed identified in focus groups with early childhood educators from childcare organizations in the jurisdiction in the five areas with greatest socioeconomic disparity</p>
Does the intervention decrease distress in youth?	Youth distress	Calls to distress lines in the intervention communities among youth	<p>Rates of calls with a defined level of distress to Kids Help Phone from youth aged 14 – 16 years in specified communities compared to the prior year</p> <p>In-depth qualitative review of themes about types, levels, and precipitators of distress incidents from transcripts of distress calls from youth aged 14 – 16 years in specified communities in the prior year</p>

## 2. Program/ community level examples

Intervention Study Question	General Concept	Specific Concept(s)	Operational Definitions “How will we know it when we see it?”
Has equity been improved for youth in the community?	Equity in youth-serving organizations participating in an equity-enhancing intervention	Equity-promoting practices in community organizations serving youth aged 12 – 25 years in a specific community and time period	<p>The % of youth-serving organizations whose past year clients meet or exceed the proportions for ethnic and gender minorities in the broader community of youth in the past year in the specific community</p> <p>The % of youth-serving organizations that have increased the proportion of ethnic and gender minorities in new hires by at least 50% in the past year in the specific community</p> <p>In-depth interviews with organization leaders to elicit information about factors that enhance or limit their capacity to sustain engagement of ethnic and gender minority youth in the part year in the community</p>
Does the intervention empower youth in the community?	Youth knowledge and skills to participate in local government	3 aspects of knowledge and 5 types of skills that are theorized to improve effectiveness of youth participation in government processes	<p>Increase in numbers of youth serving on municipal government committees over a 5-year period</p> <p>Themes from focus groups of youth having served on committees reflecting the knowledge and skills aims of the intervention</p> <p>Case stories of youth-led written and oral presentations to public consultation processes on issues of broad importance to youth selected in advance by consensus of a youth panel</p>

### 3. Individual level examples

Intervention Study Question	General Concept	Specific Concept(s)	Operational Definitions “How will we know it when we see it?”
Does the intervention lead to better parenting?	Better parenting among participants in the parenting program	Parenting confidence among parents of infants and toddlers (0 – 3 years) who participated in the program in a specific community and time period	Average increase in ratings of at least 20 points for parents who attended at least 80% of program sessions on a 20-item scale of parenting confidence over 3 measurement time points (pre-program; after 10 sessions; post-program)  Themes of improved parenting confidence and reduced parenting stress in qualitative interviews with parents who attended at least 80% of program sessions
Does the intervention lead to a sense of belonging among pre-teen children?	Sense of belonging among pre-teen participants in a community/ neighborhood-based nature play program	Sense of belonging as reported by participants aged 7 to 11 years who participated in the nature play program in a specific community and time period	Increase in expression of positive themes related to belonging in a story-based exercise to assess pre-teen participants’ sense of belonging to their neighborhood by consensus of three observers  Average of 8 or more on a 15-item checklist of belonging to one’s community and peer-group for participants who missed no more than one of 12 play sessions

## SELECTING MEASUREMENT TOOLS/INSTRUMENTS

The following are common ways that outcomes measurement tools are selected:

- **What others have measured** – not ideal as may not be a good fit for your participants and context
- **What developers of similar programs propose** – a starting point but still may not be a good fit for your purpose
- **Measures related to the theoretically proposed effect** – recommended
- **What participants and stakeholders say their desired outcomes are** – recommended

For nearly every concept imaginable, there are existing quantitative instruments available; many of which have been developed using systematic and quality standards. Relevant instruments can be found in the academic literature, in broad internet searches and in specific measures

databases (e.g., Health and Psychosocial Instruments (HAPI)). The theory behind these concepts can also offer guidance for their measurement using qualitative methods.

Historically, there have been financial and credential-related limits on access to professionally developed measures but there has been substantial change on that front; many good quality instruments are now available in the public domain and at no charge. If no suitable measure for your purpose can be found, then development may be necessary; but this is not as simple as it may appear on the surface and collaborating with people who have experience doing this can be beneficial. One option to achieve the ‘best of both worlds’ would be working with the author of an existing instrument to adapt it to your context and participants. If more than one instrument is available, it can be helpful to consider criteria most important to your stakeholders as well as systematically test for best fit (see recommended testing methods below). Criteria might include completion time, evidence for reliability and validity, suitability of language and tone, feasibility of data collection method, etc.

## PRE-TESTING INSTRUMENTS FOR SUITABILITY TO YOUR PARTICIPANTS AND CONTEXT

Once you have a short list of instruments, ideally you will pre-test them with your participants. While there are a range of pre-testing methods one helpful approach is cognitive interviewing (CI).<sup>4</sup> CI is a straightforward and powerful mixed-methods approach to identifying issues with measurement instruments for specific settings and participants. It allows for examining assumptions about what intervention developers think they are measuring. For example, in a study of homeless individuals, contrary to the investigator’s assumptions, questions about family were much more difficult for respondents than questions about their mental health or drug use issues.<sup>5</sup>

CI involves interviewing respondents about their reactions to instrument questions according to four stages of cognitive processing: **comprehension** (understanding what the question is asking about); **recall** (retrieving the information for the response from memory); **estimation** (deciding what response fits best); and **formulation** (adjusting the response according to perceived expectations). Two main techniques, ‘think aloud’ and ‘probes’ (questions about the questions), allow for exploration of a range of issues. In the ‘think-aloud’ technique the respondent verbalizes what they are thinking while completing the items. In the probe technique, specific questions are used to explore issues in greater depth. Just a few examples of many possible probes are listed below.

Stage	Example Probes
<b>Comprehension</b>	<i>What do you think they mean by ....? Can you repeat the question in your own words?</i>
<b>Recall</b>	<i>How well do you remember this? Was it easy or hard to answer this question?</i>
<b>Estimation</b>	<i>How did you come up with your answer? Why did you pick .... instead of ...?</i>
<b>Formulation</b>	<i>How would most people you know respond to this question? Do you think this is okay to talk about in an interview, or is it too uncomfortable?</i>

CI can be used for whole instruments or selected items that are suspected to be problematic. It can be used to compare one instrument to another, and to test instrument instructions, recruitment messages, consent procedures and questions for qualitative interviews. CI can identify items or instruments in advance that might trigger negative feelings or demoralize study participants and can therefore inform best approaches to study ethics.

CI is usually implemented as a few rounds of in-depth one-on-one interviews with small numbers of participants (7 to 12 per round are recommended). These rounds can provide rich information about the effectiveness of items in getting at the concept of interest, including issues of sensitivity and appropriateness. The information can be used to revise items and measurement processes to address any problems. Even if items cannot be revised (e.g., on standardized instruments) the methods can still inform interpretation of results.

## SELECTIVE OUTCOME MEASURES IN CHILD AND YOUTH MENTAL HEALTH PROMOTION

In recent years there has been a welcome surge in the development of positive, strengths-based outcome concepts in mental health promotion. These concepts have been advanced in part to address concerns about traditional deficit- and problem-focused measurement. While there still may be a role for measuring vulnerabilities and stressors, balancing those with more positive measures is generally recommended.

Some of the more common concepts are listed in the following table, along with some suggestions for further reading. Note that these are **examples only and not specific recommendations**, as context is such an important consideration in the selection of specific instruments. Any of these concepts can also be measured using qualitative methods – such as open-ended interview questions designed around the theory or theories underlying the concepts.

Concept	Example Definition*	Example Instrument/ Indicators	Further Reading
<b>Positive Mental Health</b>	“The capacity of each and all of us to feel, think, and act in ways that enhance our ability to enjoy life and deal with the challenges we face. It is a positive sense of emotional and spiritual well-being that respects the importance of culture, equity, social justice, interconnections and personal dignity.” <sup>6</sup>	The Positive Mental Health Surveillance Indicator Framework <sup>7</sup>	Orpana H, et al. 2016 <sup>7</sup>
<b>Well-being</b>	“Wellbeing can be understood as how people feel and how they function, both on a personal and a social level, and how they evaluate their lives as a whole.” <sup>8</sup>	Well-being Indicator Tool for Youth (WIT-Y) <sup>8,9</sup>	Linton et al. 2016 <sup>10</sup> Kobau et al. 2011 <sup>11</sup> Jamieson & Issac 2019 <sup>12</sup> ( <i>This report is highly recommended for its discussion of positive approaches to understanding and measuring Indigenous child well-being</i> )
<b>Quality of Life</b>	“Individuals’ perception of their position in life in the context of the culture and value systems in which they live, and in relation to their goals, expectations, standards and concerns.” <sup>13</sup>	Youth Quality of Life (YQOL) <sup>14</sup>	Wallander & Koot 2016 <sup>15</sup>
<b>Resilience</b>	“In the context of exposure to significant adversity, resilience is both the capacity of individuals to navigate their way to the psychological, social, cultural, and physical resources that sustain their well-being, and their capacity individually and collectively to negotiate for these resources to be provided in culturally meaningful ways.” <sup>16</sup>	Child and Youth Resilience Measure (CYRM) <sup>16</sup>	Khanlou & Wray 2014 <sup>17</sup>
<b>Empowerment<sup>^</sup></b>	“Youth empowerment is a process where children and young people are encouraged to take charge of their lives. They do this by addressing their situation and then take action in order to improve their access to resources and transform their consciousness through their beliefs, values, and attitudes” <sup>18</sup>	The Sociopolitical Control Scale for Youth (SPCS-Y) <sup>19</sup>	Cyril et al. 2016 <sup>19</sup> Úcar Martínez et al. 2016 <sup>20</sup>

Concept	Example Definition*	Example Instrument/ Indicators	Further Reading
<b>Social Inclusion<sup>^</sup></b>	“A process which ensures that those at risk of poverty and social exclusion gain the opportunities and resources necessary to participate fully in the economic, social and cultural life and to enjoy a standard of living and well-being that is considered normal in the society in which they live. Social inclusion also ensures that vulnerable groups and persons have greater participation in decision making which affects their lives and that they can access their fundamental rights”. <sup>21</sup>	The Social Inclusion Scale (SIS) <sup>22</sup>	Cordier et al. 2017 <sup>23</sup>

\* There are no universally accepted definitions for any of these concepts; nor are they distinct from each other

<sup>^</sup> Empowerment and social inclusion can also be measured at the organization and community levels

## SOME FINAL TIPS ABOUT CO-DESIGNING THE MEASUREMENT APPROACH

- **LESS IS MORE, BUT NOT JUST ONE.** A good job on a few carefully selected and meaningful measures is better than a poor job on dozens of measures. More than one measure is important to avoid missing meaningful changes from your project. Too many measures can make it difficult to interpret findings and increase the temptation to selectively report on only the positive findings.
- **MIX IT UP!** Measurement is often thought to refer to numbers and quantitative approaches only. Measurement includes qualitative approaches, which generally enrich understanding about any changes from your project – what changes and how and why they are made. The most informative and useful intervention studies combine quantitative and qualitative methods (i.e., mixed methods), capitalizing on their complementary strengths.<sup>24</sup>
- **GETTING TO COLLECTION.** Once you have a good sense of your desired measurement approach, decisions about from whom information is collected, when and how are important to consider. Your project team may want to review other Hub tools and annotated resources that provide guidance on study designs and data collection approaches.

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