

Smoke and mirrors: the relationship between research and practice in the UK-proposals for a research and development agenda in social care

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Presentation

This presentation describes the conceptual foundations of a UK-wide research proposal addressing the relationship between research and practice. The proposal coordinates 10 research centres throughout the UK, including the Research Unit at the National Institute for Social Work (NISW) the Universities of Cardiff, Kent, Sheffield, Southampton, Stirling, Warwick, York, the Queen's University (Belfast) and the London School of Economics.

The presentation will revisit some of the conceptual issues in the relationship between research and practice as evidenced in UK debates and will describe a major initiative to address these issues in the field of services to children and families.

The relationship between research and practice in the personal social services in the United Kingdom

The field of Personal Social Services in the UK represents an enormous endeavour. Each year over 550,000 children come into contact with services, and over 1m adults. Expenditure is over £8.5bn and the workforce numbers some 1.25m people (equivalent in size to the UK engineering workforce). Major changes in the organisation and principles of social care have been underway since the early 1990s, and the current administration is undertaking further, radical change. The rebalancing of the public and private provision has been especially rapid in the PSS, making for particular challenges in developing evidence-based practice.

Current political debate about the role of the public sector is strongly evocative of the distrust that characterised the late 1980s and early 1990s approach to local government. The characterisation of public service employees as 'budget maximisers' and the call to import commercial business practices (see Dunleavy, 1985; Dunleavy and Hood, 1994) suggested that the public sector workforce was essentially unconcerned with the well-being of the people it served. In this approach, evidence about the effectiveness of services may be seen as immaterial to the interests of public sector employees, and managerial, rather than professional solutions were required. This is currently echoed in the Prime Minister's concern that the public sector lacks flexibility to engage with 'modernisation'.

Given the scale, the changes, the pressures and the political interest it would be expected that research would be well established as one of the driving forces of practice and policy. In a limited number of areas this is the case.

The area of criminal justice, for example, has links between research and Government youth justice policy, and between research and probation practice. In England, the Home Office has developed an innovative programme to promote evidence-based policy and practice. Research underpins the Crime and Disorder Act 1998, and the creation of the new Youth Offending Teams, and the Probation Service has established a substantial *What Works* initiative. Policy under the Act is, in part, being developed via research, with for example, The University of Sheffield being engaged in a major Home Office evaluation of the Youth Offender Teams created by the Act (YOT Evaluation Group, 1999). Scotland has also shown significant links between research, practice and policy in this area.

But criminal justice social work and probation policy stand out from the other areas of the personal social services, where links are in general not as strong at a policy level, and notably weak at a practice level. Child welfare for example has reasonable Government policy links, but weaker agency policy ones, and even weaker direct practice ones. Disability studies has some better direct practice links, but weak agency policy ones. This variable pattern, with a lack of good, strong consistent links is repeated throughout the Personal Social Services.

Despite a reasonable body of relevant applied research, the field lacks a tradition of research-based policy and practice, and has not developed a critical mass of research-proficient practitioners and managers. In some quarters, there has been a reluctance to accept the value of research-based evidence. Research suggests that, in formulating intervention, staff rely predominantly on experience rather than systematic data about what is effective (Balloch, McLean & Fisher, 1999). Supervision of staff rarely supports research use in the first, formative, year after qualification (Marsh and Triseliotis, 1996), and it is unlikely to improve much beyond this period.

In addition research development is fragmented and not well-funded (in comparison with health research), and this has obstructed the creation of scientifically credible bodies of research relevant to both national and UK-wide agendas. Pulling together the multi-disciplinary data is often difficult, and itself may require a practice-driven agenda as we outline later. In the meantime it is important to note that at least one area stands out as seriously lacking research endeavours. Economic data is particularly scarce, inconsistent in availability, quality and interpretation between sectors and between agencies, and rarely used coherently in decision-making.

The slow development of research informed practice and policy

Why has the progress of research-informed practice and policy been relatively slow? In common with a number of other fields where evidence-based policy and practice is under development, the personal social services is characterised by:

- (a) serious disagreement and limited debate about the nature of good practice;
- (b) weak agreement on the characteristics of appropriate evidence, on professional, epistemological and methodological grounds;
- (c) poor understanding of the process of applying evidence, arising for example because of disagreements on the relationship between policy, practice and research, and compounded by a demonstrably poor track record in applying research findings, even among qualified staff and their managers;
- (d) a workforce with a diverse range of qualifications and educational backgrounds.
- (e) regulatory frameworks governing the qualifications and licensing of personal social services practitioners are only recently becoming established, adding further turbulence to the development of research-informed policy and practice.

All of these problems could to greater or lesser degrees be overcome, but the development work to do so has been almost totally absent. Indeed the work that has been carried out has often been simplistic, assuming a powerful and direct connection between better research dissemination and the implementation of research in policy and practice. Equally problematically, some development ideas have been borrowed from other fields, notably Health, with suggested application in the Personal Social Services despite major differences in professional work and control, the increasing involvement of PSS users in knowledge creation, and the wider methodological repertoire of the social sciences.

It is time to develop the basis for research-informed policy and practice, and to analyse carefully the nature of scientific knowledge for the PSS, the relationship between research and practice, and the impact of changing service models and new regulatory frameworks. The sections below cover these areas and describe key issues that need to be addressed or developed as part of an integrated research and development programme for the PSS.

Scientific knowledge for personal social services professions

Five key developments need to be addressed.

1. Developing consensus about the appropriate scientific basis for knowledge — where agreement on the qualities of appropriate evidence is regularly challenged on professional, epistemological, and methodological grounds.
2. Incorporating appropriate economic data and thinking — at a stage when research evidence is relatively limited.
3. Developing a practice-driven agenda — when there is little history of a strong practice or policy voice driving research agendas.
4. Developing service user involvement in the creation of evidence based practice — when there are powerful claims for such involvement, but little organisation framework.
5. Incorporating lessons from international experience — in the context of the relative parochialism of current evidence bases.

The research agenda for the personal social services currently lacks coherence and relevance to practice. Central government and other funding agencies have not developed national initiatives to tackle this, and there is no unifying social science professional body to bring the work together. The most recent review of the field dates from 1994, and is primarily concerned with funding strategy and the relationship between stakeholders rather than with substantive content (Department of Health, 1994). Specifically, practitioners have not been identified as a primary source of information about research priorities.

What practitioners identify as relevant knowledge needs to refine concepts of scientific value. Users need a say in determining the research agenda. Research training guidelines, critical appraisal and implementation skills for the personal social services, all need developing.

Reshaping the relationship between research and practice

Development work under this heading needs to examine in detail the ways that knowledge may be best accessed, with a focus not just on methods of delivery, but also on training those who need to access the knowledge, and those who create the knowledge. It should build on work on the practice-driven research agenda and examine the way that the practice and policy worlds need to inter-relate in the delivery and creation of research-based knowledge. Delivery, critical appraisal and the creation of knowledge form three key areas as follows:

- Delivering research-based knowledge — in ways that will enhance the likelihood of its use in a situation where there is minimal organised framework to do this, and where there are substantial sections of the workforce without professional level qualifications.
- Developing critical appraisal skills and expertise in implementing research amongst practitioners and managers — in ways that they can see as directly relevant to their service delivery role.
- Providing an educational and training curriculum to produce personal social services researchers at the doctoral level — in a manner that will be relevant to evidence based practice.

Delivery of knowledge, and priorities for knowledge, need to relate substantially to the world of practice. Work therefore needs to be undertaken, such as that in the Research in Practice programme (Research in Practice, 1999) and in the University of Cardiff Research Support Unit for Health and Social Care, to provide a framework for systematic reviews to be influenced by practice, and the resulting reviews to be properly field tested.

A key obstacle is that the field is characterised by low levels of research expertise amongst practitioners and managers, so that issues may not be conceptualised in researchable terms. The work would therefore need to explore the influences on the research agenda of the presence of practitioners trained at post-qualifying level, practitioners trained specifically in practice research, first line managers trained in research implementation skills and of the presence of a majority of unqualified staff in some aspects of the personal social services. It

may be important to understand whether post-qualified staff can offer the leadership required for the modernisation of the social care workforce. Such an understanding could be generated by building, for example, on the work at Queens University Belfast, which provides an ideal test area where forty per cent of the qualified PSS workforce are in Post Qualifying programmes.

A training curriculum for doctoral level researchers is also needed, and should be devised in the light of the answers to the key questions addressed in the overall development of research-informed policy and practice.

The impact of changing service delivery models and the developing regulatory environment on evidence-based practice in the UK

In the current context of changing service delivery models, and increasingly diverse regulatory frameworks, we need robust models of research-practice development that have the minimum level of dependence on particular delivery models or particular regulatory frames.

Evidence based practice in professional settings needs to be relevant to, but not dependent on, both the service delivery model employed, and the regulatory framework. This issue, in the PSS, is different in the four countries of the UK.

Work needs to be undertaken to explore the implications for professional knowledge of nascent regulatory structures in each of the four countries, including the new licensing and training organisations in social care. This should clarify, for example, what different levels of knowledge are required at different levels of licensing and qualification, and what knowledge requirements will be stipulated prior to periodic re-registration. In this way greater research-based knowledge can be brought to bear on policy decisions made by the licensing and training organisations.

Differences in service structures also need to be explored. The greater formal integration of health and social care in Northern Ireland, for example, may have implications for the knowledge requirements of practitioners, while the reformulation of criminal justice, particularly in England and Scotland, may act as a demonstration of the need to create a multi-disciplinary knowledge base crossing former agency divides. In Wales, the creation of a new structure for health and social care research by the National Assembly has the potential to change the relationship between research users and researchers, while the division of local government into sometimes very small entities may bring difficulties in generalisability and dissemination.

Conclusions

The Personal Social Services are a crucial area for development of research-informed policy and practice. The weak development so far is attributable in large degree to failure to address some key questions relevant to research-informed policy and practice in the area. We need to pay detailed attention to development work that will address the conceptualisation of scientific knowledge, the relationship between research and practice, and the appropriate recognition of changing service delivery models and regulatory frameworks.

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A NOTE ON LANGUAGE

We have used the terms ‘practice’ and ‘policy’ in a variety of ways in this paper. If they are not qualified, then ‘practice’ is intended to mean the day to day service activities of those engaged in the Personal Social Services, whether politician, director, manager or practitioner. ‘Policy’, used without qualification, means the overall framework and guidelines within which the service activities take place, within which the services develop, and it includes both Government and agency policy. When we intend ‘practice’ to mean specifically the work of a practitioner dealing directly with a service user we refer to ‘direct practice’. When we intend ‘policy’ to mean specifically Government, or specifically agency policy we add the relevant qualifying term.

The term ‘practice-driven agenda’ is perhaps a special case. We intend this to mean an agenda driven by the ‘the day to day service activities of those engaged in the Personal Social Services, whether politician, director, manager or practitioner’, but of course such an agenda sets the frame, at least in part, for policy development. In that sense ‘practice-driven agenda’ could be written more clumsily as ‘practice-driven agenda to be used directly in developing the policy agenda’.