

Connectivity and conflict in periods of austerity: evidence for causal theories

The table below summarises the mechanisms evidenced by the synthesis. Care should be taken when reading the table. Co-location of a mechanism and an outcome on the same row does not necessarily imply that the mechanism and context produces that outcome, only that the outcome is associated with the particular family of mechanisms and causal theory.

	Limited evidence
	Adequate evidence
	Strong evidence

Unless indicated otherwise, the example applies in the UK context.

Overall causal theory derived from realist synthesis	Specific mechanisms by which middle class advantage comes about	Contextual factors which explain the salience of the mechanism	Nature of middle class advantage accrued
<p><i>The middle classes and interest groups</i></p> <p>That the level or nature of middle class interest group formation allows for the collective articulation of their needs and demands, and that service providers respond to this.</p>	<p>The middle classes are more likely to join formal organised groups such as parent-teacher associations or parish councils than working class people. They are also likely to use direct and indirect behaviour to exclude non-middle class, or non-White, people from these groups.</p>	<p>The middle classes are likely to be more geographically mobile and join such groups partly in order to make friendships.</p>	<p>There is evidence that where service user groups (such as parent-teacher associations) are dominated by the middle classes, impacts on policies and practices can be discerned: e.g. on 'streaming', special educational needs and school closures.</p>
	<p>The middle classes focus their participation in groups with a high potential for influence.</p>	<p>Areas in the UK and US with higher number or concentration of civic society organisations have better outcomes in terms of service provision.</p>	<p>Collective organizing can influence the specifics of planning decisions and broader planning policies.</p>
	<p>The middle-classes are more likely to have social networks that enable them to access</p>	<p>The middle classes are more likely to have, and maintain, social and professional links</p>	<p>Improved effectiveness of local public services and related outcomes according to</p>



	the information necessary to justify their case or to identify ways to influence decision making in their favour.	with other middle class people. They are also more likely to take part in formal voluntary work.	specific metrics (fire-related deaths per capita; comprehensive area assessment score)
		The middle classes are much more likely to be involved in new social movements such as environmental, peace and feminist movements.	
		Middle class Black and minority ethnic parents often feel excluded through racial prejudice from groups.	
<p><i>The middle classes as individual consumers/activists with public services</i></p> <p>That the level and nature of middle-class engagement with public services on an individualised basis means that services are more likely to be provided according to their needs and demands.</p>	<p>The middle-classes are more likely to be involved in 'co-producing' services such as participating in school parents' evenings, commenting on planning policies, or disposing of refuse appropriately. In the health sphere, co-production implies 'active' patients who keep appointments, share and exchange health knowledge with practitioners, seek out knowledge themselves through specialist literature and the internet and act on the advice of practitioners.</p>	<p>Where coproduction is new, such as introduction of parents' evenings in Norway, those with a higher socio-economic status engage more readily.</p>	<p>Affluent patients are more likely to be classed as urgent cases for treatment for heart disease.</p>

	The middle-classes are more likely to complain about a given standard of service than more disadvantaged social groups.	Some services, such as health consultations, require greater engagement and exchange of knowledge to produce an effective outcome.	Head teachers and other educationalists will welcome middle class parents to their school as they are more active.
	Middle class complaining behaviour has the capacity to be more vociferous than non-middle class behaviour (e.g. involve political representatives or lawyers more readily.)	Capacity for longer patient/GP consultations in affluent areas	Environmental service managers and street sweepers will change work practices to prevent middle class complaints.
		Those who feel more effective when engaging with the state are more likely to complain or engage more positively.	Developers "imagine" a middle class complaining public and strategically act to counter this in developing proposals.
		In a less unequal country with greater class alignment with political parties (Norway), socio-economic status loses its explanatory power in favour of efficacy.	Some mixed evidence that GPs more likely to refer middle class patients for specialist services
		The middle classes are likely to have a greater feeling of political efficacy and therefore be more willing to complain.	Health professionals adjust their practices and decisions in anticipation of litigation.
		When those with a very high income can exit from education provision by purchasing private provision expenditure on this falls (US only)	Qualitative evidence that specific parents access better quality schooling for their children ('choice' schools, top streams, avoidance of SEN streams in the US)

		Middle class parents are more likely to actively buy in extra-curricular activities to shape their child's life.	Middle class patients being provided with more information from health professionals, as well as with longer consultations.
		Working class parents are more likely to trust educationalists and also allow their children freedom to construct their own activities in leisure time. PJM Lower agreed	
		Middle class parents who choose to send their children to inner-city or social mixed schools, continue to work to protect their children from any negative effects.	
		A policy climate which favours the 'active consumer'	
		Culture of supporting 'responsive' services and capacity for street level bureaucrats to exercise discretion	
		Middle class service users tend to have higher expectations of service quality	
<i>The middle classes and bureaucrats</i> That the alignment in the cultural capital enjoyed by middle class service users and	The middle-classes are more likely to have social – often professional – networks that enable access to the 'right' information to argue their case (soft, informal	Most bureaucrats are middle class. This can facilitate the development of empathy. It may also normalise middle class modes of discourse and behaviour as appropriate for	Midwives and consultants are likely to offer a better service to patients like themselves.

service providers leads to engagement which is constructive and confers advantage.	understandings as well as harder legal and expert knowledge). Also provides access to knowledge of 'how things work'.	service provider/user encounters.	
	Middle class engagement voiced in appropriate language or backed up with valid evidence.	Black and minority ethnic service users will use their middle class identity to overcome racial prejudice.	Environmental services managers will provide better services for middle class individuals and neighbourhoods as they see their problems as valid.
	Service providers often middle class and pre-disposed to 'recognise' the needs of middle class service users or denigrate the needs of non-middle class (and often Black and minority ethnic) service users.		Head teachers and other educationalists will welcome middle class parents to their school as they are more active.
<i>Policies and organisational processes and the middle classes</i>	The "choice" agenda from the early 1990s onwards has disproportionately benefited the middle-class as they have the cultural capital necessary to take advantage of the choices on offer.	Some policy arenas, for example education in the US and UK in the 1980s, are more amenable to proposals such as choice which benefit the middle classes.	Evidence that – at the very least – social segregation within schools has been maintained, post 'choice'.
That the needs of middle class service users, or their expectations of service quality, are 'normalised' in policy and practice to the extent that policy priorities sometimes favour the middle classes.			
	The demands of middle class service users are recognised as valid, whereas those of	Under-estimation of relative levels of need for service for different social groups.	Resource distribution underestimates need – leading to longer GP

	less affluent service users are seen as a product of deficient culture.		consultations in affluent areas and higher standards of environmental cleanliness. Midwives provide service for a "Mrs Average" like themselves.
	Political parties propose policies that benefit the middle classes in order to benefit from their higher tendency to vote	Level and intensity of inequality relates to nature and extent of social class differences (e.g. class distantiation)	Econometric evidence from the UK in the late 1970s and 1980s that Conservative Governments protected expenditure for middle class services.
		Capacity for interpretation of policy guidelines and exercise of discretion at organisational level	Areas with higher concentrations of high socio-economic status individuals have higher expenditure per capita on education and high-technology transit infrastructure (light rail, trains)
			In diagnosing and treating conditions framed as social, rather than medical in origin, which are more likely to affect poorer groups, health professionals are more likely to use their discretion as opposed to standard treatments.