

Some reflections on social care research: joys, tribulations and aspirations

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Abstract

Social care researchers, like their colleagues in other fields, are generally too busy investigating the needs and concerns of others to turn the spotlight around to consider their own activity. But it is a useful exercise, from time to time, to reflect on the impact of the research task on researchers themselves and on others involved in the research process. This paper does not pretend to offer any new evidence on these issues, but it may help those working in social care research to take stock and gain some insight into paths they might usefully explore.

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The joys

To begin on a positive note, social care researchers have much of which they can feel proud. Over the years, they have sought to respond to the enormous, complex and increasingly prevalent needs of individuals and their families, as well as wider communities. In a world where the news in social care is often bleak, with great pressure on resources and growing expectations on all sides, the role of research has proved highly important, and potentially of greater influence than ever before. New policies or practices have been introduced in some areas, creating a need for evidence on their actual impact. In addition, for some user groups, there are growing numbers of people needing care, for instance of older people with personal care needs or cognitive impairment, necessitating research attention on how best to meet such needs. The results of countless studies have enabled governments of every hue to develop policies more wisely and in ways that reflect the genuine needs of those seeking care. The numbers in need, the specific nature of the needs of both service users and those who care for them, the efficient and effective use of resources have all been highlighted through the efforts of both quantitative and qualitative social care researchers.

From the perspective of researchers themselves, doing social research is often stimulating, even fun. This is not a frequently noted aspect of the research endeavour, but should not be forgotten. Researchers may enter this field seeking a challenge, and in the social care world they are rarely disappointed, for there are few easy research questions or simple policy or practice solutions. The skills needed to undertake research are considerable – from the ability to obtain information (whether by in-depth interview, focus group or in other ways to generate primary data, or by seeking out sources of extant knowledge), analyse such evidence and then write it up in a readable style for dissemination. In short, the process of undertaking research involves a great deal of day-to-day learning, not always transferable from one study to another. Often working with colleagues in the same or other disciplines, there is also the satisfaction of finding agreed understandings. And there is also a special pleasure from doing research into problems which are genuinely important to people's lives.

The tribulations

But research is not always a bed of roses. First, many social care researchers experience real problems arising from the nature of their

job. Their status within their employing organisation often tends to be low. Many work alone and have few people to whom they can go when they need advice or help. Even those working in an ostensible team may have full responsibility for one aspect of a joint task, so that little expert assistance is readily available. Deadlines can be a constant worry, especially when there is slippage in earlier aspects of the planned activity arising from causes outside the researcher's control. And, of course, the jobs of many researchers are insecure, dependent on short-term contracts, so that many experience ongoing anxieties about their own professional or financial future.

In addition, every social care researcher also knows that many obstacles are – unwittingly or otherwise – put in their way in the course of trying to do their work. They often work in a context of considerable misunderstanding of the nature of the research process. Regrettably, those who commission such research are sometimes naïve about its inevitable limitations. They tend to want results quickly (often ‘yesterday’) and therefore to resort to funding short-term projects which researchers themselves know cannot reflect the complexity of the issues addressed, or adequately answer the important questions. Some research commissioners think that the answers to their questions are already known if only researchers would trawl existing findings or, worse, reinterpret such findings in ways inappropriate to the nature or location or service user group. More worryingly still, some policy-makers may be tempted to seek research merely to confirm decisions already taken, viewing the process of research more as buttress than beacon.

It can be difficult for researchers to stand up to these demands – or seek to explain why they are inappropriate – when they are dependent on these same individuals or organisations for their future contracts and therefore their employment. This is a particular challenge for a researcher employed in a setting such as a university

where independence, transparency and freedom of expression are viewed as paramount. Many senior researchers know they could double their salaries overnight by setting up the kind of consultancy that gives the customer exactly the results needed to support their business interests or policy aims. Indeed, the research task calls on political skills in which many researchers were never trained and which they may not be keen to exercise.

Social care researchers also face challenges from other sources. People working at the front line of services, who are often asked to assist the research process, can also create obstacles for the researcher. Some local practitioners do not understand the complexities of research design, such as the processes of piloting or randomisation, arguing that it is unethical to include some of the people they support and not others, or do not appreciate that some evidence-gathering approaches such as focus groups are necessarily time-consuming. They may be reluctant to include particular individuals or families in a study on the grounds they are not ‘typical’ or, alternatively, because they are not felt to be ‘up to participation’. In some cases, this may even be from a fear that such people will reflect badly on local provision. With the best of intentions, people working in services may want to alter the wording of questions on well-validated questionnaires, arguing that the wording of long-established, validated tools is inappropriate to a particular service user group or context. Some even continue to question the benefits of asking the opinions of those who use services or their carers altogether. (This does not mean that the researcher is always right, and there are plenty of instances of researchers being deaf to helpful suggestions of field staff, for example, but the process of negotiating a research study can sometimes be enormously time-consuming and frustrating for everyone concerned.)

We cannot discuss the tribulations of undertaking research without mentioning the need for ethical and governance approval.

Each is an essential element for successful research, but each can cause difficulties for the researcher. Indeed, whatever the very reasonable premise underlying current requirements, virtually every researcher has at one time or another been seriously frustrated by the processes. In the social care area, tricky questions can arise over issues such as mental capacity, and it is beholden on the researcher to prepare properly by gaining a clear understanding of the legal framework and how it plays out in a particular empirical study. Where researchers often feel that the right balance might *not* have been struck is when ethics committees or governance leads probe into the planned methods in ways that appear to go beyond their remit or skills. But then those committee members or leads might counter that poorly designed, hard-to-implement research wastes the time of individuals and organisations when it cannot answer the questions it purports to address.

Of course, once research has been commissioned and undertaken, problems can arise with the use, dissemination and take-up of the results. Many a researcher presenting quantitative evidence has been told that 'each individual is different' and it is therefore inappropriate to reduce life's 'rich tapestry' to a set of generalised numbers. Conversely, those presenting qualitative data are often confronted with the view that such information is not based on sufficiently large numbers or is in other ways not representative or robust. Or some of the potential users of a study might challenge the underlying motives of the researchers, for example seeing work that is funded by government as politically motivated. Some people involved in policy or practice seem to be reluctant to use research results at all, and research reports often lie unread by those for whom they were intended. (It might be added that this is sometimes because they are written in verbose, impenetrable style. Researchers also need to remember that busy decision-makers do not have the time to search for journal articles to keep up with the latest findings. Many academic journals are also accessible only to subscribers.) The emphasis being

given today to better access to research findings is very welcome in this respect, although the economics of open access publishing remain challenging.

Equally harmful, the evidence from research reports may be used selectively. Reports may be read, but only to seek out evidence that supports particular policy positions. Carefully worded prose that sets out the methodological limitations of a study may be ignored, whether by accident or for reasons of time or political convenience, with only the headline findings passed on to political masters or wielded in some media release to support a particular argument. As a result, the caveats so commonly necessary to describe and define the robustness of findings are lost. Researchers can end up with ideas or evidence ascribed to them which were never intended or, indeed, written.

Social care researchers can also be met with a blanket distrust of all research, making it difficult to argue from their carefully collected evidence. Some sceptics argue that most such research is undertaken solely for political reasons, such as when an economic evaluation is seen to be simply a means to argue for the reduction of public expenditure. It therefore follows, it is argued, that it would be better not to fund research at all. Some implicitly suggest that research is an alternative to action and, given an inevitable shortage of resources, it is much more important to fund frontline services than 'waste' resources on studies.

There is also a prejudice arising from poorly conducted studies undertaken by those outside their profession. A great deal of quasi-research is carried out by auditors, inspectors, task forces and the like who do not usually refer to themselves as 'researchers' but who nonetheless carry out work that is, to all intents and purposes, identical to that which occupies people who are referred to by that term. Their investigations can frequently be intrusive, poorly designed and poorly analysed. They are often undertaken with absolutely no

ethical approval or independent peer review. (Indeed, some reports from such bodies only cite other reports by similar bodies – or themselves – seemingly oblivious to an evidence base from more robustly conducted research. And yes, it is also true that researchers can be terribly, even pathologically, ‘precious’ about methods and processes, and are often poor communicators of what they have found.) Similar problems can arise with student projects, sadly sometimes undertaken without adequate or skilled supervision – and still sometimes undertaken without adequate ethical review. All such activity, although carried out for well-intentioned reasons, can end up reflecting badly on social care research more broadly.

Aspirations

Given these challenges, what can be proposed to improve the dissemination and, more importantly, the *impact* of social care research? Although much could be done on a variety of fronts, we focus here on actions that can be taken by researchers themselves or by their broader professional organisations.

First, social care researchers need to be alert to the practical benefits that can arise from their investigations and ensure that others – particularly research commissioners, users of research findings in provider or commissioner bodies – are aware of these as well. Whatever the temptation to embark on ‘blue skies’ research with no immediate or obvious practical value (‘because it is interesting’), researchers will find few supporters of such a course, especially in the current economic climate. Research proposals should – and normally do – seek to identify the likely practical outcomes, and research reports and other outputs should, of course, strive to find and communicate them.

Although this sounds obvious, researchers should ensure that the methods they employ are suitable to the topic or issue, and that their studies are carried out with appropriate rigour. This is the case whether they are

undertaking large quantitative investigations, small qualitative studies or other sorts of research. This is not to argue that most social care research is *not* rigorous, but it is disappointing still to see poorly designed and implemented studies. One of the aims of the NIHR School for Social Care Research is to improve research capacity in social care, and among the mechanisms we are using in pursuit of this aim is the commissioning of methods reviews. Another is the organisation of events that help to spread knowledge and skills. For example, we want to explore how far social care research could gain from contacts with researchers in other fields, such as health care and housing research.

Researchers need to take lead responsibility for dissemination of their findings. They cannot assume that others will do the job for them. As knowledge transfer experts repeatedly remind us, communication of results needs to be planned at a study’s inception, not when writing the last paragraph of the final report. Many researchers will (rightly) complain that they have not been given sufficient time or resources in their project to fully disseminate their findings, having to write the proposal for their next study at precisely the time they are trying to finish their current work. Research commissioning bodies are often culpable and sometimes (irrationally) unsympathetic. But if researchers were to plan their dissemination or knowledge transfer strategy at the outset, there might be less risk of them expending time writing heavy reports that no-one will read or crafting articles for arcane academic journals that few people have heard of, and even fewer will ever access. Some findings may be of most interest to people who use services and their carers, so that an appropriate vehicle for dissemination might be general mainstream media or weekly magazines. Indeed, there is a need to raise the media profile of social care in general and of social care research. An avalanche of blogs and the chirruping of Tweets might not be to everyone’s taste, but these can be useful ways to make a wide range of people aware of new evidence.

Some research commissioning bodies – and the Joseph Rowntree Foundation is one that comes to mind – have sponsored training in dissemination methods, and generally there is much better appreciation today of how, when and where to be aiming to transfer knowledge from research to those communities that might be able to use it. In the School for Social Care Research we are working with a number of organisations and individuals to suggest ‘pathways to impact’: a set of suggestions and experiences that might help to improve the translation of research evidence into practice. There is a need for exchange: for research providers and research users to better understand and trust each other and to appreciate the pressures under which each works.

Another set of aspirations is for research to be more proportionate, timely and pragmatic. Not every study needs a systematic literature review before it can get into the field. Nor does every project need to start with a survey of local authorities or provider organisations, especially since many of these bodies are feeling bombarded with requests for information and experiencing budget cuts. For quantitative studies, there are usually ways to work out what size sample is needed, yet many social care researchers seem unaware of such possibilities. There is rarely a need nowadays to develop a completely new tool for measuring needs or outcomes, given that we already have some excellent such instruments in most areas of social care. Perhaps most importantly, whatever the focus and whatever the methods, there is no justification for collecting evidence that will not actually be used.

Finally, research really does need to be participative, with greater involvement of people who use services and carers from the very outset. More attention is now being paid to the need for user-controlled research, which offers numerous advantages but also practical and conceptual challenges.

Onward and upward

Compared to even just a few years ago, social care research is in a much better place than it used to be. Research methods *are* more robust and improving on both the qualitative and quantitative fronts. There *is* much greater involvement of people who use services or provide care and support. There *is* better communication of findings. But in a paper that might already be heavy on truisms, here is one more: the need to guard against perfection becoming the enemy of the merely ‘good’. Austere times demand imaginative responses.

Notes on Contributors

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