

Open Dialogue peer review:

A response to Tymms, Merrell & Coe

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WE WELCOME Peter Tymms, Christine Merrell and Robert Coe's paper as a timely contribution to an important issue. For precisely the reasons that they state, this is an area of current concern. We are writing to suggest that for complex interventions involving educational programmes an even more complicated sequence of investigations could be useful, taking as the model the medical approach as detailed in MRC (2000).

We agree that the RCT is an essential tool to investigate the efficacy of programmes. There is no other way to know if, on the whole, a programme works across a variety of contexts and if some programmes should 'work' better than others. Pragmatic randomisation as described in the Fife study outlined by Tymms et al. should be appropriate although it is a pity that it appears no children are continuing with their current exposure to peer learning, which would allow for the possibility that this is just as good as the new interventions. Blind assessment of outcomes is of course essential.

However, we would suggest that RCTs should be considered only as part of a longer sequence of research investigations which must be completed to ensure that programmes do not only work under trial conditions but are effective in real life contexts. Modelling and exploratory investigations carried out before RCTs to see what effect varying components of the programme have on the overall 'package', how long it is helpful to spend on programme activities and what might be good outcome measures are required. This is a stage that is often underplayed in educational research and programme design.

It is also to be expected that programmes which seem to be efficacious following RCTs are not effective in real life contexts. There are many reasons for this including staff commitment and understanding, prioritisation in a context of shifting priorities, resource allocation and local contextual factors. Studies of roll-outs of interventions indicate that local adaptation of the intervention is essential to ensure the 'buy-in' that sustains delivery (Datnow et al., 2002). This makes education interventions hard to research if the focus of study is the programme and its unique design features, as these may not stay constant.

We must, therefore, anticipate the need for a fourth stage of systematic investigation which checks whether effects can be obtained by others in uncontrolled settings over the long term, and not be surprised if they can not.

For policy makers, whose concern is to make an immediate impact on a particular group of children, maintaining the design features of programmes to build knowledge for the future is not a high priority. Nor is making detailed descriptions of the adaptations. Measuring efficacy of provision – whatever it may be – should be, and is, a priority. There is also a continuing problem if researchers or policy-makers change the outcome measures on a regular basis. It would be helpful if the same outcome measurements were used over time as there is no guarantee that an adapted programme is better than the original. Systematic and repeated measurement of outcomes is needed to investigate the effectiveness of provision in the real world.

As Tymms et al. point out, education researchers and policy-makers operate to different time cycles. Policy-makers often experience political pressures to change the measures, the aims and the questions for educational interventions on a regular basis. This is the reality of education implementation.

Educational policy makers are, of course, looking for fool-proof programmes – and who isn't. However, they often want an intervention to achieve a complex mix of policy outcomes, including social benefits, some of which may be unrelated to the aim of the original programme (Moss & Huxford, 2007). The same programme can also look very different judged from different standpoints. (Ellis, 2007) This confuses the situation. If the policy questions are different from the researcher's questions about teaching and learning and from the academic, curriculum or programme development questions, considerable negotiation is required to make informed and sensible decisions.

Tymms et al. suggest that policy-makers require 'immediate, visible success and decisiveness even where it is inappropriate.' Adopting a 'hard health' approach to educational research (McCartney, 2004) would raise the unpalatable possibility that not all interventions were found to be successful. Perhaps this is the 'elephant in the room' of education research.

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