Reviews

Exploring Concepts of Child Wellbeing: Implications for Children's Services

Axford, N.
Bristol: Policy Press, 2012, pp.272
ISBN: 978-1447305859, £19.99 (pbk.)

Many professional disciplines have jargon unique to them; a complete dictionary of phrases and meanings which are job-role specific. But what happens when disciplines overlap? When professions share some common technical language and also rely on everyday phrases to convey complex meaning? Professionals who work with children are in just this position in relation to 'child wellbeing'. Nick Axford's book, *Exploring Concepts of Child Wellbeing: Implications for Children's Services* unpicks the definition of child wellbeing in a strong mix of theoretical constructs and evidence based research.

Axford's book, based on his PhD thesis, follows a logical progression – defining child wellbeing, exploring the different professional 'lenses' through which wellbeing is assessed and measured, and then reflecting the implications of his findings for children's services. In reviewing this work it is important to establish the author's intended audience or audiences – Axford informs us that he is aiming at those who make individual level decisions about '*the need and desirability of intervention*' and also those who are responsible for '*how resources are distributed*' (page vii). So, an audience of practitioners, managers and politicians – a wide audience indeed (even without including multiple agencies). Despite accessible language, in my view, the structure of the book sometimes struggles to fully reach elements of that broad audience.

The five concepts offered as constituent elements of understanding and measuring 'wellbeing' (needs, rights, poverty, quality of life and social exclusions) are, however, well explained in Part 1 of the book. Axford

explores the political and legislative forces which influence the need for social care, education, health and related professionals to identify, assess and provide for the complex needs of a child and his or her family. 'Quality of life' is particularly well defined, and the inherent subjectivity of assessment acknowledged. Given that Axford is striving to reach practitioners as key members of his audience, a helpful additional dimension to the theoretical discourse would be case examples to illustrate the application of theory to the delivery of services and subsequent impact on children's lives. This illustration is very successful during the reporting of the research findings, where case examples positively remind the reader of the 'real children' involved in assessing 'child wellbeing'; and a similar approach in the analytical chapters would significantly increase accessibility.

Analysis of needs-led service delivery (e.g. pp.142-143) is argued well, and successfully challenges traditional service provision models. This is followed by robust theoretical explorations of the concepts of upholding rights and tackling poverty.

Two further strengths of the book are the comprehensive literature review and the thorough description of the research methods used in Axford's chosen evidence base: a study of children and families, primarily on an ethnically diverse inner-city housing estate in a London borough. However, though welcome detailed results are given, the interview schedule used in this research is not included in the book. The latter approach reflects current increased emphasis on using empirical, tested evidence in informing policy and practice decisions, both on a national level (for example in the rigorous evidence base behind the Health and Social Care Quality Standards produced by NICE), and on a local level, exemplified by judges expecting comprehensive evidence-based court statements. A minor disappointment is

that the research data are from 1998 – 2003, and the literature review ends in 2006. With a publication date for the book of 2012, these choices risk it being seen as outdated. This is particularly important as the 'implications for children's services' are continually influenced by external forces, such as changes in government (and associated) policy, and increased learning regarding types of abuse and exploitation (e.g. child sexual exploitation), which can affect how we view 'child wellbeing'. Further, the research sample is small (689 children and families) and acknowledged as not representative of England and Wales; subsets within it appear questionable (for example, a very small percentage of potentially troubled children with a recognised mental health problem).

The joyful expression of life, depicted with coloured filters on the cover of the book, and representative of the author's description of the 'lenses' through which we view child 'wellbeing', highlights that most children have a positive experience of childhood, inconspicuously supported by universal services. However, 'ill-being' necessarily takes the focus in protection work, both at a policy and practice level, and therefore dominates the discussion in the text, drawing out the impact of neglect and abuse, and perhaps inadvertently skewing the balance for a backdrop of universal service delivery.

In my view, this book has earned its place as a valuable social care text. However, to better fulfil its second aim of highlighting implications for children's services (and thereby influencing service delivery and outcomes for children), the production of an executive summary including apt case examples would widen audience appeal and strengthen the impact of the key messages. A recent example is a six page summary of work by ONS on children's wellbeing: this has been distilled to a level that busy practitioners will read, yet is still evidenced by background research and has hypertext links to technical documents[1]. In such a summary, all of Axford's five concepts (and their role as useful 'lenses' with 'which to

view and understand child wellbeing', p.183) would need to be sharply in focus, as he argues, so that policy makers, managers and practitioners can use them all to refine service delivery and improve outcomes for children.

Reference

[1]   Beaumont, J. (2013) *Measuring national wellbeing: children's wellbeing*, accessed at: www.ons.gov.uk/ons/dcp171766_304416.pdf

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Transition to Adult Services and Adulthood for Young People with Autistic Spectrum Conditions: Final Report Working Paper no: DH 2525

Beresford, B., Moran, N., Sloper, P., Cusworth, L., Mitchell, W., Spiers, G., Weston, K. & Beecham, J.
York: Social Policy Research Unit, February 2013, pp.193
ISBN: 978-1-907265-20-4

Available   as   a   download   from: http://php.york.ac.uk/inst/spru/pubs/2371/

This research was carried out in five English local authority areas. The localities were self-identified as having developed proactive multi-agency transition planning services for young people with autistic spectrum conditions, so providing a basis for case-studies of services which were presumably beyond a minimum level. The research followed an earlier study of disability and complex health needs in some of these localities, but was not itself longitudinal.

68 managers and practitioners were interviewed: about two thirds of those approached, with education staff the largest group (14) followed by 8 from non-statutory ASC (autistic spectrum conditions) organisations and 7 from Connexions. An intended counterpart to the organisational

studies, on experiences of transition by parents and young people, and the costs and outcomes for young people, suffered from low response rates (25% and below) and lack of financial data, despite the researchers' 'persistence'. Fieldwork was undertaken in the summer and autumn of 2010, when the Act was new and the Strategy unpublished. Administrative difficulties did not help, including practical issues such as one agency's failure to send documents to their service users with the correct postage.

Of those family members interviewed (36 from 67 eligible), most (30) were mothers of young people with autistic spectrum conditions (ASC), High Function Autism (HFA) or Asperger's Syndrome (AS).

Young people with ASC, with and without learning disability, were investigated in terms of the different support mechanisms that exist; and the common needs of both groups were examined – needs that cannot be met by learning disability services on their own. How the young people had coped with this pre-transition stage was conveyed through the voices of the young people themselves, although high functioning autistic young people and those with Asperger's Syndrome were predominant. The voices of young people with both ASC *and* learning disability were not really represented: this is a weakness, as those with learning disability can in practice self-advocate to some degree.

Common issues (as in previous research) include the lack of advice to parents of young people with ASC during transition, a lack of local options - especially post-school, a lack of meaningful daytime opportunities; a lack of transition support workers with the specific skills to deal with complex transitions and work closely with families. The five transition services in the study showed examples of some things done well, and of instances where services could learn from each other. Three services had produced Transitions DVDs, giving information for families and young people. Nevertheless 'Information sharing across the sample of

managers and practitioners appeared to be dependent upon personality rather than research site, role or agency' (p.69). The five services were markedly different from one another in respect of young people with HFA or AS, for example in service eligibility, and in types of support offered, such as outreach. There were fewer service differences for those young people with learning disability who also have AS.

From a largely qualitative study one is not surprised that 'personal experiences, individual circumstances and the individual practitioners involved with the young person seemed to have a greater impact rather than wider authority policies or practices' (p.73).

Positive and negative examples were cited by parents in factors in planning for leaving school - having a key contact; timely inclusion of transition planning in annual reviews; a reliable transfer of discussion to action; feeling informed and advised about suitable post-school options; services working collaboratively; schools actively preparing the young person; the post-school options available; school exclusion. Overall, about two thirds of parent respondents were not satisfied with the transition support they had received. Looking at those students entering college, it appeared eight of the 13 who had left college had not proceeded beyond their first year.

Direct transfers of responsibilities between different services appeared problematic. A minority of ten parents reported some social care (children's or adults') support, and five a direct transfer of support from children's to adults'. Their experience of the transfer was predominantly negative. Issues were: the loss of a 'key worker' role; the shift from proactive to passive service support; the unsuitability of care environments in adult services; and identification of mental health as the main need.

Autism strategies are being developed locally. At the same time, and noted in the report, the Connexions service has been closed – though,

as reported, its provision was very variable. The overall policy picture conveyed is that there are complex challenges, but suggested responses could include low-cost solutions, taking cross-agency views on cost-effectiveness, low intensity support to parents and young people, and more creative and longer term person-centred planning.

Writing myself as a parent of a young person with ASC and learning disability who has suffered from poorly planned transition, I see real strengths in this report which struck many chords. The quotes from the young people themselves cite special problems, that need thought-out solutions. All learning and motivation is linked to our emotions, and changes should happen at the young person's pace, with less pressure on achieving all markers. The research explores transition to a new placement. In evidence to the All-Party Parliamentary Group on Autism the Royal College of Psychiatry suggested the appropriate transition strategy was to build up familiarity with new people and a new place, before staying on a trial basis[1].

However, my son's experience supports the claim by a residential school to the same Inquiry that 'It is impossible to enable a successful transition if placements are decided at the last minute, (or even later!)'[2]. Another issue mentioned in the research is college breakdown. Being able to attend college one day a week prior to full time college attendance could reduce the likelihood of this, as suggested by a parent to the All-Party Group. Partnerships between schools and colleges could be encouraged, with planning from age 14; and I would like to see working examples, prompted by this study, as commissioners need examples to develop better models.

Comments in this study from the young person who was 'not ready to fly the nest', and from those who want normalising experiences, and/or want continued parental support, in my experience also apply to those with ASC and learning disability. My son enjoys going bowling, to the cinema and to restaurants, along with peers with ASC and learning disability, together with same-age peers without ASC, who are actually support workers.

I look at this report, in conjunction with the Autism Act 2009 and Autism Strategy 2010, and feel that we have good enough research evidence to prevent many crises in young people's lives that drastically affect outcomes for them, their families and public expenditure. Informed action is now the imperative.

References

[1] Allard, A. (2009) *The All-Party Parliamentary Group on Autism: Transition to Adulthood - Inquiry into Transition to Adulthood for Young People with Autism*, London: APPGA, p.5.

[2] ibid, p.5.

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Critical Perspectives on User Involvement

This comprises contributions from academics in the field of research into health and social care issues and from 'service user activists'. The 37 named contributors include seven who identify themselves as service users, and 22 who are associated with universities. The book was prompted by a conference, held in Brighton in April 2009 and thus before personalisation policy had taken root. There is a general introduction and five page linking introductions by the editors, which supplement the 18 chapters by contributors. There is a brief, mainly autobiographical, conclusion by the editors.

The book represents an attempt to provide a stock-take of the state of service user

involvement, though its orientation is firmly to adults and to health care; and claims that it has moved 'from margin to mainstream'. The term 'service user involvement' is 'used to describe processes where the views and priorities of service users inform the delivery of services and/or research' (p.57). The book could therefore be seen as filling a gap: user involvement has been argued for and discussed over the years with relatively little theoretically informed critical engagement with the available empirical evidence. (This same general point was being made 20 years ago in the pages of *Research, Policy and Planning*, reporting on a study of Hampshire Social Services[1].) It is in three parts, with the first giving a potted history of service user involvement, and briefly describing a number of distinct service user movements. The subjects range from the local (Nottingham Advisory Group – mental health service users) to cancer services, via Shaping Our Lives – a national service user controlled network and organisation. The contributions are from those active in the various organisations, and tend to be brief narratives plus concluding reflections.

A more productively critical perspective would have been generated by inviting contributors to develop and differentiate the acknowledged elements of service users' experiential knowledge, addressed only at the end of this first part, in Chapter 5, and later in Chapter 11.

In the second part of the book there is an examination of 'user voice' within service delivery, and how it could change the status-quo within services. This again is quite selective, and omits any mention, for example of experts by experience – service user participation in inspection activity in health and social care. This part too tends to be descriptive. Those responsible for the Wiltshire Service User Network, draw for example on its annual reports to supplement their personal narrative. There are exceptions, though. Chapter 9 offers advice, based on a leadership development programme, on employment practice with people who have

used mental health services. That is, practice if they are engaged to undertake recruitment of staff, training, service monitoring and evaluation or service user-led research, where according to the authors 'the usual professional considerations should be applied' – though 'with additional respect for and sensitivity to the experiences that have led to their service use and involvement activity' (p.116). However, this part of the book skirts the most fundamental point. This must be the acceptance by the established social services of the fact that there will be a lot of negative experience of these services as delivered. (A contribution on NHS service planning, development and evaluation by Staniszewka *et al*. in Chapter 10 does provide evidence on this point in drawing on a systematic review of literature.) In order to change and adapt to personalisation, established services are necessarily going to have to learn and cope constructively with criticism of negative experience. The very nature of personalisation is dynamic, so for instance, what may be considered an outcome by a professional is not necessarily considered an outcome by a service user, still less a positive outcome.

The third part of the book (81 pages) mostly provides a snapshot of research, though with two chapters on the impact of involvement in research.

All of the research cited and described in this part of the book is participatory, mainly small-scale research. It ranges from young mothers, and young people in public health research, to local Age Concern collaboration with the University of Brighton. This type of research can often be mistrusted by service users, as it pays lip service to the issues that they face day after day. This is because the service users are typically given minimal input into the design, the ethics and methodology of the research. The research enquires into the what, when and where of particular issues and processes, but not how the issues make the service user feel, or affect their daily life. This in turn reflects differential power relations in research, which

are not extensively analysed in this part of the book, though touched on, for example, in Staddon's contribution (Chapter 16) on her own research in the NHS on women's alcohol use and its treatment. This includes a criticism of research publication criteria imposed by the local NHS funder. This part also raises wider issues about involvement policy. Should there be attempts to measure the impact of service user involvement? Chapter 17, based on the experience of Folk.us in Devon, cautions against ascribing measurable content to the different activities, within different contexts, that constitute 'involvement'.

One must ask: who is this book aimed at? If the readership is to be health practitioners and social work managers or practitioners, then it should carry a caveat, as this part of the book mainly concerns health research. Similar considerations apply if, as the publisher asserts, the book is aimed at social work students and presumably their teachers. In this situation it should not be used in isolation, but with additional and more recent social care material, for example, on children and young people's involvement, and derived from publications of the School for Social Care Research. The wider context could also draw from some examples of participatory research in related other fields, for example in using an advisory group of service users. (For instance, Lewis, A.L., Davison, I.W., Ellins, J.M., Niblett, L., Parsons, S., Robertson, C.M.L., Sharpe, J. (2007). The experiences of disabled pupils and their families, *British Journal of Special Education*, **34**(4), pp.189-195; Porter, J., Parsons, S., & Robertson, C. (2006) 'Time for review: supporting the work of an advisory group', *Journal of Research in Special Educational Needs*, **6**, pp.11-16.)

If the book is aimed at a service user readership, as opposed to the publisher's 'service user activists', then it is fundamentally flawed. To a service user such as me it is patronising in tone and heavy with jargon, and the limitations of its origins in an academic conference are all too clear.

Perhaps, to be more positive, before another 20 years have elapsed *Research, Policy and Planning* will carry another article on service user involvement *after* personalisation, reflecting changed patterns of research design, execution and communication styles.

Reference

[1] Lupton, C. & Hall, B. (1993) 'Beyond the rhetoric: from policy to practice in user involvement', *Research, Policy and Planning*, **10**(2), pp.6-11.

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Residential Care Transformed: Revisiting 'The Last Refuge'

Julia Johnson, Sheena Rolph and Randall Smith have written a lovely book from a great study. They revisit Peter Townsend's (1962) classic *The Last Refuge: A Survey of Residential Institutions and Homes for the Aged in England and Wales*. Townsend set out to question the future of residential care through a comprehensive study largely based on visits to residential providers and residents during the late 1950s, supplemented by national statistical information on homes and institutions in England and Wales, interviews with 65 chief welfare officers in local authorities, and reports and diaries kept on the experience of working or living in a handful of homes. This was the most significant study of social care at the time in the UK. Many years later the study data were deposited in the UK Data Archive. In revisiting the data Johnson and colleagues set themselves some important research questions:

- What kinds of homes are able to continue to function from one decade to another?

- What events have precipitated closures?
- As one generation of residents and staff succeed another, what kinds of adjustments and adaptations help to sustain continuity?
- And why do policy makers and members of the general public remain ambivalent about care home provision?

These are important questions: not only because of their academic originality, but also because they encourage debate and a much needed wider perspective to the policy noise that often surrounds social care for older people.

Residential Care Transformed is organised into three parts. Chapters in the first part describe Townsend's original study, the historical and changing context of care. The authors are keen to point out that the study revisited Townsend and did not seek to replicate. The approach was unique, and drew on a team of some 100 volunteer researchers to trace the original care homes from Townsend's sample of 173 homes.

The analysis presented in part two of the book thoroughly compares and contrasts the findings over the past fifty years. Five chapters explore the characteristics of the 37 surviving and the non-surviving homes, the people who lived and worked in the homes, the living environment, people's daily lives, and care quality.

A lot of attention today is focused on the operation and development of care markets. The book provides valuable insight into how these markets are developing in the long term, and comments on their limitations. By tracing the original homes we learn about the factors shaping survival - only one in four homes survived from Townsend's study. Those homes that tended to survive were largely run by voluntary sector providers.

Readers familiar with residential care today will recognise the changing demographics of both residents and staff described in the book. Residential care offers more personal and complex care than in the past and this is changing the nature of residential care and those who work in it. So too is the business of social care changing traditional job roles. Managers today, for example, spend less time providing frontline care than they did in the past, and much more on administration and business activities. Interestingly some of the trends in provision are leading to a more institutional feel for residential care than in the smaller private and voluntary homes of the past. Similarly, insights are given into how the built environment, space, rules and routines have changed considerably. Homes are much more accessible; but they have grown larger, employing more staff, with attention to factors such as health and safety, and this book suggests that some of the homeliness and informality of earlier residential care is being lost.

Chapter 8 describes applying Townsend's original measure of quality and the published judgements of the regulator (the Commission for Social Care Inspection) at the time of the revisit in 2005-6 to 20 of the 37 surviving homes. It is clear that the quality of care has generally improved over the last 50 years. However, some of the inequalities and restrictions on everyday activities that Townsend identified still persist today. The authors are justifiably cautious about there being evidence of a substantial improvement in residential care over the last 50 years.

In part three of the book there are two strong concluding chapters. The first reflects on methodology and approach, including research governance issues and the use of photographs of residents. The second focuses on the findings and the implications of the study, in juxtaposition to other recent research on residential care for older people. Overall the messages in the book present a mixed picture of the state of residential care in England and Wales. But the current text is much more positive about residential care than Townsend's original study. Indeed, Townsend started with the question 'Are long-stay institutions for the elderly necessary in our society, and, if so, what form should

they take?' (p.3) Townsend used photographs strongly in order to support his critique. 18 of his 31 black and white photographs were of former Public Assistance Institutions (PAIs), though these constituted only just over one quarter of the homes visited. The use of photographs from both study periods is vividly illustrative of the constantly changing world of social care.

There is no book like this, and there is lots here for providers, commissioners, policy makers and those interested in the lived experiences of people using care services to draw on and reflect upon. The book is well written throughout and takes the reader on a journey; in part historical yet contemporary in analysis. In the intervening year between hardback and paperback publication the book won the British Academy's Peter Townsend Policy Press Book Prize. And quite rightly so. It is an excellent book and I commend it.

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Understanding Research for Social Policy and Social Work: Themes, Methods and Approaches

Becker, S., Bryman, A. & Ferguson, H.
Bristol: Policy Press, 2012, 2ⁿᵈ edition, pp.430
ISBN: 978-1847428158, £24.99 (pbk.)

Social Research Methods

Bryman, A.
Oxford: Oxford University Press, 2012, 4ᵗʰ edition, pp.766
ISBN: 978-0-19-958805-3, £33.99 (pbk.)

With over 80 contributors this second edition of *Understanding Research for Social Policy and Social Work* (hereinafter Becker *et al.*) is much expanded compared with its first, doubling its number of contributions. It is published in association with the Social Policy Association, though little is made of this link in the text. It also shares an editor (Bryman) with the author of a major text book explicitly for social science students, which is now in its fourth edition.

This review (of Becker *et al.*) concentrates on those parts most related to social services policy and social work, though *Social Research Methods* (hereinafter Bryman, with 766 pages, compared to 430 pages of Becker *et al.*) often has more extended treatment of specific methodological topics. It also addresses some of the newer issues raised in student research.

The seven chapters of the structure of Becker *et al.* form a logical sequence. First research and evidence for social policy and social work, then ethical conduct and research practice, followed by formulating research ideas – though ethical conduct might seem important in formulating ideas too.

Chapter 4 provides a route through methodological issues and debates, followed by separate chapters on quantitative and on qualitative research. Chapter 7 concludes with a discussion of research impact and knowledge transfer. Further reading is included within each of the many subsections of chapters. Within the chapters there are numbered sections, and within those sections there are often text boxes (by different authors) on specific topics. The general index copes quite well with this ordering of material, omitting some name references apparently only in Chapter 6; but the layout encourages dipping in rather than extended study. It is only a step from an electronic text with active hyper-text links. Perhaps the next edition?

For content, the academic or practitioner reader might expect textbook material to be accurate, authoritative, up to date and non-polemical. These requirements are generally met, though there is no mention of the Mental Capacity Act and its implications in the chapter on ethical conduct, so the box on gaining informed consent and other elements of the section, and box 4h in Chapter 4 need to be amended. (The issue is similarly absent from Bryman.) The national Social Care

Research Ethics Committee is discussed, in a box by Pahl, and it is regrettable that the different box illustrating confidentiality in research practice is written solely by researchers who undertook research on babies through children's social services, from the early part of the last decade – research which was not without unacknowledged design flaws, as well as having to run the perceived and criticised gauntlet of ethical approval. The claim that compliance with the approval process is becoming increasingly complex and prolonged rests upon a citation from a member of the same research team. One of Bryman's student examples (p.145) goes further, and illustrates deliberate avoidance of NHS ethics procedures in a study of childhood vaccinations, by approaching instead self-help organisations where there was apparently no formal process of assessing the ethics of prospective research.

A more general limitation in Becker *et al.* is that of space, with text in bite-sized chunks of two or three pages, and the bibliographical listings almost as long as the relevant texts. Bryman's publisher has provided an array of online additional material for students and supervisors – podcasts on specific projects, and checklists of what to do and not do in your research project. These are of course scripted, but do give a real-life flavour sometimes lacking from the more austere Becker *et al*. The latter is not so exclusively focused on student research: its section on researching within a budget ranges widely over major funding sources, which might look askance if asked to fund some of the student projects described in Bryman.

The conduct of research within and by local councils and third sector organisations is another lacuna. Research for these authors is an academic activity. The handful of pages in Becker et al's Chapter 4, on user involvement in research, encapsulate the limitations. A couple of pages by Beresford include the worthwhile point that questions and challenges to user involvement and user controlled research in particular should be put to all research. Four pages later Sempik summarises arguments and counter-arguments about the value of user involvement, and concludes with the somewhat rhetorical question: 'Are ideological reasons sufficient for involving users in the research process or should it be based on evidence that shows it improves the quality of research?' (p.153)

In the core chapters on methodological issues and approaches examples are predominantly from areas of social policy. The initial extended example of qualitative research in social work is from New Zealand. In contrast the two pages on practitioner research, by Shaw, poses fundamental questions about fluid boundaries between social work research and practice, and he observes almost in passing that practitioner researchers seem rarely to directly involve service users – both groups similarly at risk of marginalisation from the academic mainstream.

In Becker et al's chapter on quantitative research, a leading example is provided by Baginsky's vivid description of the use of time diaries by (children's) social workers across the statutory, private and voluntary sectors, in gauging their workloads for the Social Work Task Force. This research included the decision not to use a web-based instrument, based on earlier negative experiences. (Becker et al's de Vaus is guardedly positive about the use of internet surveys in his contribution about 8 pages earlier in the book.)

The chapter on qualitative research, at 87 pages, is the second longest in Becker *et al*. The equivalent is 232 pages in Bryman, which has in addition two thoughtful chapters on mixed methods research. Both in effect acknowledge the well-reported skew towards such research among those undertaking research in social services and perhaps by students. The contributions to Becker *et al.* are resonant, if brief as required by the format, in covering the diversity of techniques and relevant literature. Website resources become mentioned more frequently, though examples of social work research are few and far between here.

Knowledge transfer examples, in the final chapter, do redress the balance somewhat, with a particularly graphic account by White of a study of the Integrated Children's System in children's social care. She concludes 'You must be willing to put your head above the parapet, secure in the knowledge that your findings are robust. You must be prepared to publish outside of the academic mainstream and to contact key individuals directly...' (p.380)

Both of these weighty books have merit as text books for their respective audiences, though they both capture only a proportion of the understandings necessary to strengthen student and non-student research in social services and social work.

It might be worth recalling that Research Governance leads in 27 councils in England commissioned work from Bangor University a few years ago specifically to strengthen their ability to *review* social care research methods in projects submitted for approval. The results were subsequently made available as a training manual[1].

Reference

[1] Iphofen, R., Krayer, A. & Robinson, C.A. (2009) *Reviewing and Reading Social Care Research: from Ideas to Findings*, Bangor University.

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