

Making Research Count: the Development of 'Knowledge-Based Practice'

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Abstract

This paper describes Making Research Count, an initiative that seeks to develop the links between research and practice in social work, social care and the interface with health. A brief history and background to Making Research Count are outlined, including the development of the notion of 'knowledge-based practice' which conceives of a triangle of research, practitioner wisdom and service user perspectives to inform practice. Two regional initiatives are described to demonstrate both similarities and differences in the way in which programmes are developed to meet local needs and expectations.

Introduction

The impetus for this article arose from workshop presentations at the 2002 Social Services Research Group conference given by members of *Making Research Count*, an initiative that works at the interface between research, social work, social care and health. The complex relationship between research and practice is the subject of renewed attention. While this contested relationship has never been 'off the agenda' (Weys et al, 2000), the current interest in it represents a definite shift, with greater priority now being given to bridging the gap between research and practice (Randall, 2002). At one level, this is refreshing. At another level, it needs to be viewed critically and reflectively. Why now? How does it fit with prevailing themes that dominate current policy and practice in social work and social care and health? Whose interests and what research are represented and promoted?

The growing appetite for a more 'research-informed' practice is difficult to argue with and, in fact, can be greeted only with enthusiasm by both practitioners and researchers alike. It can therefore appear churlish to question it. However, claims to knowledge and hence to power (Foucault, 1988) are at the political heart of any profession and need to be examined. The research agenda does not stand outside the wider agendas for social work, social care and health (see Butler, 2003). Hence, the rise in the demand for 'evidence-based' practice needs to be understood alongside the rise in other practices which are currently dominating this area. In particular, the managerial agenda with its attention to performance targets, procedures, outcomes, and value for money in a constricted resource environment (Clarke and Newman, 1997), and the closer links with health in administration, policy and practice, come to mind.

In this changing environment, central questions arise about whose knowledge counts and who is allowed to speak and be heard. We are concerned that a new orthodoxy is emerging in some areas which promotes a particular form of research as the primary form of 'what counts' as evidence. Within this discourse, quantitative research and particularly the ways in which it can inform programme effectiveness are taken as a 'gold standard' against which all other forms of evidence are weighed. While recognising the place of this specific form of research, as social work researchers and practitioners we are particularly interested in whether this current shift progresses an agenda that is anti-oppressive. To what extent does it create greater opportunities for those who experience themselves as 'on the margins' and disempowered to be given a stronger voice and have their claims to knowledge heard?

This paper describes *Making Research Count*, an initiative which has emerged in this current climate for 'research-informed practice'. A brief history and background to *Making Research Count* is outlined, including the development of the notion of 'knowledge-based practice' which conceives of a triangle of research, practitioner wisdom and service user perspectives underpinning the development of practice in social work and social care and issues which interface with health (while the article will continue to refer to social work and social care, this terminology also includes the interface of social work and social care with health). The ways in which programmes are being carried forward in two regions are discussed before some concluding reflections on the contribution of initiatives such as *Making Research Count* for progressing the links between research and practice.

Introduction to *Making Research Count*

Making Research Count was established in 1998, building on the longstanding relationships between a group of social work professors: June Thoburn (East Anglia), Jane Aldgate (now Open University), David Berridge (Luton), Mike Stein (York) and Jane Tunstall (Royal Holloway). There was growing interest in the topic of 'evidence-based practice' across a range of initiatives. What this group and their universities had in common was: involvement in social work qualifying and post-qualifying training; a long-term interest in applied research (on children and family issues); an inclusive and collaborative approach; and a commitment to high quality social work and social care, including professional values and ethics. They also shared concerns that aspects of the national evidence-based agenda might reflect an oversimplification of some of the problems in social work and a mistrust of the profession. The group agreed to come together and organise their relationship within a national structure.

42

It was felt that these common interests would provide an important foundation to promote what those involved preferred to term 'knowledge-based practice' in social work and social care. *Making Research Count* evolved gradually and early developments were not highly formalised. However, throughout, the aim has been to improve social work and social care services through the extension of a knowledge-based approach. This has entailed a range of objectives: strengthening the research skills and confidence of social work and social care practitioners; disseminating research findings; the implementation of research findings into policy and practice; involving managers and practitioners in setting research agendas; incorporating service users' views; and encouraging networking among professionals. In its five years' existence, *Making Research Count* has now grown to include seven universities and some 60 member agencies. Developing from its original emphasis on child and family welfare, *Making Research Count* has now broadened its remit to include adult services and issues that arise at the interface between health and social care.

Key Features of *Making Research Count*

In pursuing these objectives there are several distinctive features of the *Making Research Count* approach. Importantly, it is a *regional* initiative with a national structure. Hence, member agencies enlist with universities in their regions and, in return for an annual fee to cover costs, receive a range of services. These include: individual workshops and seminars; shared regional events; free places at a national annual conference; regular newsletters; research briefings; and access to nationally recognised experts. The regional focus is important as it builds on social work and social care qualifying and post-qualifying training programmes as well as the research links that universities have with their neighbouring authorities, agencies, health Trusts and PCTs. This regional dimension, in addition to their wider functions, is also presumably what universities are *for* - there is much discussion at present about the regional role of universities in linking with business and the community and we are anxious too, to emphasise the reciprocal relationships and obligations with local councils, health and other human services.

An important feature of this regional structure is its *autonomy*. Within the general national framework, regions have much discretion about how they operate. The work programme, in return for subscription income, is thus discussed and agreed locally. Most regions have chosen to employ a co-ordinator, who facilitates the relationship with member agencies and organises events, as well as delivering some of them. Regions usually have a steering group, consisting of agency and university representatives, which meets regularly to discuss the *Making Research Count* input as well as general service and research issues. They agree and monitor budgets.

But an important qualification of this regional autonomy is the strong emphasis on *collaboration*. Academics are not always known for their strong sense of partnership and university research funding mechanisms, such as the Research Assessment Exercise, can reinforce divisions. However, *Making Research Count* university representatives meet regularly to plan, share and

co-ordinate activities. Applications from new member agencies are discussed and confirmed at the national group. Annual strategy is agreed. In addition, the spirit of collaboration is reinforced by the fact that each university pledges two days to other regional groups each year, without payment. The collaboration also extends to membership and, generally speaking, a representative from any member agency can attend an event in any of the regions, opening up a considerable national network.

A recent development has been the strengthening of the contribution of *Making Research Count* at the national level. As the organisation has grown, we have sought to contribute to national developments and debates from our distinctive standpoint, thus channelling members' views and experiences into national forums. Consequently, for example, we have met with, and attended consultation events organised by, the Department of Health and research foundations. We have also had several meetings with the new Social Care Institute for Excellence (SCIE) and had some part to play in shaping its approach and future agenda. We see *Making Research Count* as complementary to other research initiatives, such as *Research in Practice*, and we liaise with *RiP* as well as contributing to some of their events. The various initiatives have similar objectives and we are all testing out alternative ways of achieving them.

This stronger central function and demand for our services has meant that *Making Research Count* has adopted a more strategic approach. We are seeking external funding to underpin our national activities and resources. We are growing strategically by identifying regions of the country that might benefit from a *Making Research Count* presence and asking agencies if they wish to link with a regional university or universities under our auspices. Importantly, *Making Research Count* has also considered where its professional expertise needs strengthening (eg adult services) and which new partners might enable this to occur. Furthermore, we are planning some evaluation of *Making Research Count's* contribution. As a knowledge-based initiative, we would be rather hypocritical if we did not adopt a more informed assessment of our own work. It would be interesting to examine systematically: how our

different regions operate and why; how this relates to theories of professional and organisational change; and, most complex of all, whether *Making Research Count* makes a difference. Some work is already underway on these national issues and will develop further.

Finally, in this brief section on the origins and nature of *Making Research Count*, we need to elaborate on our approach to what we mean by '*knowledge-based practice*'. In a way, this gets to the nub of some of the earlier discussion. *Making Research Count* took a conscious decision to substitute the term '*knowledge-based practice*' for '*evidence-based practice*' which seemed too exclusively identified with research. Research evidence is clearly important, but we prefer a tripartite approach, juxtaposing research with practice expertise and user views. Significantly, *SCIE* has taken a similar view. The relationship between research, practice expertise and user views is a complex one and there is a need to understand more about their interaction and relative significance. Each of the three categories is also, in itself, problematic. For example, what contribution to 'knowledge' is made by different types of research (eg quantitative compared with qualitative, or controlled trials)? Do we insist on replication of findings and, if so, in what form? When does research knowledge become out of date? What significance do we give to studies from overseas? These are difficult questions that will occupy researchers and policy makers for many years.

We observe with interest debates about the validity of '*evidence-based*' approaches in social work (Webb, 2001; Sheldon, 2001). While not as suspicious as Webb, we do share with him concerns about overly narrow and, deterministic, positivist approaches to what constitutes knowledge. There is something of an '*evidence-based*' industry at present and we need to ask ourselves what it means to be part of it and what are the implications for social work and social care. In particular, we need to be cautious about its relationship with managerialist, technocratic approaches; we need to be vigilant that research and our professions will continue to challenge inequalities and injustices; we shall resist efforts to undermine social work as an emerging discipline;

and we need to be very careful of the consequences of circumscribing professional judgements.

While alert to this wider agenda, *Making Research Count* has come to several decisions. We are clear, as stated above, that research plays an important part in social work and social care knowledge but is by no means the only source. We are also aware of the limits of present research awareness. These are still very much the early stages of social science and social work research and there is a great deal that we do not know and probably a great amount that we shall never know. Hence, our approach to research dissemination needs to be one of humility and, though research findings should form a part in decision-making, they are unlikely to provide the answer. We therefore resist a prescriptive approach but, instead, attempt to lay out what research tells us and to explore with practitioners, alongside other forms of knowledge, the implications for services and decision making.

44

The *Making Research Count* Regional Network

While the national body articulates an overall set of principles, the regional nature of *Making Research Count*, with its emphasis on the autonomy of each region to set their own programme, means that each has different ways of operationalising the broader aims of *Making Research Count*. The strengths of each university, combined with the priorities of the organisations, involved in the *Making Research Count* collaboration provide a unique programme for each region. Two regional programmes at different stages in their development are described to illustrate both similarities and contrasts within the regional network.

a) Making Research Count – University of Warwick in association with Coventry University: Setting Up a Programme

The newest member of *Making Research Count* is the University of Warwick/Coventry University regional consortium. With less than 12 months' operational experience, it offers a discussion of some of the steps involved in establishing a new programme.

Establishing a regional consortium and funding base

Impetus for this initiative emerged from a regional MA/Dip SW partnership meeting (Universities of Warwick and Coventry and Warwickshire, Coventry and Solihull Social Services Departments) which proposed that avenues for enhancing links between research, policy and practice within the joint partnership be explored. This led to a focus on seeking a viable *Making Research Count* regional structure and on obtaining national support.

Each regional *Making Research Count* organisation is shaped by local factors: both university social work programmes in Warwick and Coventry are based in joint health and social studies departments; the current national modernisation agenda requires closer links between health, social work and social care; practical needs demanded a viable financial base for the partnership; evidence from *Making Research Count-York*, indicated that a successful social work, social care and health, collaboration could be created. Taken together, these factors led to a decision to draw partners from across both social care and health care. In addition, work with adults was to be included within the initiative's remit. For potential *Making Research Count* partners this meant there would be a straightforward link with health, and for agencies already committed to the child care field with *Research in Practice*, a complementary engagement in the development of research-mindedness in 'adult services' could be made.

Initial meetings with a wide range of statutory and voluntary organisations discussed the broad parameters of *Making Research Count* nationally and the shape of the future regional agenda. Four local agency partners, the University of Warwick and Coventry University, then made a commitment to establish a viable *Making Research Count* partnership - each agency contributing £5,000, Coventry University making a financial contribution and the University of Warwick providing significant match-funding.

From this stage, the initiative had sufficient resources to employ a part-time co-ordinator and secretary to support the development of a programme.

Developing the principles for the programme

An initial consultation led to the establishment of the following key principles:

- A commitment to active collaboration and shared ownership between the agencies and universities involved – exemplified through a steering group (providing strategic and operational leadership) comprising representatives from each university and agency partner and chaired by an agency representative.
- Agreement that programme development would prioritise shared social and health care issues.
- Recognition that knowledge-based practice brings together different sources of evidence: research, service user knowledge, practitioner expertise and agency findings resulting from reviews, audits and monitoring, and that a critical approach to these differing sources is an important aspect of anti-discriminatory practice.
- Acknowledgement that, for *Making Research Count* to be effective, each member organisation would need to develop its own internal strategy to support the development of research-minded practitioners.
- Recognition that the initiative would need to evaluate its activities, in relation to both overall outcomes sought, and ensuring ‘value for money’ for each of its subscribing members.

In addition, during this first year, the regional initiative reaffirmed its commitment to ensuring effective engagement with the independent sector. Through wider distribution of allocated places at events/activities, member agencies are encouraged to include both staff working internally and staff from voluntary agency settings with whom the member agency is in active practice partnership.

Programme Development

While the programme continues to change, the emerging agenda currently includes: a regional conference; regular practitioner network events; a series of stand-alone thematic seminars linking research findings to key performance targets and user, practitioner and agency findings; regular events focusing on organisational issues relating to the development of knowledge-based social care

practice strategies; workshops about ‘accessing and interpreting’ research and introductions to research methods. Collaborative Development Groups also provide a process for pursuing particular themes in greater depth, including exploring the integration and tension between different sources of knowledge. Initial topics include: areas of domestic violence and mental health, older people and hospital discharge, dementia, and the organisation and practice of multi-disciplinary work.

A well-linked web site will be a key tool for use in support of all of the above, as well as for promoting events. An important component of this site will include disseminating information about the research and ‘research into practice’ activity, being undertaken within the region. The site will provide a platform for projects and offer one means through which the ‘buried champions’ of practitioner research (Cox, 2002) can be unearthed and afforded recognition.

At this early stage of development, progress is being made in terms of programme activities and forging collaborative links within and between *Making Research Count* member agencies and institutions. In addition, plans are under way to undertake an evaluation of the programme to enable the partnership to review the effectiveness of its strategies. As a first step, the initiative has made application for funding to scope current and potential evaluation methods for this type of outcome-oriented initiative. The development of links between research and practice is a complex and incremental process of organisational change and development. It is recognised therefore that *Making Research Count* will need to be flexible in its ability both to learn from its own practice findings and to amend its programme to meet the changing context and learning needs of its members.

b) Making Research Count – Keele: Year One Review

Background

Making Research Count – Keele (MRC-K) is about to celebrate its first anniversary as a formally constituted regional network. The use of the term ‘network’ is deliberate as *MRC-K* was designed to

operate to allow a range of relationships to develop between its members that would not necessarily be mediated through the University. It was the University that took the lead in building the network however. Preparatory work began in the early part of 2000. The involvement of Keele University in *Making Research Count* had been in the air for some time before this; not least, because it was thought that Keele's particular strength in the field of social gerontology could make a useful contribution to the expertise available through *Making Research Count* nationally.

Building the Network

Canvassing support for building a regional *Making Research Count* presence was undertaken at Chief Officer level in the first instance. This was important in ensuring that *MRC-K* took account from the outset of the strategic ambitions of each potential local authority member, and that any commitment to building a *Making Research Count* presence locally was made at the highest level. This eased the decision-making and resourcing processes for *MRC-K* but, more importantly, provided 'sponsorship' of the initiative by each potential member organisation.

Although the University enjoyed very strong and stable links with the members of its DipSW Programme Management Committee, it was difficult to define any obvious or homogenous constituency for a 'regional' *Making Research Count* presence. Keele is situated at a number of geographical and administrative boundaries. Within a very short distance from the campus can be found pockets of some of the worst economic deprivation in Europe alongside some of its most affluent suburbs; small metropolitan boroughs alongside very large 'shire' counties. Communities of association do not easily map on to communities of interest or square with historical and cultural associations. At the University, we were reluctant to cast our net too widely, since a significant part of our interest in *MRC-K* was satisfying what we believe to be an important aspect of the University's wider mission - to be of real use and value to its immediate local communities. By agreement therefore, despite having subsequently had opportunities to expand our membership, *MRC-K* comprises the University and its four founder local authorities, Stoke, Staffordshire, Cheshire and Shropshire.

Organisation and Activities

MRC-K is run by a management group, the main function of which is to plan the calendar of events and to monitor expenditure. The Group has no officers or formal constitution although the several partners, each of which has entered into a contract with the University, identify named individuals to represent their interests. It is the University that acts as the employer for the part-time Regional Co-ordinator. Events are run on a 'free at the point of delivery' basis. Core funding (largely staff costs and fees for speakers) is provided by the local authority members with the University providing match-funding through administrative support, payroll and other services. Venues and facilities for events are provided by each member (including the University) by rotation. This has the advantage of making *MRC-K's* presence felt on a regular basis in each local authority area and helps reduce costs as host agencies make no charge for the services they provide.

The programme of events for the first year included a 'launch' conference, and a mixture of seminars and mini-conferences on such topics as the life chances of looked after children, intermediate care and retirement communities - the topics reflecting the interests and knowledge priorities of members (For this year's programme of events see www.keele.ac.uk/depts/so/socialwork/sw_mrc.htm). Each of our events, as well as providing access to research evidence drawn from elsewhere, also has space reserved for examples of local good practice. Recognising local expertise and making it accessible reflects our broad understanding of what constitutes useful social work and social care knowledge and furthers *MRC-K's* commitment to local capacity building.

MRC-K has developed the Research Project Group as another innovative and highly productive means of developing practical research skills and of promoting and encouraging practitioner research. The purpose of the Project Group, which meets for a full day on three occasions, several weeks apart, is to make accessible to practitioners and managers the research expertise available within the Group and from experienced researchers from the University, in order to address 'real life' problems arising in the work of the agency. Participants are asked to come to the first meeting of the Group

with a particular research problem or proposal in mind that they are prepared to present informally to the Group. The object of the first meeting of the Group is to assist in the formulation of a research/evaluation strategy to address the particular problem or issues raised. Subsequent meetings of the Group review progress in addressing the original problem. E-mail and telephone consultation are available from University staff between meetings and the Group has access to a 'book-box' of tried and tested 'how to' guides to research. The strength of the Group is the mixture of research and 'operational' knowledge it can bring to bear on a particular problem or issue.

Reflections

The strength of *MRC-K* is, at least in part, its size and the nature of the relationships that can develop when operating on a relatively small scale. Contacts made at *MRC-K* events are turning into continuing relationships and networks of their own. Colleagues are increasingly comfortable in sharing their expertise with one another and in exposing those areas where they can benefit from the engagement of others. Bodies of local knowledge and expertise have been identified. These might not otherwise have been made accessible to colleagues. Research and analysis from other geographical areas have also been brought to bear on the local situation. In this sense there is recognition that operational knowledge, as much as research, counts and that local expertise is recognised as much as the achievements of others.

Concluding Comments

Making Research Count has chosen a regional model to progress the development of knowledge-based practice. The descriptions of the two programmes based at Warwick/Coventry and Keele highlight both the similarities and differences that can develop within the over-arching framework created by *Making Research Count*. Knowledge-based practice is reliant upon stimulating innovation, enthusiasm and learning within organisations to acknowledge the multiple sources of knowledge, both new and old, which can create a more sensitive and informed practice. It potentially represents a challenge to top-down approaches to organisational change and professional development. This too frequently

occurs within the 'command and control' style of new managerialism where fear of being shamed in the national league tables and blamed for practice shortcomings can undermine learning and inhibit creative change processes (Chapman, 2002). Local partnerships between universities and agencies are designed to stimulate a more tailor-made approach to learning which is more responsive to local needs and agendas. This is seen clearly in the development in some regions of the partnership with health and adult services. They frequently build on learning groups and on the often unrecognised supporters of research and learning who already exist in these organisations.

Making Research Count members are also mindful of how more participatory approaches to research can be used as a possible means of resisting managerialist and narrowly instrumental research agendas. Beresford and Evans (1999: p. 672 ff.), for example, have described the emergence of participatory and then emancipatory forms of research as the 'progressive response' as contrasted with some, rather narrowly defined forms of evidence-based practice's 'reactionary response' to the changing contours of the welfare state. The involvement of end users, including service users, in both the production and the consumption of research remains an important consideration for *Making Research Count* members. Such approaches are not without their difficulties, however: for example, a very 'local' focus can lead to a neglect of structural considerations, a somewhat 'uncritical consumerist approach' (Powell, 2002: p. 21) or the privileging of particular voices and stakeholders at the expense of others. The fact that *Making Research Count* operates nationally as well as regionally will help to mediate these difficulties.

Challenges for the future will involve evaluating and researching the effects of the initiative and whether its aspirations are reflected in meaningful shifts in practice and policy within the participating organisations. Specifically, the impact on service users and their experience will need to be explored alongside those of the practitioners and managers who have participated in aspects of the local programmes. This needs to be set in the context of additional work integrating research knowledge with practice wisdom and user perspectives.

Service users have played more prominent roles recently in some *Making Research Count* events and practitioners have found this a useful learning experience. Indeed, there are questions about whether we should go further and make research evidence more readily available to service users and, hence, encourage an 'evidence-based society' as described by Smith (1996).

Other issues to be addressed include the continuing concern about providing value for money. Authorities scrutinise increasingly closely areas of expenditure and we need to ensure that *Making Research Count* complements other local initiatives and strengthens agencies as learning organisations. To date, we have lost very few members: employers tell us that they find us an efficient provider and they like being able to shape the training and staff development opportunities on offer. Though we provide inputs specifically linked to the *Performance Assessment Framework Indicators* (Department of Health, 2002), encouragingly, authorities remain interested in focusing on wider social work and social care issues. From a different perspective, *Making Research Count* is also aware of the potential tension for researchers and universities in that the national *Research Assessment Exercise* (RAE), which allocates funding to institutions, underestimates the value of applied research and dissemination activities such as this (Walker, 2002). Involvement with *Making Research Count* rather than, for example, writing articles for esteemed (albeit seldom read) journals may, therefore, cost universities a significant sum. However, our common principles and professional values mean that we are committed to developing close links with practitioners and, thereby, attempting to improve services for users.

The wider agenda of influencing the directions for a more research-minded social work, social care and health workforce creates a further challenge. There are now many initiatives promoting a more research-informed practice. Randall (2002) has pointed out that such developments require resourcing and high levels of management commitment to produce any effect on policy and practice. There is also the critical question of 'what counts as evidence' in these agendas. *Making Research Count* has sought an inclusive

rather than exclusive definition of relevant knowledge for social work and social care. However, sharpening the theoretical base to provide a framework through which this broader based knowledge can be assessed is one of the issues for further debate, research and evaluation.

The development of knowledge-based practice through the *Making Research Count* initiative is undoubtedly ambitious. The principles that underpin the national and regional programmes are tempered by the currently limited financial base of the organisations involved. Nevertheless, the organic growth of each regional initiative means that small steps within this framework can be recognised and acknowledged as contributing to the broader aspirations of more research-minded professionals. The project provides a platform through which hopefully, their increased knowledge can be made to count within their changing organisational contexts.

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