Putting Research Evidence to Work:

Key Issues for Research Utilisation in Irish Children's Services

An Bord Comhairleach um Achtanna na Leanaí
Children Acts Advisory Board

October 2009

PUTTING RESEARCH EVIDENCE TO WORK:

KEY ISSUES FOR RESEARCH UTILISATION IN IRISH CHILDREN'S SERVICES

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An Bord Comhairleach um Achtanna na Leanaí
Children Acts Advisory Board

School
of Social Work
and Social Policy

Trinity College Dublin
children's research centre
research for children & young people

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Foreword

Following its establishment in July 2007 the Board of the CAAB identified as a key strategic objective the need to strengthen the knowledge base of children's services. In order to fully meet this objective the Board believes that it is necessary to develop a research capacity that effectively utilises the internal resources of the children's sector and creates strong links with academic and research organisations nationally and internationally.

The Board is very aware of the cost of research, and in particular the cost of the lost opportunity when research is not applied. In developing our research programme the Board believed that it was critical to establish an understanding of the elements necessary to ensure that the research being carried out was the most appropriate and that its findings could be understood and applied across the sector. Our first commission was therefore this study – Putting Research Evidence to Work: Key Issues for Research Utilisation in Irish Children's Services.

The benefit of this study arises from its dual purpose:

■ To inform the CAAB and other relevant organisations of initiatives that can be taken to help put research evidence to work.

■ To provide a basis for other organisations and individuals to take positive action in this area.

In the further development of our research programme we have tried to be faithful to the findings of this study, particularly by:

■ ensuring that studies are relevant, applicable and capable of filling an existing gap in relation to policy and/or practice;

■ promoting the involvement of key stakeholders in the commissioning and conduct of the research;

■ ensuring that plans for dissemination using a range of methods form part of the research process.

I want to indicate my appreciation to the staff of organisations across the sector who participated in our consultation process, through our 2008 Network Seminars, and to Bronagh Gibson who so professionally co-ordinated the seminars. I want to express my sincere thanks to the researchers Helen Buckley and Sadhbh Whelan, and also to Robert Murphy, Ciarán Ó Searcaigh and Marion Martin, who have managed this project on behalf of the CAAB and who have contributed greatly to its quality.

The power to put research evidence to work in children's services rests with you, the reader. We trust that this report provides individuals and organisations at policy, management and practice level with a better understanding of the issues faced in using research evidence in practice. We hope we have also provided solutions to these issues and indicated the actions that can be taken.

Aidan Browne
Chief Executive
Children Acts Advisory Board

Research Quality

Two important elements of the CAAB's research quality assurance are the use of a Steering Committee to 'guide' a project and using an independent peer review process - see below.

Membership of the Steering Committee

Dr Dermot Stokes, National Coordinator, Youthreach and CAAB Board Member.

Aidan Browne, Chief Executive, CAAB.

Robert Murphy, Head of Research and Information, CAAB (Committee Chair).

Marion Martin, Advisory Officer, CAAB.

Gráinne McGill, Advisory Officer, CAAB.

Robert Templeton, Child Care Specialist, CAAB.

Peer Reviewers

Colleen Eccles is Deputy Director for **research in practice**, UK. This project specialises in research utilisation across inter-disciplinary children's services and is the largest research utilisation organisation in the children and family field in the UK. Colleen is passionate about bringing the research and practice worlds together and has previously led a national change project on 'Social Work and the Use of Research Evidence in Court'. Colleen sits on the Association of Directors of Children's Services Workforce Development subgroup and is also a member of the Partnership Board for the Department of Sociological Studies, Centre for the Study of Childhood and Youth, University of Sheffield.

Dr John Canavan is joint founder and Associate Director of the Child and Family Research Centre (CFRC), Ireland. John has extensive experience in researching and evaluating social intervention programmes in the areas of child and family care, educational disadvantage, and community and local development. Currently, he oversees the work programme of the CFRC much of which has a strong policy and practice orientation. Along with colleagues Professor Pat Dolan and Professor John Pinkerton, John supported the Office of the Minister for Children in developing The Agenda for Children's Services: A Policy Handbook (2007). John has a particular interest in and has published on research utilisation issues.

Kerry Lewig is Research Co-ordinator for the Australian Centre for Child Protection, University of South Australia. Kerry has a background in organisational psychology with research experience in work satisfaction, engagement, work stress and burnout in the services sector and the volunteer sector. Her current focus is on research utilisation in the child protection field with a particular interest in organisational factors influencing research use, programme implementation and service delivery. Kerry has published on closing the research to policy and research to practice gaps in child and family services.

Fiona Mitchell is Coordinator for the Scottish Child Care and Protection Network (SCCPN). With its overall aim to promote the use of evidence for best practice in child care and protection in Scotland, SCCPN draws together academics in Scottish Universities and key stakeholders in practice and policy to explore ways to foster collaboration and co-ordination of research production and dissemination.

EXECUTIVE SUMMARY

1   Introduction

This project was commissioned by the Children Acts Advisory Board (CAAB) with the overall aim of assisting the CAAB to develop initiatives to make research evidence more accessible to practitioners. The specific objectives were to:

a.   Provide a review of literature on the barriers and facilitators to research use.

b.   Consult with staff employed in children's services to establish the extent of research use in practice, the barriers and facilitators to its use, preferred methods of dissemination and most relevant topics.

c.   Report on knowledge brokering mechanisms used by relevant services internationally.

d.   Draw conclusions from the foregoing and make recommendations to promote greater use of research in practice.

The methods employed were designed to achieve these objectives. Firstly, a review of international literature on research utilisation and evidence informed practice was undertaken. Secondly, a consultation process was carried out involving staff (managers and practitioners) from four sectors: health, welfare, justice, and community and voluntary organisations. The consultation was carried out by means of a survey and focus groups. A total of 155 staff completed questionnaires at four separate seminars organised by the CAAB, and 122 staff participated in a total of 13 focus groups at the same events. Thirdly, a review was undertaken of products and services provided by Irish and international organisations dedicated to research dissemination and utilisation.

Data from the literature review and the consultations was analysed and presented in a report under the themes of: extent and nature of research use, barriers to research use, factors that facilitate research use, and frameworks and models of research use. Section 2 of this Executive Summary presents the key findings of the report. The conclusions and recommendations from the study are presented in Sections 3 and 4 respectively.

2   Key Findings

2.1   Evidence Based/Informed Practice

Evidenced based, or evidence informed practice, is best described as a philosophy and process designed to advance effective use of professional judgement. Typically, it involves the steps of formulating problems or questions, sourcing the best evidence to answer the question, critically appraising the evidence for validity, integrating the evidence with practice experience and specific contextual factors, taking action and then evaluating effectiveness. As understanding of the concept has evolved, the term 'evidence based practice' has, in many instances, been replaced by 'evidence informed practice'. The latter is now commonly used in the literature to take account of the myriad influences on practice operating within an organisational and wider environmental context, including policy, values and ideologies, organisational culture, resources and politics, practitioner skill and service user views. Nevertheless, to reflect their usage across the literature, both terms are used in this study.

2.2   Extent and Nature of Research Use

While acceptance of the benefits of using **research evidence** to inform and challenge practice and evaluate programmes emerged from the findings of this study, it was also evident that research utilisation is somewhat limited in frequency and nature, and practitioners also expressed caution about the limits of its relevance in sectors that are complex and constantly changing. Factors that both impede and promote research use were reviewed and analysed in terms of those that impacted on individual use, those associated with the nature and presentation of research material, and those that were relevant to service provider organisations. It became clear that if the rate of research utilisation is to improve a number of obstacles need to be addressed.

2.3   Barriers to and Facilitators for Research Use

The literature and consultations both demonstrated **barriers to research use for individuals** as: lack of time, limited access to research materials in some cases, lack of confidence in research findings, a sense of being overwhelmed by the volume of material available and lack of critical appraisal skills.

Barriers in respect of the nature of research were also identified in the literature and consultations, which cited the lack of fit between research findings and the reality of practice, the complex presentation of some research materials and the perceived lack of Irish research. **Organisational** barriers that emerged were lack of a research culture, lack of active encouragement to use research and inadequate dissemination strategies.

Factors that appeared to encourage research use by **individuals** were personal interest and motivation, informal sharing in the workplace and the need to prepare annual reports and papers. Facilitators relating to the **nature of research** demonstrated in both the literature and the consultations included accessibility, user-friendliness, practical relevance of research and provision of research evidence in different formats. Promoting **organisational culture** was defined in terms of various tasks such as improving access to research material, setting aside dedicated time for reading and discussion of research, giving a strategic lead by the nomination of certain staff as research champions, providing training in critical thinking, appraisal, self-reflection and evaluation skills, 'embedding' research by using it as a base for protocols, commissioning research use, appointing research officers, incentivising and rewarding research utilisation and adopting the habits of self-challenging and self-evaluation. The creation of linkage and exchange mechanisms featured strongly in both the literature and the consultations, with stakeholders suggesting the establishment of intra- and inter-organisational forums to provide opportunities to share and debate different topics.

2.4   Mechanisms to Promote Research Use

Various **frameworks for understanding** the application of research to practice have been put forward in the literature, including the support of individual practitioner use, organisations basing policies and protocols on research evidence and the creation of partnerships between organisations and research producers. The latter could involve co-location of researchers and practitioners, involvement of practitioners in the conduct of research and the involvement of research staff as advisors to service managers and policy makers. The impact of the contexts in which and for which research is produced was also demonstrated, indicating that a linear relationship between research production and utilisation cannot be assumed.

Internationally, **brokering or intermediary organisations** provide a range of products and services to help bridge the gap between research production and the application of research in practice and/or policy. The precise focus of their services varies from organisation to organisation but in general, these organisations overcome a number of impediments to research use by:

- Assisting in the **identification** of relevant material by providing searchable databases and links to other databases, providing summaries of research material and providing guidance and training on how to identify relevant research.

- Supporting **access** to relevant material such as downloadable reports and links, including reference numbers, to other reports that may be purchased. Many of the organisations providing this access also provide library facilities and some also provide guidelines and/or training on effective ways to obtain research literature.

- Facilitating the identification and understanding of **key messages** from research by providing guidance on critical appraisal, by providing summaries of key points from literature and by hosting information and awareness events such as seminars and conferences.

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- Providing indicators of **research reliability** through identification of quality checks such as peer review processes and research quality rating systems.
- **Supporting evidence integration** through manuals, training events and facilitating organisations to integrate evidence into specific practices and services.

Collaboration is a key activity of many of these organisations, and extends along a continuum from selective and informal relationships between public servants and experts in various fields, to intra-organisational partnerships and co-location of practitioners and researchers as well as formal relationships between service provider organisations and research centres. It is noted that the number of such organisations in Ireland is quite limited.

3   Conclusions

While this study is subject to some limitations its findings are considered sufficiently robust to support three overall conclusions.

1. **A simple linear relationship should not be assumed to exist between the production of research evidence and its use in practice**. This is due in part to the number of barriers to research use identified in this study, but also to the range of different factors that impact on practice in children's services.

2. **The use of research evidence in practice could be promoted by each of the main stakeholders involved, i.e. research commissioners, service provider organisations and research providers**. Attention could be paid to the:

   a. type and nature of research commissioned and undertaken;
   b. approach and methods used to undertake research;
   c. way in which research evidence is disseminated, communicated and integrated into practice;
   d. degree of collaboration and partnership developed between the key stakeholders.

3. **Strategies are required at national level to identify and address gaps in research and to facilitate the dissemination and integration of both Irish and international research that is relevant to children's services.**

   Throughout the project, the majority of issues emanating from the literature and the consultations have referred either directly or obliquely to the above issues.

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4   Recommendations

This Section presents the recommendations emerging from the study. Recommendations 1 to 3 relate to actions that might be undertaken by each of the key stakeholders, i.e. research commissioners, service provider organisations and research providers. Recommendation 4 is relevant to all stakeholders but would require particular support from central government to drive its implementation.

1. Recommended Actions for Research Commissioners
General Recommendation for Research Commissioners
In order to promote more extensive use of research evidence, research commissioners should:
Ensure that studies are relevant, applicable and capable of filling an existing gap in relation to practice and/or policy.   **Require that clear identification of implications for practice is an integral element of completed work.**   **Ensure that plans for dissemination, using a range of methods, form part of the research process.**   **Promote the involvement of key stakeholders in the commissioning and conduct of research as this would enhance the potential for ownership and integration of the findings into practice and policy.**
Specific Recommended Actions for Research Commissioners
In order to contribute to the integration of research evidence into practice, research commissioners, should:
a. Ensure that the outcome of research is relevant, applicable and fulfils an existing gap in relation to practice and/or policy. This can be achieved by including the views of researchers, service providers and service user groups when commissioning and undertaking research.
b. Require researchers to provide dissemination strategies, including presentations and optional formats, such as summaries, briefing papers, CDs and podcasts for accessing research. Commissioners could factor in the cost of these into their budgets and identify them in invitations to tender and contracts.
c. Operate a partnership approach that keeps all relevant stakeholders involved from the beginning to the end of each research study and ensure the communication of information between them in the interim.
d. Develop or contribute to an online database or a combination of online databases of Irish research that would provide user-friendly, succinct and easily accessible overviews and briefings.
e. Enhance confidence in the quality of the research produced by building in benchmarks such as peer reviewing.
f. Commission overviews, systematic reviews and research summaries on topics identified as having current relevance.

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2. Recommended Actions for Service Provider Organisations

General Recommendation for Service Provider Organisations

Service provider organisations, while continuing to value professional experience and expertise, should promote an organisational culture that signifies the value of research as a source of innovation, evaluation and challenge to existing policies and practices.

Specific Recommended Actions for Service Provider Organisations

In order to promote evidence informed practice, organisations that provide services, should:

a. Provide access to research articles and reports via the Internet and print literature such as books, journals and reports.

b. Appoint, where practicable and relevant, staff who are either full-time researchers, or whose job includes research, who will commission, conduct and disseminate research.

c. Establish strong links with research centres that can help put research evidence to work.

d. Implement, in line with the previous recommendation, ongoing programmes dedicated to integrating research into practice, which will allocate specific time, and involve a number of dissemination and training strategies including training in critical thinking, appraisal, self-reflection and evaluation skills.

e. Involve practitioners in the conduct of research, in collaboration with research staff within or outside organisations.

f. Support staff (champions) who display particular interest and motivation in the use of research evidence by recognising and/or rewarding effort and/or giving them particular responsibility for the promotion of research use.

g. Provide feedback to staff regarding how any statistical or other data that they provide will be utilised and where feasible and appropriate feedback the overall results from the analysis of aggregated information.

h. Promote learning by facilitating staff attendance at seminars and supporting further study that includes a research component.

i. Promote better collaboration within organisations between personnel involved in research and those in service delivery to ensure research maximises its potential for take-up.

j. Encourage staff within the organisations to avail of the opportunities presented to them by:

- accessing research that is available;
- drawing on research findings when conducting assessments, writing reports, devising
- intervention plans, evaluating programmes, tendering for funding, making organisational

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- policy decisions and supervising staff;

- participating in the conduct of research as either an informant or a researcher, thereby adding

- to the knowledge base of Irish research;

- availing of opportunities to attend or present research at seminars, conferences or other

- learning events.

3: Recommended Actions for Research Providers

General Recommendation for Research Providers

In order to promote evidence informed practice, research providers should endeavour to produce research evidence that is accessible and has practical relevance and applicability. They should employ diverse methods of research dissemination, and work collaboratively with staff and organisations to assist in the integration of research evidence into practice and policy.

Specific Recommended Actions for Research Providers

To enable the implementation of the research evidence research providers should aim to:

a. Collaborate with all relevant stakeholders from the beginning to the end of the research process.

b. Provide succinct reports that are well written, clearly presented and well-structured and which draw out implications for practice and make relevant recommendations.

c. Use language that is jargon free and styles of presentation that are engaging.

d. Provide an optional range of research *outputs* targeted at different audiences, including presentations, reports, summaries and briefing papers.

e. Provide an optional range of *formats*, such as electronic and print material, podcasts and audio files.

f. Commit to ongoing participation in interactive dissemination forums, seminars and workshops after research has been completed.

g. Work with service provider organisations to negotiate the most effective way of disseminating research to their staff once it is completed.

h. Negotiate with higher education institutions to place a more enhanced value on applied as opposed to highly theoretical research.

4. Recommendation for the Establishment of a Knowledge Brokering Service

The formal establishment of a knowledge brokering *service,* either through a designated organisation or through a commitment shared by several organisations is recommended. Such a service would:

- Identify and advise on how to address gaps in existing Irish research relevant to practice in children's services.

- Act as a conduit for the dissemination of research, both Irish and international, in a user-friendly format that clarifies and specifies implications for practice in children's services, and help to integrate research evidence into practice.

Ideally, responsibility for the establishment of this *service* would be taken by central government as an indication of the importance of evidence informed practice.

1   INTRODUCTION

1.1   Background

In December 2007 the Irish government launched The Agenda for Children's Services: A Policy Handbook, described as a 'broad policy framework document', the aim of which is to assist policy makers, managers and front line practitioners to engage in reflective practice and effective delivery, to be informed by best Irish and international evidence and to identify their own role within the national policy framework. Thus, it underlined the importance of accessing and applying research evidence to the policy development and delivery of practice interventions to children and families.

The focus on 'evidence based practice' in the Agenda for Children's Services is generally defined in terms of 'what works' and 'good practice' which provides a welcome change in perspective from that seen in the majority of inquiries into child welfare practices in Ireland, which have tended to focus on the failures of the system and of professionals, with minimum attention paid to the achievements of the past decades. The move towards greater utilisation of evidence on effective, outcome focused service delivery seeks to restore that balance. This drive towards evidence informed practice is part of an international trend, and has elicited much discussion on the nature of research, its quality and value, the different ways in which it is utilised, and the barriers and facilitators to its use at different levels within organisations. Importantly, it has also raised challenges about the extent to which, in a dynamic context, research can legitimately claim to significantly influence policy and practice. The CAAB's Strategy 2008–2010 notes that its third strategic objective 'is to strengthen the knowledge base of the child care sector'. It is within this context that this study was taken.

1.2   Aims and Objectives

This project, which was commissioned by the Children Acts Advisory Board (CAAB), emerged from a proposal to promote research use by practitioners in children's services, specifically in the sectors of child health and welfare, education, justice, and community and voluntary organisations. The overall aim of this research is to help the CAAB to develop initiatives in partnership with relevant organisations to make research evidence more accessible to practitioners, managers and policy makers. The specific objectives were to:

a. Provide a review of literature on the barriers and facilitators to research use.
b. Consult with staff employed in children's services to establish the extent of research use in practice, the barriers and facilitators to its use, preferred methods of dissemination and most relevant topics.
c. Report on knowledge brokering mechanisms used by relevant services internationally.

d. Draw conclusions from the foregoing and make recommendations to promote greater use of research in practice.

1.3   Key Study Concepts

1.3.1 Research

Firstly, what do we mean by research? Among the many definitions offered in the literature is a useful one by Marsh and Fisher (2005:16) who describe it as 'a form of structured enquiry capable of producing generalisable knowledge', the capacity of which to deliver generalisable messages depends on its relevance and applicability. Nutley *et al* (2007:20) refer to the type of research that is likely to be accessed by key public service professionals in healthcare, education, social care and criminal justice as that which is aimed at understanding the social world, as well as the interactions between this world and public policy/public service'. They identify the social science disciplines likely to contribute to this body of knowledge as anthropology, economics, political science, social psychology and sociology.

1.3.2 Research Evidence

There is considerable debate about the quality of research evidence generally, including questions on what constitutes robustness, validity, generalisabilty and reliability, and there are comparisons of the merits of experimental design, statistical analyses and studies based on experiences and attitudes, with the former tending to be more esteemed in the research hierarchy because cognitive bias is effectively eliminated (MacDonald, 2001; Hannes *et al*, 2007). Overviews of subject related literature are also categorised into mainstream and 'systematic' reviews that synthesise results from several different studies on the same topic, the latter incorporating pre-defined inclusion criteria and a particular set of quality standards with regard to methodology, accountability and replicability (EPPI-Centre, Hannes *et al*, 2007. Case control studies, cohort studies and research based protocols provide other examples of research evidence.

1.3.3 Research Utilisation

The studies reviewed for this project offered various definitions of research use, for example, reading research, using research based tools such as assessment frameworks, and following research informed policies and procedures (Walter *et al,* 2004). However, the validity of pure research in the social care/child welfare sector and the assumption that it can be readily 'translated' into practice has been challenged, for example by Brady and Dolan (2007), who consider that its vulnerability to a range of flaws means that it should not be totally relied upon, to the exclusion of other demonstrations of good practice such as 'showcasing'. Likewise, Pelton (2008) challenges the assumption that research makes a genuinely valuable contribution to child welfare. In a similar vein, Nutley *et al* (2007) comment on the current absence of any strong evidence linking research use to improved

outcomes; however they argue that this dearth reflects more on an absence of evidence than on evidence of absence. Notwithstanding these reservations, a clear concern underpinning this project is the promotion of research utilisation, that is, the application of research findings to practice and policy in children's services. Walter *et al* (2004) define research use as: raising awareness of research findings; challenging attitudes and perceptions; and changes in policy or practice or in outcomes for service users. Measures of research use, they suggest are:

- reading research;

- completing research based assessment forms;

- changes in knowledge;

- channels through which research gets disseminated;

- perceptions of the value of interventions to promote research use;

- outputs from research;

- changes in practice and policy;

- outcomes for service users.

The link between research dissemination and outcomes is described in terms of a chronology developed by Weyts *et al* (2000) as follows:

- reception;

- cognition (digesting, understanding);

- reference (changing perspective);

- effort (information starts to influence action);

- adoption (continues to influence action);

- implementation (consolidation of adoption),

- impact (positive outcome follows).

- (Weyts *et al*, 2000, adapted from Knott and Wildavasky, (1980)

1.4 Methodology of Current Project

1.4.1 Overview

The project consists of three separate elements: an international literature review on research utilisation issues in the relevant sectors; the gathering of data and the views of managers and practitioners on research utilisation in practice and a review of relevant knowledge brokering mechanisms and web-based research resources.

1.4.2 Review of the Literature

The review of literature on putting research evidence to work, some of which will be presented in Chapter 2 and some in Chapter 4, was conducted by firstly searching for articles, books and policy documents that focused on the utilisation of research evidence and secondly by reviewing their contents under a number of specific themes. A number of policy documents and research based articles provide knowledge on this subject, though there is a general view that, in the fields of social care and social science, the impact of research on practice is not strongly evidenced, particularly in comparison with the health sector (Wilson and Douglas, 2007; Gambrill, 2006, Barnardo's, 2000). It was notable that most of literature sourced and reviewed was in the social work/social care area, and there was a dearth of material on research utilisation in other sectors. This inevitably shaped the orientation and implications of the literature review. Another limitation was the fact that the perspectives presented in the literature were mainly those of the research users rather than research producers, illustrating another gap in knowledge. The focus of the literature review was on evidence based or informed practice. Nevertheless, many of the articles, books and reports also covered the topic of evidence based policy and were included once the topic practice was either a primary or an equal focus of attention.

The objective in this phase was not to produce a systematic review[1] of literature, but four substantial reviews of work across the sectors of justice, education, health and social care, including two carried out in the UK (SCIE, 2004 and Barnardo's, 2000) and two in Australia (Lewig *et al*, 2006 and Holzer *et al,* 2008), which have provided extensive and in the former case, comprehensive and systematic reviews, of the literature on research use in social care, including child welfare. A later book providing an overview of the work carried out in the Research Unit for Research Utilisation (Nutley *et al*, 2007) has synthesised many of the international research studies on the topic of using research evidence at practice and policy levels and also covers the areas of justice, education, social and health care. These documents merge comprehensive literature reviews with empirical findings and have provided

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[1] Systematic Reviews, as defined by the Cochrane Collaboration use pre-planned methods and an assembly of original studies that meet their criteria as 'subjects'. They synthesize the results of an assembly of primary investigations using strategies that limit bias and random error.

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conceptual frameworks for understanding the nature of research utilisation in the social care field, including the barriers and facilitators to its use.

This literature review has given extensive consideration to the aforementioned publications and has included many of the studies cited within them. It has also searched for additional studies published between 2006 and 2008 that were not included in the earlier publications. Database searches were conducted using the Scopus[2] and Web of Knowledge search engines[3]. Despite the increasing use of the term 'evidence informed' research, this keyword produced no useful results. The terms 'evidence based practice' 'research utilisation, 'knowledge transfer' and 'research dissemination' were used in combination with 'social work', 'social care', 'child welfare' and 'children's services' to search research journals. For cross-checking purposes, the online indexes of relevant publishers were also searched, including Sagepub, Oxford Journals Online, Synergy (Blackwell Publishing), Taylor & Francis Journals and Wiley Interscience. The Index to Theses[4] was also consulted.

A number of the articles identified in the searches concerned the topic of 'intervention' research, i.e. the production of knowledge that guides practitioners towards effective interventions (Proctor and Rosen, 2008), and case studies that gave examples of evidence informed practice in operation. Many of these were excluded, and only those articles and papers that directly addressed implementation, i.e. 'the production of knowledge that can help practitioners actually use and apply responsibly and reliably in practice the products of intervention research' (Proctor and Rosen, 2008: 287) were retained. The review examined articles, books and reports that discussed empirical studies and discussions on the dissemination and utilisation of research, as well as means of promoting research use, primarily in practice.

Relevant bibliographies were also searched for books, articles and official publications on the topic until a degree of saturation was reached. Some of the earlier published materials cited in the aforementioned reviews were also sourced and analysed. The literature review was restricted to literature written in English. Most of the materials originated in the UK, Australia or the US, though some Canadian, Belgian and German material is also used.

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[2] Scopus is an abstract and citation database of peer-reviewed literature and quality web sources. Scopus covers more than 15,000 peer-reviewed journals in science, technology, medicine and social sciences. Scopus offers citation searching, an important feature that until recently has been the exclusive province of ISI's Web of Science.

[3] The Web of Science provides seamless access to current and retrospective multidisciplinary information from approximately 8,700 of the most prestigious, high impact research journals in the world. Access to the Science Citation Index (1945-present), Social Sciences Citation Index(1956-present), Arts & Humanities Citation Index(1975-present).

[4] This database indexes and provides summaries of theses accepted for higher degrees by the Universities of Great Britain and Ireland. Coverage: 1716 onwards.

Themes were developed from the content of books, articles and reports. These were in line with the original research objectives, and comprised of 'evidence based' and 'evidence informed' research, the benefits of promoting evidence based practice, critiques of evidence informed practice, barriers and facilitators to research use, and models and frameworks employed to promote knowledge exchange.

1.4.3 Consultations with Irish Stakeholders

Consultation with stakeholders was carried out by focus group discussions and was supported by a questionnaire survey with staff from four industry sectors (education, justice, community and voluntary services, and health and welfare services) who attended a total of four network seminars conducted by the CAAB. The main purpose of these seminars, each of which lasted two days, was to bring together staff working in children's services and provide an opportunity for discussion on services available and on key issues affecting the education, youth justice and health sectors. Invitees included policy makers but mainly focused on managers and practitioners.

The seminars were held on four different dates between May and June 2008 and in different geographical areas covering the four main Health Service Executive (HSE) areas. Participants were asked to complete questionnaires during a specific allocated time slot on the first day of each seminar and the focus groups were conducted on the second day.

The research tools used were a questionnaire (see Appendix B) for the survey, and a topic guide (see Appendix C) for the focus groups. The questionnaire had been developed in line with the issues raised in the literature review particularly with regard to access to and application of research methods, and the barriers and facilitators that influenced this

Attendees were also asked to participate in focus group discussions on the second day of each of the seminars, so that the same participants took part in both phases of data collection, with a fall out of around 20% between the two days. Over the four different network seminars, a total of 13 focus groups were conducted, with a total of 122 participants with eight to ten participants at each group. The composition of the groups had been designated by the CAAB staff, who allocated a representative number from each sector to each group. Background information about the participants is presented in Chapter 3 of this report.

The focus groups covered similar topics to the questionnaire, the objective being to elicit more fulsome discussion of the different areas. The aim of the focus groups was to generate discussion on the following topics:

■   the factors that most influenced practice;

- the ways in which research evidence was used;

- the relevance of research to practice and the benefits of accessing and applying it;

- the barriers to research utilisation;

- factors that facilitated research use;

- suggestions for further promotion of research utilisation.

The groups were facilitated by designated persons appointed by the CAAB and each one lasted approximately one and a quarter hours. The focus group findings essentially represent reflection on some of the more complex issues that required a more open-ended exploration.

Four of the focus groups were recorded and transcribed in full. Notes were taken on the remainder. Analysis of the focus group findings was carried out using Nvivo Version 8, a qualitative research analysis package that ensures all data are visible for analysis, thus pre-empting selective interpretation. The findings were coded thematically using 'nodes' which were then sub-divided into trees or sibling nodes (as per the NVivo programme) and labelled accordingly. Secondary analysis then took place. The initial coding was cross checked between the two researchers and subsequently refined. In the write-up of the focus group findings, direct quotes are taken only from the sessions that were transcribed fully.

The objectives of the survey, which was based on mostly closed questions, were to:

- obtain some demographic information about participants in order to provide a context for the reporting of findings;

- ascertain staff members' access to research evidence, including barriers and facilitators;

- ascertain the extent to which staff members applied research evidence in their work, the obstacles that prevented them from doing so, any methods by which they were facilitated and their own participation in research;

- ascertain what types of research evidence were considered most useful including preferred methods of dissemination. (see Appendix D for survey results)

The total number of completed questionnaires was 155, which represented 93% of the total number of attendees at the four network seminars. The high completion rate was achieved by giving participants a specific period of time during the seminar programme to complete the questionnaires. The questionnaire data were analysed through SPSS and from this a number of tables were drawn out. These included some bivariate analyses with descriptive cross-tabulations of responses. The main

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objective of the analysis was to produce a descriptive account of the findings; therefore no inferential tests were applied.

1.4.4 Review of Research Brokering Mechanisms and Web-Based Resources

Research brokering mechanisms and international websites were identified by consulting with staff working in some of the knowledge brokering organisations and other experts in the field of research dissemination. While many organisations provide information and reports on their websites, this review was confined to those that placed a particular emphasis on the importance of providing practitioners with an evidence base for their work. Chapter 5 provides a review of the products and services that are provided by a sample of research utilisation and knowledge brokering organisations to help put research evidence to work.

1.4.5 Limitations of the Project

This project has a number of limitations. The quantitative and qualitative findings reflect the views of those attending the seminars only, and should not be interpreted as being representative of Irish children's services in general. The sample of seminar participants is reflective of children's services, nevertheless, the employment data by sub-sector, necessary to weight the sample and extrapolate the findings to the population as a whole, was not available. The quantitative findings provide an overview of the 150-plus people who participated in the consultation process. Figures and percentages shown for individual sectors (e.g. health and welfare, education etc.) should be interpreted as purely reflective of the views of workers from these sectors who attended the network seminars and should not be interpreted as being representative of the views of their sectors as a whole.

It could also be inferred that staff who attend network seminars are generally those who are open to knowledge exchange, so this may skew the findings to reflect a higher level of research use and interest in the topic of research utilisation.

The pre-determined nature of the survey questions was an obvious constraint on the responses provided, and while the focus groups provided opportunity for fuller discussion, they were also subject to limitations. The 13 focus groups were conducted simultaneously at the different seminars (three groups held at the same time at three network seminars and four at another), and of necessity were facilitated by different people. While in theory the discussion was shaped by the topic guide, individual facilitator styles may have had a bearing on the dynamics operating in the groups. Nine of the groups were recorded by note taking only, which curtailed the analysis of the discussions; nevertheless there was consistency in the issues raised across the different groups.

The findings that emerged from this study are dependent to an extent on the context. The absence of a database on Irish research and the relatively low number of organisations in Ireland that disseminate research compared with the UK, Australia or the US may have a bearing on the rate of research utilisation in this country. Likewise, the absence of audit, national standards and a low use of performance measures in children's services may also contribute to inconsistent application of evidence to practice. These two factors may limit the transferability of the findings from this study to other jurisdictions.

1.5   Report Structure

Chapter 2 of the report presents a review of literature on research utilisation. Chapter 3 then reports on the consultations with Irish stakeholders. Chapter 4 discusses knowledge exchange and Chapter 5 provides a review of knowledge brokering organisations. Chapter 6 presents a summary of key findings, conclusions and recommendations.

2 REVIEW OF LITERATURE ON RESEARCH UTILISATION

2.1 Chapter Introduction

The literature reveals a number of factors relevant to the use, or lack of use, of research evidence in policy and practice in services for children and young people. These factors range from the philosophical and sociological to the cultural and organisational, and include both abstract and very practical considerations on the topic. However, for the sake of simplicity and in keeping with the general aspiration in the literature towards simplifying research findings and drawing out their implications, the focus will be on the following areas: evidence based and evidence informed practice (Section 2.2), barriers to research use in organisations (Section 2.3), and factors that promote research use in organisations (Section 2.4). Section 2.5 presents the key chapter findings.

2.2 Evidence Based and Evidence Informed Practice

2.2.1 What is Evidence Based Practice?

Eileen Gambrill, a well known US based social work academic and strong advocate of evidence based practice considers evidence based practice (EBP) to have provided an alternative to 'authority based decision making which is founded on consensus, anecdotal experience or tradition' (2006:339). She describes it as a philosophy and process designed to forward effective use of professional judgement by minimising biases such as 'jumping to conclusions' by employing 'quality filters' when reviewing research findings.

According to Mullen *et al* (2008) the concept of evidence based practice originally developed in medicine during the early 1990s, with an emphasis on training medical students in critical evaluation skills in order to strengthen the scientific base for decision making. During the following decade it began to receive a lot of attention in related health and paramedical professions, and is now part of common parlance.

Typically, EBP involves the steps of formulating problems or questions, sourcing the best evidence to answer the question, critically appraising the evidence for validity, integrating the evidence with practice experience and specific contextual factors, taking action and then evaluating effectiveness (adapted from Mullen *et al*, 2008).

However, greater application of the concept within social care settings has led to some modifications in the way in which it is considered, and it has evolved to reflect the somewhat unscientific base from

which social care practice operates. Some differences between the American and British interpretations of evidence based practice have been observed by Shaw (2005) who observes that in the USA, the 'banner of evidence-based practice has been a rallying-point for improving direct practice' whereas in the UK , the focus has been more on outcomes for service users.

Although many policy documents, including the Agenda for Children's Services (Minister for Children, 2007), refer to 'evidence based practice' the term 'evidence informed practice' is now commonly used in the literature to take account of the myriad influences on practice operating within an organisational and wider environmental context, including policy, values and ideologies, organisational culture, resources and politics, practitioner skill and service user views. (Nutley *et al,* 2007; Research in Practice, 2006; Lewig *et al*, 2006).

It has been argued that there is in fact very little evidence to suggest that policy and practice in the social care field draws extensively from research, certainly in comparison to medicine where research implementation is more frequently referred to and worked through in terms of implications for practice (Barnardo's, 2000). Indeed, the concept of 'evidence' is itself open to different interpretations and needs to be seen in relation to, for example, professional experience and the views of service users (Nutley *et al*, 2007; Research in Practice, 2006).

As Barratt and Cooke (2001:2) have observed, practice should be 'informed by the best available evidence of what is effective, the practice expertise of professionals and the experience and views of service users'. Nutley *et al* (2007) also point out that the term 'evidence informed' practice is intended to denote the role played by evidence, while acknowledging that other factors continue to exert some influence. Davies *et al* (2008) dispute the related term of 'knowledge transfer', pointing out that 'knowledge interaction' would better depict the 'messy engagement of multiple players with diverse sources of knowledge'. They suggest that 'knowledge intermediation' might begin to articulate some of the managed processes by which knowledge interaction can be promoted. In an earlier paper on research impact completed for the Economic and Social Research Council, Davies *et al* (2005:18) emphasise the importance of context when they refer to the unpredictable 'policy swirl' which sees issues surface and re-surface as they compete for policy or organisational attention, a point also emphasised by Waddell *et al* (2005) who refer to the inevitable ambiguity that complicates the take-up of research by policy makers.

A similar claim that the impact of research on decision making in social care is 'subtle' and 'indirect' is made by a UK-based organisation, Research in Practice, which points out that the nature of research in social care is that it is often more about increasing background understanding, giving insights into the nature of problems, changing attitudes and beliefs and generating ideas rather than prescribing action (Research in Practice, 2006). In fact, Research in Practice is quite firm in its assertion that:

'The practitioner goes through a considered and thoughtful process where a range of factors (including research) influence the judgement or proposal made. It is this process that we call evidence informed practice'. (Research in Practice, 2006:14)

For the purpose of this review, however, the term 'evidence' will be treated synonymously with 'research evidence', and regarded, as Davies *et al* (2005) define it, as verifiable and the subject of broad consensus. The terms 'evidence based' and 'evidence informed' will both be used, given the still widespread use of the former term in both policy and research literature.

2.2.2   Why Promote Evidence Informed Practice?

The Agenda for Children's Services (Minister for Children 2007) has affirmed the commitment already expressed in the National Children's Strategy to evidence based and outcomes focused delivery of services. To this end it encourages policy makers, senior managers and front line practitioners to engage in reflective practice and ensure that services and interventions have been developed on the basis of the best available scientific research evidence.

UK policy has also recognised the important part that research plays in the democratisation of welfare, by providing a medium whereby people who use and provide services can be directly involved in determining what outcomes matter (Marsh and Fisher, 2005). Nutley *et al* (2007) argue that ways in which research is combined with other forms of evidence and knowledge have important impacts on the nature and quality of public service, and assert that more deliberate and judicious engagement with high quality research should be an important goal of public service reform.

From a US perspective, the move away from 'authority-based' decision making is considered by Gambrill (2006) to be one of the more desirable aspects of using evidence informed practice as well as a means of discharging the obligations that underpin professional codes of practice, such as a greater transparency in policy making, encouraging a systematic approach to improving services and encouraging 'honest brokering' of knowledge. In fact, Gambrill is extremely critical of a tendency in social work literature in particular to what she describes as 'business as usual' by which she means continued use of unrigorous research reviews of practice and inflated claims of effectiveness, lack of attention to ethical issues such as involving service users and the practice of simply re-labelling models of practice as evidence based with no mention of critical reviews arguing otherwise. A similar propensity has been noted by Trinder (2000:147) who identifies a different style of evidence use between 'pragmatists' and the 'empirical practice/what works camp', the former tending to draw indiscriminately on a range of research without attending to any type of hierarchy of evidence of effectiveness, and the latter adhering to experimental tradition, aligned more closely with medical

science. In an evidence based organisation, according to Gambrill, questions such as the following are continuously posed:

■ What was the strength of the evidence on which [this decision] was based?

■ How good is the evidence used to justify investment in this [new procedure]?

And evidence informed practitioners, according to Lewis (2002):

■ ask challenging questions about current practice;

■ know where and how to find relevant research;

■ are aware of research about what is likely to improve outcomes for children and families;

■ consider the implications of research in different case contexts;

■ reflect on their experiences in order to learn;

■ measure the impact their work is having for users;

■ listen to what users have to say about services;

■ are explicit about how research, experience and user views have informed their conclusions, proposals and decisions;

■ share their knowledge and best practice with others.

2.2.3 Critiques of EBP

The concept of evidence based/informed practice is not, however, without criticism, not the least of which argues that it has a propensity to undermine 'traditional professional practice' and legitimise the managerialism that is creeping into social work whose ambiguous, complex and uncertain nature does not easily lend itself to technical rationality (Webb, 2001, Parton, 2000). Trinder (2000) has argued that the principles applying to evidence application in a science like medicine, where an element of cause and effect may be anticipated (i.e. medication is likely to have a predictable effect), cannot be replicated in areas such as social work and probation, where clients come with their own histories and understanding, embedded in social relationships and far from being passive recipients of an intervention, are constantly engaging and disengaging. Nonetheless, evidence based practice has become firmly embedded in the healthcare and education sectors, with social care lagging somewhat behind (Wilson and Douglas, 2007; Gira *et al,* 2004; Shuerman *et al*, 2004; Lavis *et al*, 2003).

Studies in the US and UK indicate a lack of evidence to support the view that practitioners in social care are using research to inform their practice (Gambrill, 1999; Walter *et al*, 2004; Rosen, 2003). This chapter will go on to outline some of the reasons for the slow take-up of this process followed by what we know about the factors that promote research use.

2.3   Barriers to Research Utilisation

2.3.1 Overview

Most of the literature on research utilisation and evidence based/informed practice outlines the barriers that militate against the use of research by policy makers, managers and practitioners. These can be classified into different types: practical barriers facing individuals, barriers relating to the nature of the subject, barriers relating to the nature of research evidence and organisational barriers.

2.3.2 Practical Barriers Facing Individuals

Looking at the barriers facing individuals, studies that have elicited the views of policy makers, managers and practitioners have identified practical obstacles such as **lack of time** for accessing and reading research (Barnardo's, 2000; Walter *et al*, 2004; Hegell & Spencer, 2004; Lewig *et al*, 2006, Wilson & Douglas, 2007). **Limited or no access to research materials** has also been identified in several studies (Holzer *et al*, 2008; Lewig *et al*, 2006; Barratt, 2003; Percy-Smith *et al*, 2002, Booth *et al*, 2003, Wilson & Douglas, 2007).

 A more deep-rooted individual barrier is a **lack of confidence in research findings**, and a sense that decision making is best based on individual professional judgement (Barnardo's, 2000; Lewis, 2002, Hegell & Spencer, 2004, Sheldon and Chilvers, 2000; Wilson & Douglas, 2007). What Proctor and Rosen (2008:288) describe as 'carryover of lay modes of thinking into professional practice' adds to practitioners' lack of trust in research and a reluctance to take on new ideas. This is compounded by 'lack of empathy' on the part of service providers for researchers with a perceived divide between 'those who think and those who do' (Weyts *et al*, 2000).

Gambrill (2006) has identified the trait of 'self-deception' whereby service providers continuously faced with human misery feel helpless about their capacity to relieve it, and 'fool themselves' into thinking that the services they are currently providing are effective, thus excluding or minimising the possibility of challenging or reviewing their actions.

Other personal barriers that were identified included **lack of awareness** on the part of practitioners of the relevant literature as well as **deficiencies in the skills of research and critical reasoning** (Brady & Dolan, 2007; Walter *et al*, 2004; Proctor and Rosen, (2008); What Works for Children Group, 2003 Barnardo's, 2000). Barratt (2003) suggested that reluctance to formally cite research can result from a fear of getting it wrong and a lack of confidence in working with evidence as part of a managed and structured process.

2.3.3 Barriers Relating to the Nature of Research Evidence

Barriers relating to the nature of research evidence have been identified in numerous studies. One of the most often cited was, on the one hand, the **lack of fit** between the complex nature of the 'work' of social care including the varying circumstances of service users and on the other, **the simplistic and un-contextualised version of service provision** that can be presented in research which carries false assumptions about its technical nature and propensity to remedy once 'good practice' is adopted (Schon, 1995; Hannes *et al*, 2007; Stevens *et al*, 2007 Lewig *et al*, 2006 Small, 2005; Barton & Welbourne, 2005; Walter *et al*, 2004, Doherty, 2000; Trinder, 2000).

Lack of specificity in research, and the tendency for studies to aggregate and assume 'group relevance' has been cited by Pelton (2008:30) as a barrier to its usefulness. Examples are cited of 'correlational' research that demonstrates strong associations between problems like poverty or domestic violence and child abuse and neglect without specifying precisely which variables are influential, thereby creating a 'logic' that leads to the misapplication of research, for example, as the basis for risk assessment tools. Such misapplication, Pelton argues, can result in a broadening in the definitions of child abuse and neglect, thus widening 'the coercive net of the child welfare system'. However, Marsh and Fisher (2008) strongly disagree with the notion that practice is a 'no-go zone for rationality, planning and logic'. They argue that rather than trying to impose an abstract and decontextualised framework of evaluation, it would be possible to apply a narrative model based on the experiences of practitioners and their accounts of how they evaluate their work.

Gaps in research knowledge and **the relevance of research** to practice were also noted in the literature (Kindler 2008; Sheldon and Chilvers, 2000; Proctor and Rosen, 2008). Small (2005) noted that the personal and professional interests of researchers may differ from the questions, which are often determined by service users, addressed in practice situations.

On the other hand Hayes (2005) also highlights that a combination of active gate-keeping by senior managers and the suspiciousness and low priority given to research participation by practitioners can pose considerable **obstacles to the conduct of research.** Similar difficulties were experienced by Munro (2007), who highlights the expensive delays caused by stringent ethical requirements and asks if the gate-keeping practices of practitioners might actually deny service users the opportunity to make an informed choice about whether or not they want to be involved in research. A related issue, highlighted in a review prepared by Shaw *et al* (2004) for the UK Economic and Social Research Council, is that there is a **lack of 'fit'** between the types of research conducted by social work and social care professions, which must take account of user interests, and the bodies that traditionally fund research, who tend to apply a narrow definition of 'research user'.

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Similarly, in an Irish overview, Brady and Dolan (2007) draw attention to the '**singular function'** of research that focuses on an adversity or a specific population. The plethora of organisational contexts in which evaluations of practice are carried out can create challenges, according to Barton and Welbourne (2005), who point out that the different meanings attached to widely used terms such as 'child abuse' and 'inter-agency working' can impact on the validity of research.

Cnaan and Dichter (2008) in a study based in Pennsylvania highlight a number of factors that illustrate the **complexity of social work practice** as a subject for scientific research, including the fact that it is both a science and an art with qualitative improvisations often employed that are not easily quantified or replicated. Small (2005) also identifies 'epistemological issues related to the nature of scientific and practice based knowledge and theory. He quotes Caplan's (1979) theory of 'two communities' , which depicts researchers and policy makers as living in separate 'worlds' with often different and conflicting values (p.459). According to Caplan, social scientists are most concerned with science for its own sake and for what it can contribute to the knowledge base, and the contrasting interests of policy makers who are interested in more practical and immediate issues that require a response. This bears a resemblance to the 'three cultures' theory proposed by Shonkoff (2000) who identifies the three areas of science, policy and practice as representing separate cultures. He suggests that scientists are engaged in a 'quest for knowledge' (p.181) and are often more preoccupied with the methods used to produce results than the results per se. He points out that policy makers are driven by political, economic and social forces that reflect the society in which they live, and that their use of evidence is often selective. Practitioners, according to Shonkoff's theory, are 'grounded' in scientific inquiry but also have to respond to client need in a somewhat unstable environment so that their actions may be determined as much by 'clinical expertise' born of experience as by empirical evidence.

Shonkoff does not claim that one culture is superior to the other, but that mutual benefit may be gained by the development of conduits through which information may be exchanged between them. He advocates what he defines as a cross cultural strategy, which promotes understanding of the characteristics of each culture, for example how different rules of evidence govern their 'distinct worlds', the extent to which their activities are determined by ideology and values, and the impact on social care of new types of public service management. Greater understanding of cultural differences, he claims, will facilitate a more discerning transmission of knowledge from the academy to the policy and service delivery environments.

The **sheer volume of available research** has also been cited as a dis-incentive to its use (Hannes *et al,* 2007; Walter *et al*, 2004; Nutley *et al*, 2007) and this leads to a further problem of quality. As Shuerman *et al* (2004:310) comment, within the substantial body of research on the effects of social interventions, some evaluations have design flaws that make their 'confidently stated conclusions'

suspicious and some results are at variance, leading to ambiguity and confusion as to how they should be applied. There are also critics who claim that research does not sufficiently recognise diversity (Bostock, 2004: Singh, 2005).

Focusing on **the way that research findings are presented,** the tension between the needs of service providers for research in an accessible and user-friendly format and the priorities of the academic system is demonstrated as a barrier in several studies (Nutley *et al,* 2007; Walter *et al*, 2004; Lavis *et al,* 2003; Barnardo's, 2000). As Lewis (2002) argues, the type of short-term contracts commonly held by research staff, coupled with pressure to publish in theoretical and peer reviewed academic journals, means there are few incentives for researchers to spend time discussing research findings with practitioners or stay with the issues to convert evidence into knowledge.

Landry *et al.,* (2001:335) has argued that scholarly journals neglect to adapt to content, form and mode of diffusion to meet the 'particularity' of users. Small (2005) argues that for these reasons, relevant research findings often do not reach those who would benefit from them. He also points out that a lack of skill among practitioners in interpreting research findings, particularly those of a statistical nature, can cause misunderstanding about what data actually represents.

The manner of presentation is also significant. As Holzer *et al* (2008) comment. where research contains **too much jargon or a verbose writing style,** employs too many statistics and is written in an inaccessible way, it is less likely to be accessed or applied. Others point out that research fails to address implications for practice, is inconclusive and does not answer the sort of questions that pre-occupy policy makers and practitioners and is not accorded a great deal of respect in the services sectors (Nutley *et al*, 2007; Sheldon and Chilvers, 2000). Marsh and Fisher (2005) are critical of the assumptions that state the application of research findings is obvious.

The methods by which research is **disseminated** are also considered noteworthy in the literature. Landry *et al.,* (2001) argues that one-way flow of information and traditional dissemination approaches are ineffective, and that the mere reception of knowledge by potential users does not imply its use. He further points out that the main problem in under utilizing research is the lack of interaction between researchers and their potential audiences.

Barriers in respect of **divisions between the research and practice communities** are also cited in the literature. Marsh and Fisher (2008) argue that while much of the literature criticises practitioners' under use of research, part of the problem is that researchers fail to engage with practice. Landry *et al* (2001) also highlighted this split, suggesting that research projects based on university internal funds are less likely to be used than those funded by external sources, because researchers funded by

external sources are more 'outward looking' and therefore more sensitive to the needs of users located outside the academic milieu.

2.3.4 Organisational Barriers to Putting Research to Work

Organisational barriers to research utilisation that have been identified include **the disruptive effect of organisational change** (What Works for Children Group, 2003) and the lack of sufficient investment in providing materials for staff and in training them how to find and use evidence. However, the most commonly cited organisational barrier is a lack of 'research culture' within agencies and services. Several studies pointed out that a linear relationship between the availability of evidence and its use should not be assumed, and that some element of mediation or active dissemination is an important element in the promotion of research use (Mullen et al, 2008; Gira *et al,* 2004; Research in Practice, 2006; Holzer *et al,* 2008). The Barnardo's (2000) review cited structural and organisational barriers including lack of resources to support research implementation, absence of an evaluative culture and lack of co-ordination between practitioners, research and development sections, audit, education and training.

Booth *et al* (2003:191) argue that a **workplace culture of 'action' rather than 'reflection'** and the absence of information resources and research skills training make social care practitioners less likely to consult research to improve their practice. Likewise, Barratt (2003) suggests that the oral, rather than knowledge based culture within social services results in staff valuing direct practice experience to the exclusion of other forms of learning.

Both Booth *et al,* (2003) and Barratt, (2003) identify **the 'blame' culture** that exists in the social work profession that discourages challenge and leads to cultural resistance to research. 'Organisational inertia' is another factor identified by Weyts *et al* (2000), while Gambrill (2006) cites organisational preferences for 'authority based' practices and policies as a barrier, including a reluctance to be transparent, inflated claims and tendencies towards labelling things as evidence based when they are not.

Interdisciplinary differences between education, health and social care professionals, in the way that they prioritise different research methods, draw on different bodies of research and have different ideas about how to link research and practice, can also result in organisational inconsistency about research use (Research in Practice, 2006).

2.4   Factors that Assist Research Utilisation

2.4.1 Overview

Adopting a similar framework, the literature about facilitators to research use is considered under the headings of individual use, the nature of research evidence, the manner of its presentation and organisational factors.

2.4.2 Factors that Assist Individuals to Use Research

At an individual level, the **acquisition of a certain skill level** can facilitate the application of research to practice. While practitioners' perceived deficits in critical appraisal skills have been cited as barriers to research utilisation, Gambrill (2006) considers their lack to be a questionable excuse for not applying evidence based practice. She argues that ethical obligations require practitioners to learn skills if their limitations harm client welfare. She points to user-friendly sources to assist learning, and suggests that practitioners can interrogate research studies using questions such as:

- Is the question addressed clear and relevant?
- Do the authors describe their search criteria?
- Was a thorough search conducted using relevant databases?
- Did the search cover unpublished as well as published work?
- Were rigorous criteria used to review research?

Furthermore, Gambrill suggests a framework for the application of evidence based practice by front line practitioners by proposing five stages of knowledge use:

1. Form a question that describes client, course of action, alternative course of action and intended results.
2. Search existing knowledge on how to proceed.
3. Assess the relevance of available knowledge for this case.
4. Translate relevant data into an action plan and carry it out.
5. Evaluate outcomes against intended goals.

Stevens *et al* (2005) similarly suggested that in order to promote evidence based practice, practitioners need to be able to frame specific and well-crafted questions. Mullen *et al* (2008) add a service user dimension to the above framework by pointing out the need to include client preferences and knowledge of the clients' state and circumstances.

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Individual motivation as a facilitator was also identified in an evaluation carried out on What Works for Children, an organisation dedicated to promoting research use. Stevens *et al* (2005) noted that some individuals were keener about asking questions than others, reflecting a theme noted earlier by Walter *et al* (2004).

2.4.3 Factors Concerning the Nature of Research Evidence that Promote Utilisation

The nature of research evidence and its relevance are also variables that determine its potential for utilisation. Nutley *et al* (2007) highlight the importance of the quality of research, and the credibility of its source, the clarity and incontestability of the findings, the support with which it was commissioned and the synchronicity between the study and local priorities, needs and context. Walter *et al* (2004) suggest that where research findings are contradictory, or highly qualified, then researchers should provide guidance on their interpretation.

The process by which research is disseminated is also considered crucial. Mullen *et al* (2008: 328) quote the definition of dissemination outlined in a call for tenders issued by the National Institute of Mental Health (2005) as follows: 'dissemination [is] the targeted distribution of information and intervention materials to a specific practice audience'. That successful dissemination of research evidence is highly dependent on the user-friendliness of its presentation is agreed in the literature, which highlights that reports should contain strong, clear messages aimed at interesting, stimulating and bringing about the sort of changes in practice that the research suggested. Interpretations of what data actually implies for policy should be offered, and condensed summaries should be available.

Accessibility requires that research is relevant and applicable, written in a clear style with low inclusion of statistics and tables (Mullen *et al*, 2008; Holzer *et al*, 2008; Weyts *et al*, 2000; Duncan 2005; Barnardo's, 2000). Landry *et al* (2001) suggest adapting research so that reports are more appealing and readable. It is incumbent on those undertaking policy relevant studies to include recommendations that speak directly to policy and practice concerns, and Walter *et al* (2004) recommend active dissemination of electronic and print tailored materials for targeted audiences, along with enabling of discussion about the meaning and application of findings.

For a number of reasons, including their propensity to convey messages from a large number of sources, as well as the credibility associated with numbers of different studies that produce similar data, Weyts *et al* (2000) favour research overviews and summaries such as the Department of Health (UK) 1995 publication *Messages from Research*. They also point out that overviews offer a more complete picture than individual studies and provide opportunities for underlying messages to be revealed. Summaries were also favoured by the Barnardo's (2000) review, which observed that simplifying access to overviews of evidence rather than expecting practitioners to undertake complex

and time-consuming searches themselves is recommended as an appropriate method of increasing use of evidence in practice. They also suggested direct mailings, keeping journalists informed, taking care to use a language style that will engage interest, being pro-active about contacting organisations rather then expecting staff to attend expensive seminars. The Barnardo's review also identified some methods of dissemination which were regarded as under used, such as work with practitioners, consolidation of findings, greater user involvement, use of CDs, media work, website development, targeted publicity, links to existing databases and audiotapes.

A highly esteemed method of collating research evidence for dissemination known as the 'systematic review' has been gaining increasing popularity over the two past decades, principally because of its connotations of robustness and integrity. The systematic review originated in medical science; its development has been credited to a medical epidemiologist called Archie Cochrane and its function is to gather, critically appraise and summarise the results of studies from methodologically sound research designs. Hannes *et al* (2007:750), who have developed a Belgian collaboration dedicated to the production of systematic reviews, define a systematic review as: 'a methodologically sound review of the effects of a well-described intervention in a well-described population… it aims at providing a clear answer to the question: what works?… [or]… 'what works under which circumstances?' Reviews can cover materials such as journal articles, text books and unpublished material, and are included and excluded on the basis of specific criteria.

Research in Practice (2006) affirm the value of systematic reviews, using the term 'pre-washed salad' to illustrate the way that key messages have been distilled from a number of studies in a systematic fashion that is more reliable than 'cherry-picking' single studies. It is argued that the production of systematic reviews by researchers will guarantee a more efficient use of scientific findings within the field of social sciences and contribute to a more evidence based approach towards science and society (Hannes *et al*, 2007). The best known systematic review organisation for the social sciences is the Campbell Collaboration, also known as C2 (Schuerman *et al*, 2002), which consists of three groups, social welfare, education and criminology (www.campbellcollaboration.org). Systematic reviews are also published by Research in Practice (www.rip.org.uk/evidencebank) and the Evidence for Policy and Practice Information and Co-ordinating Centre (http://eppi.ioe.ac.uk) which publishes research in education. As Appendix D of this report will illustrate, a number of internet based resources dedicated to the provision of research overviews provide a valuable contribution to the dissemination of research evidence in a user-friendly format.

Systematic reviews are only useful, however, where there is an existing substantial knowledge base on the subject. It is also important for all stakeholders in the different sectors to identify gaps and develop a 'road map for research' (Bromfield and Arney, 2008).

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Nutley *et al* (2007) refer to the model for dissemination developed by the US National Centre for the Dissemination of Disability Research, which has outlined four elements of effective dissemination:

- the credibility of researchers, their orientation and their relationship with users;

- the content in terms of the quality of research, its relevance and any competing evidence;

- the medium used in terms of its capacity to reach users, its timelines, user-friendliness, flexibility, clarity and attractiveness;

- the relevance of the research to the needs of service users, their readiness to change, their preferred dissemination sources and their capacity to actually use the information.

Landry *et al* (2001) go further to suggest that commitment to dissemination should be a factor considered by funders when making decisions on research applications, and that applicants could be required to show evidence of their efforts over the previous five years at dissemination and product adaptation.

2.4.4 Organisational Factors that Promote Research Utilisation

Several studies highlighted the proposition that promoting the use of research within organisations requires the application of a systemic perspective. Lewis (2002) has suggested that rather than assuming a direct relationship between knowledge and practice, it would be better to conceptualise a 'knowledge chain' moving from research findings, through interpretation of these, to evidence, and through contextualising the evidence and adding the perspectives of practitioners and service users.

The advice to promote a positive research culture within organisations features frequently in the literature (Holzer *et al*, 2008; Mullen *et al*, 2008; Barratt & Cooke, 2001; Walter *et al*, 2004; Barnardo's, 2000; Research in Practice, 2006, Walter *et al*, 2004). Breaking down this concept into components revealed several elements. For example, Wilson and Douglas (2007) identified 'time, opportunity and a culture of support' and 'regular planned time to reflect on and carry out a literature search'. They also identified support for evidence based practice within supervision, and provision of a discussion forum to encourage interpersonal information sharing and dissemination. Importantly, Wilson and Douglas emphasised the need for approval and valuing of these ventures by senior managers. The latter finding was also highlighted by (Holzer *et al*, 2008; Baratt *et al*, 2003 and Barnardo's, (2000). Walter *et al* (2004) suggest the use of reward systems in career development, and a positive 'stance' on the part of senior personnel towards research use. From their extensive review of the literature, Walter *et al* (2004) outline a number of tasks for the promotion of a positive research culture, including the following:

- developing a culture of reflection and learning and evaluation;

- ensuring that protocols are informed by research;

- supporting continuing professional education;

- developing specific development roles;

- identifying practice related themes and referring them to research funders;

- providing incentives and links to performance indicators.

Provision of training in critical reasoning as well as research methods, electronic learning, mentoring and case discussions have been identified (Walter *et al*, 2004; Barnardo's, 2000; Wilson & Douglas 2007) as factors that promote a research culture within organisations.

Having surveyed 1,229 Canadian social science scholars, Landry *et al* (2001:333) concluded that research utilisation is more dependent on factors regarding the behaviour of researchers' and research users' contacts than on the 'attributes of the research products'. They identify a number of variables involved in knowledge transfer, among which are 'linkage mechanisms' including informal personal contacts, participation in committees and transmission of reports to non-academic organisations. Landry *et al* claim that the greater the investment in linkage mechanisms, the higher the take-up and utilisation of research, and they argue that researchers should be incentivised financially to build the cost of linkage mechanisms into their proposals. In a different Canadian study that examined the role of health services research in two provinces, Lavis *et al* (2002) concluded that the interaction between researchers and policy makers, and the existence of a 'receptor' function in government are the conditions most favourable to knowledge transfer. They suggest that researchers and research funders should have more interaction with the potential users of their findings and, moreover, should consider such contact to be part of the 'real' work of research and not just an add-on while helping others to develop the skills required to utilise research. Likewise, they suggest that organisations should also create opportunities for such interactions. In a later paper based on a review of the literature and a broader study of service providers, Lavis *et al* (2003) provide a more detailed framework for knowledge transfer which address the questions of what knowledge should be transferred, to whom it should be transferred, by whom it should be transferred, how it should be transferred, and with what effect should it be transferred. They strongly support the provision of 'actionable' or what they colloquially describe as 'take-home' messages by researchers to research users, cautioning that these should represent the start rather than the termination of discussions. They also favour systematic reviews to ensure consistency. Targeted and audience specific messages were identified as the most appropriate. 'Opinion leaders' and those with strongest credibility are suggested as the most effective messengers. Like others, they emphasise linkage and exchange between researchers and decision makers, advocating the simultaneous development of a decision-relevant culture among researchers and a research-attuned culture among decision makers. The issue of linkage and exchange will be further developed in Chapter 4, which will give examples of collaborative practices.

Many of the above suggested methods by which organisations can support research utilisation are encapsulated in a practical guide, Research in Practice (2006), which offers 'firm foundations' for research use within organisations and echoes the conclusions of previous research overviews (Walter *et al*, 2004; Barnardo's, 2000) that a linear relationship between dissemination and research use should not be assumed. The importance of organisational support is highlighted; the Research in Practice guide breaks this down into five specific 'key foundations' classified as follows:

- Giving a strategic lead, which means nominating key personnel to lead, plan, implement and co-ordinate the necessary support for the implementation of evidence informed practice; clarify how and when research evidence needs to be used, identify 'champions' (a recommendation endorsed in several other studies, for example Walter *et al*, 2004, Nutley *et al*, 2007), setting objectives, planning actions and evaluating impact.

- Setting expectations, which means clarifying staff understanding of where they might access and apply research, embedding the use of evidence into practice by including it in selection and promotion criteria, including it in supervision and using it as a base for procedures and protocols and a focus for training.

- Encouraging learning from research, which may mean changing the culture from one that prioritises direct experience to one that values research, by asking challenging questions about practice, giving staff protected time and holding research based events.

- Improving access to research by setting up libraries, subscribing to journals, providing specialist help, distilling research for front line staff and disseminating high quality, user-friendly and relevant findings effectively.

- Supporting local research by focusing on outcomes and self-evaluation and systematically collecting user feedback.

2.5   Summary of Key Findings from the Literature

Evidence Based Practice

Evidence based practice involves the steps of:
- formulating problems or questions;
- sourcing the best evidence to answer the question;
- critically appraising the evidence for validity;
- integrating the evidence with practice experience and specific contextual factors;
- taking action;
- evaluating effectiveness.

Barriers to Putting Research Evidence to Work

Barriers include firstly, factors relevant to individual practitioners and managers:

■ lack of time;

■ lack of confidence and trust in research findings and a reluctance to take on new ideas;

■ lack of awareness of relevant literature;

■ lack of critical reasoning skills;

■ reluctance to formally cite research.

Barriers relevant to the nature of research material include:

■ lack of fit between research findings and the complex nature of the 'work';

■ lack of specificity and relevance in research;

■ gaps in research knowledge;

■ lack of willingness of practitioners to participate in research, tight gate-keeping and strict ethical requirements for the conduct of research;

■ sheer volume of research;

■ presentation of research that contains too much jargon and too many statistics;

■ the complex and theoretical way that research is presented by academics;

■ the way that research is or is not disseminated.

Barriers relevant to organisational use of research include:

■ lack of a research culture;

■ failure to value research;

■ lack of resources to promote research use;

■ culture of blame and reaction rather than reflection;

■ reliance on oral exchange of information.

Factors that Facilitate Putting Research Evidence to Work

Facilitators relevant to individual practitioners and managers include:

■ ability to frame well crafted questions, source evidence and evaluate its impact;

■ acquisition of critical appraisal skills;

■ individual motivation.

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Facilitators concerning the nature of research evidence include:

- the quality and relevance of research;

- the process by which research is disseminated;

- user-friendliness of research presentation, including the availability of summaries and clear demonstration of the implications of the research;

- development of systematic reviews;

Facilitators relevant to organisations include:

- promotion of a research culture that demonstrates the value placed in research and research based innovations;

- provision of resources to support research dissemination and utilisation;

- provision of research training and supporting further study;

- basing policies and protocols on research evidence;

- developing specific research roles;

- providing incentives and developing performance indicators that value research use.

Overall, this review of literature has demonstrated growing acknowledgment of the benefits of utilising research findings to inform practice, with the human sciences following the example of the natural sciences. However, despite the fact that evidence based practice is becoming strongly embedded in health and education services, international evidence would indicate that the social care sector appears to be lagging behind. The literature illustrates some of the different ways in which research is taken up by organisations on both individual and agency wide levels and recent studies have emphasised the importance of considering the wider context in which policy and practice operates, complete with political pressures, resource implications, norm and values, attitudes and attributes and linkage and exchange mechanisms. The research evidence on barriers and facilitators to research use indicates the range of influences on the way research is regarded and utilised, focusing on factors such as individual capacity and access, issues to do with the nature of research itself, and the type of culture operating within organisations.

The next chapter will discuss the outcomes from the consultation process carried out in children's services.

3   CONSULTATIONS WITH IRISH STAKEHOLDERS

3.1   Introduction

This chapter presents findings from the consultations held with staff from the four sectors of health and welfare, justice, education, and community and voluntary organisations. The topics covered include: a brief profile of research participants (Section 3.2); applying research evidence (Section 3.3); barriers to research utilisation (Section 3.4); factors that facilitate research utilisation (Section 3.5); preferred research topics and dissemination methods (Section 3.6); and a summary of key chapter findings (Section 3.7). The survey results are presented here in summary form, and detailed data including tables is presented in Appendix D.

3.2   Brief Profile of Research Participants

3.2.1   Overview

The following is a breakdown of demographic and other information on the research participants who attended the network seminars, based on the questionnaire data. For convenience percentages are rounded to the nearest decimal point, as a result the percentage breakdown for each question may not add to 100.

3.2.2   Gender

Of the total sample of 155 respondents, 153 indicated their gender; 106 (69%) were female and 47 (31%) were male.

3.2.3   Age

As can be seen from Figure 3.1, most (31%) respondents were aged between 35 and 44 years, with a similar proportion aged 45 to 55 (28%) and 25 to 35 (27%). Only very small percentages were recorded in the youngest age group of 18 to 24 year-olds (4%) and the older age group of 55 to 64 year-olds (10%).

Figure 3.1: Age of respondents (n=155)

Legend: ▣ 18 to 24 yrs. ▨ 25 to 34 yrs. ▢ 35 to 44 yrs. ■ 45 to 54 yrs. ▢ 55 to 64 yrs.
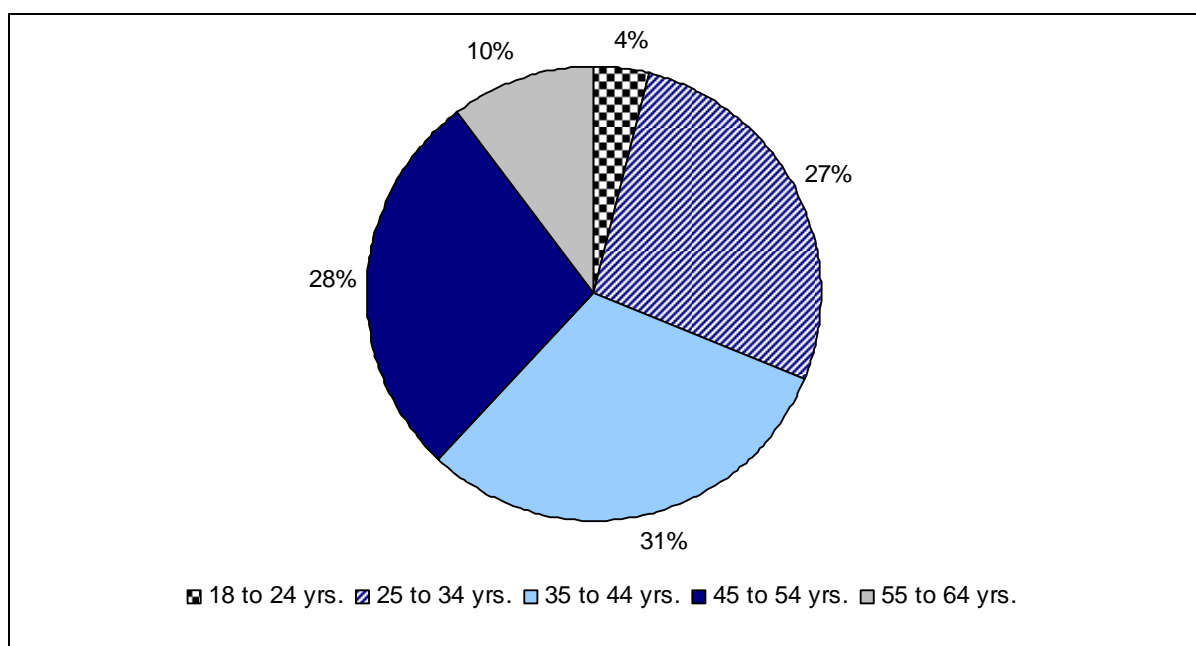
3.2.4 Sector of Employment

Respondents were asked to specify the sector in which they worked. Of the 143 responses to this question, fairly equal numbers of participants reported working in the health and welfare sector and the community and voluntary sector. A fifth of the sample reported working in the education, while a fifth worked in the justice sector (see Figure 3.2).

Figure 3.2: Sector in which respondents reported working (n=143, 12 cases missing)

Legend: ▣ Health & Welfare ▨ Education ▢ Justice ■ Community & Voluntary
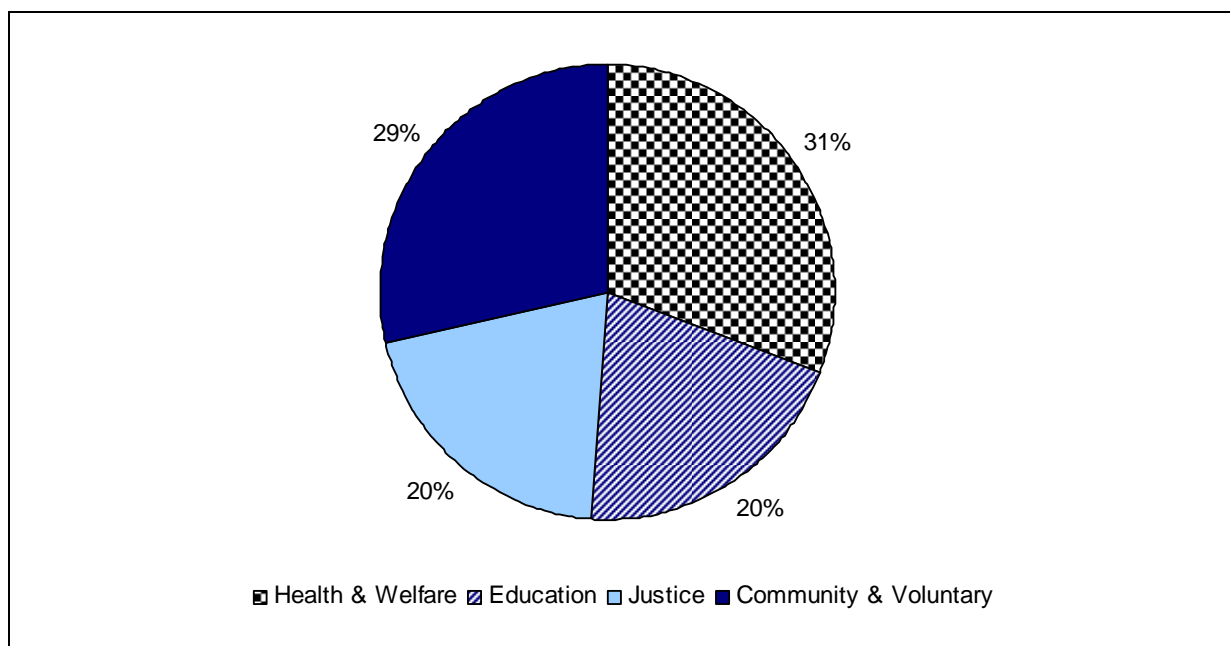
3.2.5 Level of Employment and Length of Time in Current Organisation

One hundred and forty-one respondents indicated the level at which they are employed in their organisation, of those three-quarters (75%, n=106) worked in front line management and/or as a practitioner in their organisation, while 23% (n=32) worked in a senior management role, and very small numbers worked at a policy level (2%, n=3).

As shown in Table 3.1 below, a majority of respondents (61%) reported having worked for their current organisation for more than five years.

Table 3.1: Length of time in current organisation (n=155)

	Frequency	%
6 Months or less	7	4
6 to 12 months	11	7
1 to 2 years	12	8
2 to 5 years	31	20
5 to 10 years	48	31
More than 10 years	46	30
Total	**155**	**100**

3.2.6 Further Study

Of the 155 respondents, 38 (25%) reported being currently engaged in further study that involves carrying out research while 117 (76%) were not.

3.3   Extent of Research Use in Practice

Utilisation of research implies the actions of accessing and applying research evidence. Accessing research is defined here as having – and taking – the opportunity to look up and read research evidence through sources such as the internet, library or journal subscriptions. It also refers to attending lectures, seminars or training. Application of research evidence refers to using research to inform practice, for example writing a report, preparing a case plan, creating or changing policies or protocols or making a case for resources.

3.3.1 Factors that Influence Day-to-Day Decision Making

In order to introduce the topic of research utilisation and explore the extent to which it was explicitly or implicitly used in practice, focus group participants were asked to firstly identify the factors that most influenced their day-to-day decision making. The '**legal context'**, particularly in respect of participants from statutory services, application of standards, vigilance about child protection issues, procedures, guidelines and the requirement to develop care plans were all cited. '**Risk assessment** tools', other methods of assessment and specific **models of practice** were also cited, as was the view that '**client needs'** often determined the type of action to be taken.

In most cases, participants acknowledged that the **regulatory base** for their work, i.e. guidelines and local policies, was implicitly evidence based, representing what Walter *et al* (2004) would term 'embedded' research utilisation. **Experience,** in the form of 'proven programmes and proven techniques that worked in the past' combined with **knowledge** about what families preferred, was also cited with little indication of the source or basis of these practices. Some said that they would be particularly influenced by their specific training and background.

In keeping with previous research findings (Munro 2002, MacDonald, 2001), some participants claimed that their decision making was, to a degree, **intuitive** and based more on the family's capacity to engage, their circumstances at the time, and **pragmatic factors** such as access to resources. A senior manager pointed out that decision making was also influenced by **financial issues.**

While some participants cited the use of research and evidence based strategies as integrated elements of their organisational practice, and even gave examples of where they had conducted studies themselves, many more cited less overt usage. This finding conforms to other studies, which have suggested that policy and practice developments are influenced by a range of factors, of which research is only one (Holzer *et al*, 2008).

3.3.2 Relevance of Research to Practice

When asked about the relevance of research to practice, most focus group participants commented that research which was 'real', 'local' and up-to-date was useful, though the majority found a lack of these traits in the research that was familiar to them. It was also commented that while many agencies have a research skills base, most are not using it to best advantage. Many were critical of the quality and nature of the research that is available to them. Frequently identified obstacles to research use, which will be developed in the following section, were the lack of Irish research and over reliance on studies from other countries.

3.3.3 Access to Research

In order to establish the degree to which staff members accessed research to inform their work, survey respondents were asked to complete questions, firstly about the frequency with which they looked up research material, and then the sources of material available to them, and the sources that they favoured (see questionnaire in Appendix B.

Just over half of the respondents (59%) reported that they looked up research findings at least monthly, with over half of that number (32%) sourcing it at least weekly. Forty per cent of the respondents reported varying times up to once a year and 1% claimed that they never accessed it at all.

The three main available sources of research evidence identified by the survey respondents were the internet, print literature and attendance at learning events:

The internet was accessed by 80%. While almost all respondents had access to a computer, two-thirds of them had unrestricted access to the internet. In the vast majority of cases, the most common method for accessing internet sites was using keyword searches on Google, with roughly half of respondents reporting policy sites and about a fifth using specific research sites. Over 90% of internet users accessed Google with just fewer than 60% accessing policy sites, and 50% accessing databases. Smaller numbers accessed online journals, e-books and research sites.

Print literature (books, hard copies of articles and reports) was accessed by two-thirds of the respondents, with 70% accessing reports, 58% accessing books and 55% accessing journals. While about 60% of respondents had access to small libraries in their organisations, less than 20% had access to extensive libraries. Over 50% had access to internal publications and newsletters and 35% had access to journals.

Information and learning events (seminars, network events, conferences, training courses) were attended by one-third (31%) of the respondents at least once in every two months, while almost 90% attend one at least every six months. Only 1% reported never attending an information or learning event, and 3% reported attending one less than once a year.

Respondents were asked to rate in order of their preference **their most preferred method of accessing research evidence** within their organisation. Many of them ranked the internet as their first choice (42%). Access to print literature (28%) and attendance at learning events (29%) were ranked fairly evenly, while involvement in further study was the least popular, with 59% of respondents to the item indicating that it was their fourth choice.

Respondents were also asked to identify the methods of facilitating access to research **provided by organisations**. The most frequent methods reported were provision of the internet, seminars, training, participation in research and research literature. Commissioning of research was the method least used.

3.3.4 Application of Research

While only 10% of the survey respondents reported that the work in their organisations was always in informed by research evidence, 84% answered that this happened 'often' or 'sometimes', indicating that despite the limited access to research evidence demonstrated in the previous section, evidence was applied in a wide range of situations. Respondents indicated that they would refer to research evidence in '**developing policies, procedures and protocols'**, which was cited by almost 100% of respondents, followed by **'preparing presentations'**, '**commissioning further research'** and **'designing programmes'**. Other cited uses were:

- **requesting resources;**
- **carrying out evaluations;**
- **carrying out direct work with children and young people;**
- **writing and reviewing reports;**
- **formulating case plans;**
- **consulting with professionals;**
- **supervision.**

The activities in which research evidence were least used were '**talking to service users'** and '**making referrals'**, though over half of the respondents did claim that it was used this way.

In order to expand on this topic, focus group participants were asked to give examples of research use. Examples were cited of **commissioning research** to assist the development of strategies and services such as the development of a domestic violence project that was evidence based, and the **setting up of services using programmes with proven effectiveness** to fulfil requirements of the Children Act 2001; also mentioned was the **conduct of a community needs analysis** by a non-governmental agency. In a similar vein, the use of research to **inform** service design, programmes, policies and procedures and to predict outcomes was mentioned. The use of outcome based evidence to justify spending on expensive materials was also cited. A manager spoke of using research to **provide 'constructive' challenge** in supervision, enabling staff to endorse the reason for choosing a certain plan or direction over others.

3.3.5 Benefits of Using Research to Inform Practice

Both survey respondents and focus group participants were invited to comment on the degree to which using evidence assisted their work, and to identify the benefits. The findings demonstrate a very positive attitude to the role of research evidence in practice. Starting with the survey data, the use of research evidence was considered either very helpful or helpful by 89% of respondents, and it was considered either helpful or very helpful as a source of motivation by 90% of respondents. Nobody considered it to be unhelpful.

When focus group participants were asked to expand on why the use of research might be considered beneficial, **the need to 'question one's practice'** was highlighted by a number of them, who pointed out that 'people think in certain ways and they need to think differently'. Another participant suggested that using research might **'shake up the system'**… it could be thought provoking, resulting in changes in practice'. A third suggestion was that use of research might **overcome 'practitioner resistance'** and be used to promote a 'culture of change'.

At a practice level, the use of research was considered necessary to inform practitioners about the **impact of social problems,** such as the effects on a child of parental mental illness. It was also considered important to use **statistical data** to indicate the degree to which desired outcomes had been attained. 'Quick fix, back-up or support' were the uses observed by one participant, while others suggested that the use of a **challenging 'devil's advocate' approach** could stimulate a response and a 'vision of the future' would move people out of the 'here and now'.

Focus group participants cited a range of situations and rationales for using evidence. A commonly cited application of research in practice was the **evaluation** of current interventions and programmes, particularly if the organisation wanted to make a case for funding, or continuation of funding. It was suggested that evaluation carried out prospectively will have the capacity to indicate, at the end of a funding cycle, which aspects of the project were most effective. A manager commented that 'evidence

based research is now used to **make a business case for resources'** and its use was also linked with '**measuring outcomes'**. Using research evidence to **demonstrate how well a project fits** in with national plans and local partnership was considered to assist renewal of funding. It was considered that the ability to evaluate a model or intervention by interrogating existing evidence about its effectiveness could positively inform choice.

3.3.6 Limitations to the Use of Research to Inform Practice

There were some dissenting views on this area, however. A participant in one group commented that there were **too many evaluations,** while simple 'monitoring' would be just as effective and cost considerably less. Others joined in and suggested that some inspections and evaluations were 'oppressive', and that money might be better spent on staff development. Again reflecting earlier research findings, members of this group commented that certain factors vital to the effective operation of a project, such as **staff morale,** cannot be quantified and are therefore not demonstrable in an evaluation.

It was frequently suggested that because many practitioners **lack the skills to appraise research** they are more likely to favour evidence that justifies their chosen programme or method of working, as the following quotes from different groups illustrate:

'If you find something you don't agree with, you are slow to use it'.

'If the research isn't going with what we believe… we discredit the research'.

'If research goes with your world view you agree, that's a natural inclination to support your own beliefs etc'.

The potential for social research to fit the needs of service providers was also challenged; it was suggested by staff from different community based organisations that research cannot be generalisable to the differing needs and complex circumstances of service users; as one pointed out: 'What may be a good outcome for one client may not necessarily be for another' and another participant added: 'Each client is different so success may not be quantifiable'.

The style of practice in some agencies discouraged practitioners from looking outside, as a manager of a community based service observed:

'We work as reflective practitioners which perhaps can explain why we don't look externally. We use qualitative evaluations… from the ground'.

There was also a sense that **some organisations were selective** in how they published evaluations of their services, adding to cynicism about the overall value and relevance of some available research. One participant commented that her service had been involved jointly with a statutory agency in conducting an evaluation, but the other agency had 'buried the report because it showed them in a bad light'.

In a similar vein, it was suggested that the research published by some organisations can be '**subjective and biased and full of agenda'**. The 'independence' of research was also challenged, as one participant pointed out: 'Those paying may want a specific outcome from research'. It was also observed that the failure of some organisations to implement recommendations from expensive studies they had commissioned undermined the credibility of the research.

3.4 Barriers to Research Utilisation

3.4.1 Overview

A shared aim of both the survey and the focus groups was to identify barriers to research utilisation. The data generated could be classified into three different themes, barriers that affected them as individuals, barriers related to the nature of research, and barriers at organisational level.

3.4.2 Barriers to Individual Research Use

In both the survey and focus group data, as well as the studies cited in Chapter 2, **lack of time** to read (identified by two-thirds of respondents) and to attend learning events (identified by one-fifth) were commonly identified barriers to individual research use. Other cited barriers to access included '**no funding'** for material, **limited access** to literature and **lack of research material**. Twenty-one per cent cited **lack of critical skills** as a barrier, and 9% indicated lack of confidence in researchers. While most focus group participants commented that dedicated time should be made available to them for reading research, there was some doubt expressed as to the feasibility of using it that way. Obstacles such as the combination of a busy workload 'getting caught up in practical day-to-day matters', 'being stretched to the limit' and lack of time to filter through the large volume of emails and documents, 'coming from all sides… competing for attention' were commonly cited. While conferences and seminars are regarded as useful platforms for research dissemination, finding time to attend these could be problematic for some whose workload was of an urgent nature and who lacked back-up support or staff to replace them. Even having short presentations at team meetings was not always acceptable in some services:

'At our team meetings once a month… it rotates and somebody presents something that they have found useful… but we are completely under resourced and we just don't have time for that luxury…'

Prioritising the study of research over other duties was not considered to be really acceptable, as a garda pointed out: 'to say that I am going to dedicate one hour out of my 35 hours to looking up research stuff… it's not really realistic'. The 'unplanned and more haphazard' nature of community based work, as opposed to clinic based work, was also considered to work against the notion of dedicated research time.

Others spoke of 'feeling guilty' if they spent time looking up information about their practice on the internet; a probation and welfare officer commented that her guilt came 'not from line managers… [but] from colleagues thinking you are doing nothing' and another participant suggested that:

'If I were to sit at my desk reading relevant books you would feel like you were not doing your job'.

Some participants commented that they were more likely to bring home articles and reports to read after work, however there was also an expressed view that working in the evening was a bad habit, and that jobs as pressurised as theirs required them to 'chill out' as opposed to reading work related material. It was also suggested that an unintended consequences of sourcing research evidence might be to add even more pressure:

'Not having any time to do anything… the last thing you want to do is read something that creates another layer and then have to try and implement something…'

Lack of real motivation as opposed to time constraint was also suggested, as one person pointed out: 'Sometime we do the "busyness" thing as opposed to making time to read research'. In another group, a participant similarly suggested that it was a question of prioritising:

'…I just feel it's about changing the mindset of ourselves and the people we work with… we have to take responsibility ourselves, it's okay to say that we don't have the time but we do have the time… you have to make the time, it might mean letting something go'.

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And a manager expressed this view:

'…if you are a professional you should do it anyway, in your own time. I do it myself and fund myself. I think there is an attitude within the Irish to be spoon fed. Not everybody, but it's there'.

However, it was generally agreed that even when journals were purchased and libraries stocked, practitioners generally found it difficult to make the time to access research.

Lack of access had been cited as a barrier in the survey, and was also a point of discussion in the focus groups .Those who were involved in further study mentioned that their access to libraries and online journals was a distinct advantage. There was a general sense, however, that it was not access *per se* that was the difficulty, but the related factors that will be detailed in the sections below.

Mistrust of research findings had been cited as a barrier to research use in the survey and was frequently expressed in the focus groups as a significant barrier to individual research use. Practitioner 'resistance to change' and the tendency to rely on traditional methods of practice rather than sourcing research about effectiveness of programmes were both identified. A practitioner from the justice system concurred with this view, by commenting:

'Why do we keep doing what doesn't work? We keep doing the same behaviours, maybe it's like fear and not knowing any other way…'

And as another practitioner pointed out: 'sometimes there is a resistance to accessing research, as it may take you out of your comfort zone by not fitting into your vision'. It was suggested that these tendencies were particular to social workers, in contrast to other professionals. However, a range of focus group participants from different sectors and disciplines expressed a level of cynicism about the application of research findings to 'real life'. One participant commented:

'You can read something and think yes that might be very useful and yes I think that might be very useful for our clients but until I got right in there I would be sceptical until I saw my own results'.

3.4.3 Barriers Concerning the Nature of Research Evidence

When asked about the barriers that concerned the nature of research evidence, 24% of survey respondents identified the unavailability of research on specific topics; 18% cited the complex presentation of research, while 10% considered that the lack of detail in the presentation of research evidence to be a barrier.

Focus group participants suggested that research focuses on issues that may not be very central to practice. A probation and welfare practitioner pointed out:

'I think the whole thing that the research and evidence base leaves out is the professional relationship between the worker and the young person and the family, that it doesn't actually quantify a lot in that… [research] is really around numbers and best practice'.

And the manager of a family support service pointed out that research:

'Is very clinical… it's not representative of the actual experiences… it's not personal… it's very much based on science and I'm not a great lover of that method'.

'**A huge gap' between research and experience** was also cited by the manager of a community service. This view was shared by another participant who felt she would prefer to see something with her own eyes with 'evidence that it has worked elsewhere', rather than rely on a written account of its effectiveness, and suggested that it might be more valuable to visit another project that is delivering the particular model.

The manager of a drugs project expressed doubts about the validity of statistical findings, claiming that they can be easily manipulated: 'it's a bit about… tell me what you want to prove and I'll prove it for you'. A participant from another focus group, who considered statistics to be a 'significant' part of research, endorsed this comment but argued that their accuracy could never be guaranteed. A manager in a different group observed:

'You have to be critical of a lot of research out there. I don't think research accurately reflects the true picture. That's where reflectivity comes in… the ultimate way of doing this is by engaging with the young people themselves, getting staff to use their instincts. Research is more an indicator…'.

A senior practitioner from the justice sector endorsed this view:

'You cannot use research to prove anything – but use it as a guide. You have to combine it with your own experience – the reality is so complex and there are too many variables involved'.

Some participants were unsure about the **quality** of research, which added to their mistrust of it. The view was expressed that research is often out of date by the time it is published, that it was 'very subject to fashion' replete with 'buzz terms' and that samples are often very small and

unrepresentative, particularly where studies are carried out by students. While it was generally felt that research from a 'reputable' source such as a university or a journal was trustworthy, many expressed scepticism about the internet as a source of evidence, particularly, for example the need to 'wade through a lot of rubbish to get to the quality'.

The manner in which research is often presented proved to be an obstacle for a number of practitioners. It was considered that while there was a lot of research material available, 'much of it is inaccessible', and that the language used can be 'problematic'. Material that is presented in a 'scientific' way is not considered user-friendly and is less likely to be consulted. A family support service manager pointed out that:

'A lot of time it's left on the shelf… If you go into your libraries and see how much research is done, there's probably tons of it but nobody actually reads it, I think it's the way it's produced has a huge part to play in this'.

The use of statistics constituted a barrier for another participant who commented:

'…if I am bombarded with a loads of statistics I just tune off… it is very important that research also looks at who it is actually delivering the research to… if I have pages and pages of statistics then I know I will just look at the end'.

A service manager spoke of the 'fear of research' that develops if the presentation is too complex. She pointed out that practitioners want 'interpretation' of data, such as the effects on a child if a mother is suffering from depression. She considered that not all staff were competent to interpret results and could become phobic about research as a result. It was also suggested that the use of language in research could be problematic, and that sometimes the implications of the findings are lost in the complexity. Another participant commented that while his director was good at distilling research, he himself 'might as well be looking into a field of thistles'. He made the further point that research can be 'turgid' and that he and his colleagues lacked 'the time, energy or the mental capacity to absorb it'.

The possibility of becoming **overwhelmed** when doing a database search was cited as a disincentive: 'Online, you put in a specific word and you get so much back'. Others used terms such as 'bombarded', 'enthralled' and 'bogged down' 'going off on a tangent' to illustrate how overwhelmed they could feel when a search for a particular item turned up a large volume of research. The habit of randomly emailing research references and material to staff in organisations was highlighted as 'pointless' given that most of it would not be used. Some negative attitudes and mistrust in relation to

research seemed to have arisen from participants' own experience of having taken part in studies or providing statistical data for purposes that were never made clear to them, a point which will be elaborated below.

Similarly, 'overload' of available research evidence was seen as off-putting to several participants who felt they could 'get lost'. One participant commented: 'I find that you have to trail through 90% of research before you find something that is useful'.

However, a frequently cited barrier to utilisation in relation to the nature of research evidence was the perceived **lack of Irish material**. The general perception was that there was little research carried out in Ireland in relevant areas, particularly in respect of family welfare conferences, youth re-offending, education about the prevention of drug use, children and domestic violence, mentoring, placement of sibling groups, members of the Traveller community and outcomes of special care placements.

It was also suggested that existing Irish research 'lagged behind' and was too localised. Some participants argued that the lack of research and evaluation can obscure the profile of agencies. For example, a manager pointed out that at a seminar on early intervention, a particular community programme was presented as if it was the only one in the country, yet in his area there was a very active project, but the absence of evaluation meant that it was unknown. Others suggested that there is active researching in Ireland carried out by certain organisations, but a childcare manager pointed out that there is 'no database of Irish research and no national body to co-ordinate the establishment and maintenance of one'. Another participant highlighted the lack of what he termed 'structured reading lists'. While the lack of Irish material was highlighted by focus group participants, the survey indicated that about one-fifth of respondents experienced a lack of 'relevant' research as a barrier.

A number of focus group participants were also critical of the **tendency to import research from abroad** that may not be a good 'cultural fit'; as one manager termed it, 'gazumping' evidence from American programmes into an Irish context. A manager whose agency provided research resources commented that much of it was international and 'worlds apart from the Irish scene'. It was considered that international research had to be 'greened', for example, to eliminate terminology such as 'garbage' and 'sidewalk' and that this was a time-consuming process and quite a significant undertaking for any agency wanting to implement a new way of working.

3.4.4 Organisational Barriers to Research Use

Thirty-seven per cent of the survey respondents identified the '**need for immediate solutions'** as an organisational barrier to the use of research, and 26% identified the '**political agenda'** driving their organisations as an additional obstacle. Twenty-five per cent cited '**lack of authority** to make

changes to practice based on research findings' and **resistance to change** was also identified by just over one-fifth of respondents. A small number (8%) identified that the application of research involves **too much risk and responsibility.** The survey responses also indicated that policy makers were more likely to make use of research findings than senior managers or front line workers.

Lack of a research 'culture' in organisations was cited in several of the focus groups. These included lack of encouragement and support for staff to access and apply research. In a number of cases, this was seen as paradoxical, where staff were expected by management to improve their practice but not given the facility to do so. For example, a practitioner commented:

'If [I was] seen in the office reading it would not be seen as positive. If local management came and saw me reading xxx publications, which they send and direct you to read for the betterment of my job, it still might not be seen as positive'.

A practitioner in a different group, but in the same sector, commented that in most organisations, research is 'the last thing to be looked at and used for policy and decision making'. Being considered an 'upstart' in your organisation if you point to new evidence was mentioned by another practitioner.

It was considered that while most community agencies have to produce evaluations in order to secure and maintain funding, most statutory agencies do not have this obligation, therefore are less likely to be research focused.

3.5   Factors that Facilitate Research Use

3.5.1   Overview

The focus groups and survey yielded a lot of data on the facilitators to research use. Similar to the discussion on barriers, the data can be grouped into three themes: individual factors, factors related to the nature of research material, and organisational factors.

3.5.2   Individual Factors that Facilitate Research Use

When asked what factors would be likely to promote research utilisation, **personal motivation** was cited by a number of focus group participants. This included 'finding the time' to keep up with national developments and new research and keeping as informed as possible. It was suggested that even though reading research might be a low priority for much of the time, a personal aspiration to source the most appropriate and up-to-date evidence for the development of a new project was an incentive to use it. It was also suggested that while research utilisation may not be part of current policy in an organisation, it was within the code of practice of most social care professions. Several research

participants were currently undertaking further study that involved completing research dissertations or theses, and one of them commented that his familiarity with accessing research motivated him to stay on at work longer in order to look up a work related issue. It was also suggested that although the 'buy-in' should come from management, that front line staff had a responsibility to keep informed and up to date. Preparing a presentation for a conference was cited by several participants as a high motivator to consult research, as was the necessity to prepare annual reports or evaluations. Being able to stand over the use of certain practices or models when challenged was also seen as a motivator. One manager pointed out:

'The response can't always be "well that's the way we do it" and in some ways you become reflective, "is this the best way?"'

There was a lot of support for the concept of **informal sharing** of research evidence as a facilitator. For example: 'at coffee break somebody might say did you see that piece and that begins the conversation – that's a really important part of taking on research'.

A number of participants spoke about 'exposure to other professionals' 'inter-agency working', 'talking to the people who know something about something', 'getting feedback from your colleagues about what's working and then using it yourself' and conversations that you have with other people who have gleaned information from a variety of sources '… then in turn that's plucking information maybe from literature, the internet, experiences, conferences, learning events, a whole combination of things…'

It was suggested that research is 'shared around the photocopier…it's a shared thing that happens just because you move into that community of practice'. Talking to students on placement was cited as another informal method of facilitating research use.

3.5.3 Facilitators Related to the Nature of Research Material

Focus group participants generally agreed that research material that is **user-friendly** was more likely to be utilised. As a manager pointed out 'staff want interpretation of research results'. Evidence in 'bite-sized pieces' was considered useful. Feedback from researchers, would allow staff to clarify issues and ask questions. Willingness of researchers to come and give seminars, sophisticated search engines, provision of up-to-date and 'timely' summaries with key messages and minimal inclusion of statistics and accounts of the methodologies used, briefing papers and bullet pointed lists were also suggested.

3.5.4 Facilitators Related to Organisations

A majority of survey respondents (86%) cited **'allowing staff to try new ways of working that are informed by research'** as one of the ways in which organisations facilitate research use; 63% cited **'building in the principle of evidence based practice into the ethos of the organisation'** and 59% cited **'implementing research recommendations in organisational policies'**. The other facilitators that were considered were **'encouraging staff to disseminate their own research'** (46%), **'having a research focus in supervision'** (38%) and **'rewarding innovation'** (21%).

Around three-quarters of survey respondents reported that their organisation had **carried out or commissioned research** within the last two years. Interestingly, the survey showed that research carried out internally by staff was the least likely to either not be disseminated at all or merely presented in a seminar. Research that was both carried out internally and also contracted out was the most likely to be published in a print publication or electronic publication.

Focus group members suggested that if research is **valued** within an organisation, in terms of time allowed for accessing research, it is more likely to be applied. 'Formalising' research use by having a library on site and a budget to resource it as well as subscriptions to journals and websites were also suggested, along with 'putting structures in place for dissemination' and 'generating interest and giving 'permission' to practitioners to become more research focused. Similarly, overcoming staff resistance by fostering a '**culture of reflective questioning'** was proposed. Funding staff to undertake further study was also seen as a signal that research is valued.

Another measure of how research is valued and integrated into an organisation, which was cited by several focus group participants, was seen to be the **appointment of a research officer.** There were a number of examples of where such appointments had been recently made, resulting in the ability of the relevant organisations to integrate statistical data and evaluations to their strategic plans, as well as providing a person who can 'mediate' research use. The usefulness of this was highlighted by several participants. One pointed out: 'we need someone to distil research and translate it into change' and another suggested that having a 'research person' can be useful in order to select the most appropriate material because 'It can be hit and miss getting your own research that you might pick up through meetings or that people might send you'. Where staff lacked experience, the presence of a researcher on the staff was also considered beneficial. A manager mentioned: 'I don't have the time and I'm not qualified to do research so it's helpful to have a researcher'. Another participant summed up the advantages:

'One of the benefits of a research officer is they can give a very clear framework of what you need to have. They have a real understanding of what's appropriate. For me time is a real issue when looking at research. The research officer helps eliminate this.'

Direct **access to a resource within organisations** was cited as a positive incentive, a staff member from Barnardos described the facility available to them:

'You can ring the National Children's Resource Centre, give them information re what you are looking for and they will point you in the direction you need to go, which saves time.'

She described her organisation as 'privileged' to have this service, and added that they also have a best practice advisory committee that included 'distinguished professionals'. Participants from the Probation and Welfare Service spoke about their Training and Development Unit, which has also taken on a role of disseminating research within the organisation:

'…a dedicated team of people who sift through research and stuff that pertains to our work then they put on courses, so you have someone who has assimilated all the research…. a dedicated group of people who are upskilling us all the time.'

They also mentioned their intranet:

'We have our own website and if somebody has done a piece of research that is being put on the website. People are getting more and more access to courses…. people go to international conferences and sift through what is relevant to our work'.

The majority of survey respondents claimed that their organisations facilitated research access by providing internet access, encouraging evidence based practice, facilitating attendance at learning events, participating in research and providing print literature.

The practice of **'feeding back'** after conferences was also mentioned as a useful facilitator in other groups, as well as training and the development of research packs to go with the training programmes. One manager mentioned that she had set up a resource room in her organisation where staff who had attended conferences would leave research material that could be sourced by others. Using team meetings for presenting research and as a way of achieving practical application of research was also suggested.

Some **inter- and intra-organisational activities** were suggested. One manager pointed out, 'People would be more likely to read something if there was a forum for sharing it… because if you read something and it excites you… you will want to share it'. Holding regular focused events, such as an example given of 'policy seminars that bring partners together to do focused, targeted, time limited pieces of work' was considered to be a facilitator. One organisation represented at the focus groups was planning to have a 'research week' where staff could 'clear their diaries and inform practice'. Another participant suggested making use of students on placement, who were likely to be familiar with research literature 'get them to do a piece of work and report back'. In another organisation, there is a practice whereby at team meetings 'a different person [each time] takes a policy and reads it… everyone does one'.

The use of i**ncentives** to promote research use was also mentioned. Including it as part of staff appraisal was one suggestion, and another one was that the funding of staff for further study should become conditional on the ultimate production, through the study, of a piece of research that will benefit the staff member's own organisation. It was also suggested that job descriptions should mention research utilisation.

While a number of the focus group participants who highlighted the lack of Irish research suggested that more should be commissioned and conducted by children's services, a number felt there was little real connection between the data they provided for research purposes and the outcomes for their own work. A manager offered his view of the way workers reacted when requested to give information:

'When you have people coming in who are a pain… basically, and looking for all types of information and making all kinds of work you feel where is it going? Is it going anywhere? You're thinking "here's another bloody questionnaire… somebody's doing a PhD or an MA or something or maybe it's a national thing and they all get thrown in a pile…" and you do it maybe sometimes off the top of the head, sometimes not at all, because it's disconnected… at the moment people are feeding off you left right and centre for information'.

Frustration was also expressed by participants in a different group, who felt **feedback** should be a part of the process, as was pointed out: 'Many researchers ask questions but never get back to you with findings so what's the gain? You need to get something for yourself'. A lack of communication between researchers and subjects of research was identified as poor practice:

'Some questionnaires only require ticking boxes and you haven't a clue what you're being asked. There is no preparation, a lack of explanation and the response could be highly questionable'.

The expectation that staff would be keen to participate in research was misplaced, according to a family support service manager:

'In some ways there is that sense of, we have to carry out this research and you have to take part and that for me… the premise is wrong, I am not excited about taking part in research…'.

Another manager commented:

'I get emails regularly from the [organisation] on a regular basis and surveys to fill out and I'm told it will be of benefit [to the organisation] and I think absolutely no way, I'm not…'.

And a colleague added:

'You know I am the same… I get so many requests on the email can you give me the number of […]… to actually sit down and process them plus deal with what you have to deal with on a daily basis is actually quite difficult for one person to do…'.

However, despite the expressed reluctance of focus group participants to actually take part in research, there was support for the idea of **working more closely with research centres.** 'The role of the academic community in supporting people' was seen as important, including having relationships with researchers that would invite contact on a relatively informal basis and provide a kind of 'helpdesk' service when staff needed information. An example was given of this kind of relationship where a manager commented that he would frequently ring a university based centre:

'If [a researcher] doesn't know about something she knows where to find it out and I think it is also important to have someone who merges the political with the academic and all the other elements, the legislative bits because there are all kind of forces that are pushing in one direction or the other so it's being able to tap into those as appropriate…'.

Others agreed:

'We need somebody or some institution… universities or research centres… who bring people together to share philosophical approaches'.

'It was felt that, as well as serving as a forum for discussion, having an academic institution as a point of reference would 'short circuit' the need to quality assure a piece of research'.

3.6   Preferred Research Topics and Dissemination Methods

3.6.1   Research Topics

Survey respondents and focus group participants were asked to identify the type of research topic considered most useful. Survey respondents prioritised research on practice, service or programme evaluation and impact studies, and were less positive about theoretical research material and epidemiological/demographic research.

Focus group participants gave a very wide range of answers covering almost the whole spectrum of child welfare. These could be classified into three areas as follows:

- broad areas of evaluation including service user views;
- policy areas such as differential response, early intervention programmes, after care, early years services, child and adolescent mental health services, one parent families, the courts;
- more specific topics of domestic violence and its impact on children, information about drugs and drug use, adolescence, attachment, parenting skills, self-harm; practice issues such as assessment, engaging families and staff retention.

3.6.2   Dissemination Methods

Survey respondents and focus group participants were asked to identify dissemination methods that they would find most useful if a project to promote research utilisation were to be launched. Overall, the response to this question was fairly evenly spread, with a slight majority of survey respondents favouring interpersonal methods such as seminars, networks meetings and telephone helpdesks over websites or printed research literature. However, they unanimously claimed that if a web-based research resource relevant to their work was developed they would use it, particularly favouring the provision of briefing papers on specific topics (listed as first preference for 29%), practice frameworks (first preference for 24%) and fact sheets (first preference for 24%). The choice of 'oral' or interpersonal methods was also reflected in the focus groups. The least popular research resources that a website could provide, according to survey respondents were blogs and online interactive forums. Almost two-thirds (65%) of the respondents indicated that a blog would be their least desirable choice.

While the focus group data is not considered to be numerically very significant, there did appear to be exceptionally strong support for the dissemination of research findings in a 'hard' format. Libraries were frequently mentioned, as were journal articles and pieces in newsletters such as 'Health Matters', which is a publication produced by the Health Service Executive (statutory provider of child

protection and welfare services). There was a frequently expressed view that staff would be more likely to read something that was printed, for example:

'My own preference is for hard copy rather than email, there might be a chance that I might flick through a hard copy of something or look through the index of something… I can underline it or mark it and I just find it much easier than scrolling and if I want to flick back to a particular page… the IT system might be slow or might collapse'.

'I might take it home with me read it on the train'.

And:

'I'd print it off, put it aside in my handbag and then know that it will come home with me. Research will come home with me because in work you just don't get time to do it'.

Regardless of the medium, brevity was considered important. Summaries, briefings, something 'written in a simple way' as one participant put it:

'Bullet points, clear findings, tables of contents, synopses of case studies, simple so I don't have to reread'.

'You want something that is comprehensive and gives you the main core findings or strategies, you don't want to have to look at all of these bar charts'.

'Readable language' was also considered important, and while it was argued that stripping something down into a simple format could remove its 'theoretical base' it was suggested that a number of attractive and colourful options should be available including:

'The overview of it, what's important, where do you get your evidence from, how could it work in practice… a summary of the initial paper and whether you have a link to it… the presentation is everything in terms of you wanting to read that piece of research, how it's presented, how it is packaged… we're a consumer animal we are influenced by how we see something'.

Electronic options suggested included DVDs, email alerts, and the use of websites, though as reflected in earlier sections, there was some unease about the quality of evidence to be found on the internet and it was felt that some specific guidance might be needed to address this. As suggested

earlier, the presence within an organisation of a researcher or team of dedicated people who have assimilated the research was seen to be very valuable.

3.7   Summary of Key Chapter Findings

Access to and Sources of Research

Access to research findings:

- One-fifth of participants looked up research weekly.

- One-third looked up research monthly.

- One-eighth looked up research approximately every two months.

- The remainder varied from six-monthly to yearly to not all.

Main source of research material are:

- internet, used by about two-thirds;

- print literature, used by about two thirds;

- learning events attended by one fifth.

Decision Making and Principal Uses of Research

Decision making is most frequently influenced by:

- legal and policy context;

- tools and models of practice;

- service user needs;

- practitioner background and training;

- resources.

Principal uses of research evidence:

- preparing presentations;

- commissioning further research;

- designing programmes;

- requesting resources;

- carrying out evaluations;

- carrying out direct work with children and young people;

- writing and reviewing reports;

- formulating case plans;

- consulting with professionals;

- participating in supervision.

Benefits of and Limitations of Research Use

Benefits of using research to inform practice:

- challenges practice;

- promotes changes in culture;

- provides a way of measuring outcomes and effectiveness.

Limitations to the use of research to inform practice:

- overuse of evaluations, which are sometimes used selectively if findings are controversial;

- many aspects of practice too complex to quantify;

- practitioners may lack the skills to appraise research;

- research cannot be generalisable to the differing needs and complex circumstances of service users;

- limited quality and relevance of some research material.

Barriers to Research Utilisation

Barriers to research utilisation include:

- lack of time;

- unacceptability of prioritising research related work over other activities;

- lack of motivation;

- lack of access to research;

- mistrust of research findings.

Barriers concerning the nature of research evidence include:

- perceived gap between research and experience;

- uncertainty about the quality and relevance of research;

- the complex manner in which research is often presented;

- the volume of research which can be overwhelming;

- perceived lack of Irish research material.

Barriers relevant to organisations include:

■ absence of research culture;

■ undervaluing of research by the organisation.

Factors that Promote Research Use

Facilitators to individual research use include:

■ personal motivation;

■ informal sharing of information in the workplace.

Facilitators of research use related to the nature of research material include:

■ user-friendly material;

■ summaries;

■ bullet pointed lists.

Facilitators of research use relating to organisations include:

■ valuing research;

■ fostering a culture of reflective questioning;

■ appointment of a research officer;

■ providing resources within the organisation;

■ establishing intra- and inter-organisational activities;

■ providing incentives;

■ commissioning or conducting research;

■ working more closely with research centres.

Types of research topics and dissemination methods considered most useful:

■ Research topics considered most useful include evaluations, policies and programmes, and specific topics such as domestic violence or drug use and their impact on children.

■ Dissemination methods considered most useful are 'interpersonal' methods such as seminars, printed literature and websites.

4 KNOWLEDGE EXCHANGE

4.1 Chapter Introduction

The previous chapter highlighted a number of barriers and facilitators that impact on the access to and application of research evidence in policy and practice. This chapter focuses on the business of knowledge exchange, focusing on the key stances adopted by researchers (Section 4.2); models for understanding research utilisation in public service and social care settings (Section 4.3) and knowledge brokering mechanisms (Section 4.4.) Section 4.5 provides our key chapter findings.

4.2 Three Key Stances Adopted by Researchers

An explanatory framework identified by Nutley *et al* (2007) outlines the 'three key stances' adopted by researchers. Firstly, there is the 'consensual approach', whereby there is agreement between policy makers and researchers about the central issues, and researchers' work within the existing paradigm to provide policy makers with knowledge about how best to bring about desired processes and outcomes. The next approach is termed the 'contentious approach' whereby researchers and academics critique from the sidelines, often publishing their work in journals or letters to newspapers or the media. The third approach is described by Nutley *et al* as the 'paradigm-changing' approach, whereby researchers problematise existing frameworks and suggest alternative agendas for policy and practice development. Other models such as those presented by Percy-Smith *et al* (2002) tend to follow similar lines, portraying the process as linear, circular or irrational and using concepts such as 'rational' (linear), incremental (irrational) 'mixed scanning' (a blend of the former) and 'garbage-can' which is characterised by a hostile attitude towards knowledge as a contributor towards policy making.

4.3 Models for Understanding Research Utilisation in Public Service and Social Care Settings

4.3.1 Overview

A number of models for understanding research utilisation have featured in the literature. For example, Walter *et al,* (2004) in a review carried out for the Social Care Institute for Excellence, identified three 'empirical models' of research utilisation. They named them the *'practitioner-researcher'* model (where the responsibility to use research evidence lies with the individual) the *'embedded research'* (where research evidence is used to underpin protocols and procedures) model and the *'organisational excellence'* model, (where a research culture exists and promotes the conduct and utilisation of research at all levels in the organisation). These are discussed in more detail in the following sections.

4.3.2 Practitioner Researcher Model

The *practitioner-researcher model* identified by Walter *et al* (2004) and later, Nutley *et al* (2007) is enabled by training on critical reasoning, the production of user-friendly research findings and the inclusion of research in professional training. The application of research is generally seen as the responsibility of the individual practitioner, and its use is perceived as a linear process of accessing, and applying research. Some of the problems with implementing this model are the possibility that staff may view the development of research informed practice as the joint responsibility of staff and departments. Barriers include lack of access to research, lack of materials, lack of search skills, poor publicity of information services, lack of time and competing priorities. Impediments include lack of organisational support for keeping up with research, the variable extent to which research is discussed in supervision and some uncertainty about the value of the approach.

4.3.3 Embedded Research Model

In the *embedded research model*, responsibility lies with the policy makers and managers; practitioners rarely engage directly with research findings and the use of research is both 'linear and instrumental' – existing research is accessed and used instrumentally in the design of tools, protocols and guidelines. Funding, performance management and regulatory regimes are used to encourage their use. The key link is research and policy rather than research and practice. Because practitioners do not directly interface with research, negative attitudes or mistrust are not instrumental, and in general, the commonly identified barriers are not therefore relevant. In a later review, Nutley *et al* (2007) give an example of the use of embedded research in the Probation Service, where systematic reviews of what works in supervising offenders was used to design and deliver programmes, using a highly centralised approach (Furniss and Nutley, 2000).

4.3.4 Organisational Excellence Approach

The third model, *organisational excellence,* involves development of a research minded organisational culture and partnerships with the research community. The organisation is not seen merely as a commissioner of externally generated research findings but actively shapes the research in a cyclical fashion. There is an emphasis on organisational learning and research knowledge becomes integrated with organisational knowledge. Partnerships between the research community and service providers are often a key element, particularly those where practitioners actively participate in the conduct of research and the implementation of research findings.

4.3.5 Tensions between Models of Research Utilisation

Walter *et al* (2004) believe that there may be tensions between the models, for example, the different expectations of individual and collective responsibility between the practitioner-researcher model and the embedded research model. They also identify the lack of a service user perspective as a significant omission from the models. Ultimately, they recommend a 'whole systems approach' that

outlines key roles and responsibilities for the different stakeholders, including governance and related organisations, funders, research organisations, practice organisations (practitioners and managers), training organisations, service user organisations and facilitating organisations.

4.3.6 Cultures in Context

A framework developed by a group of Australian researchers and named 'Cultures in Context' (Holzer *et al* 2008) offers a composite model which problematises the dissemination-utilisation continuum. Based on the findings of a study of research utilisation in the Australian child welfare sector, Holzer *et al* adapted the 'Three Cultures (policy, practice, research) Model' offered by Shonkoff (2000) into a broader framework, which encapsulates all the stakeholders and elements in the research-policy-practice arena. Shonkoff (2000) had identified cultural dissonance between policy designers, service providers and the research community and argued that any attempt to effectively disseminate research evidence needed to be sensitive to each constituency (for a fuller discussion on the Three Cultures theory see Chapter 2).

He and others identified specific barriers between the three cultures that will be elaborated upon in the following section. However, Holzer *et al,* having conducted an extensive study on research utilisation, found that the Three Cultures Model was insufficient to explain the complexities involved, and so developed a new and more elaborate version that encapsulates the social, institutional, economic, ideological and political contexts. They named this the 'Cultures in Context Model', in which the wider domains of influence on policy and practice are grouped under six headings:

- Organisational culture, consisting of norms, values and rituals present in the workplace that influence access and application of research evidence.
- Pragmatics, both internal and external, such as structure, resources, capacity to implement change, the economy and community attitudes.
- Individual attributes, such as personal values, beliefs and assumptions, attitudes to the importance of empirical evidence versus personal experience and practice knowledge.
- Sources of information, including researchers, lobby groups and the media.
- The nature of evidence, qualities and characteristics of research such as the ease of understanding and practical application.
- Linkage and exchange mechanisms – partnerships between researchers and policy makers.

Holzer *et al* (2008) suggest that any efforts at promoting the use of research should take a holistic approach bearing the above factors in mind. Lewig *et al* (2006), highlighting some of the differences of perception of the various stakeholders, observe that while researchers often aim to achieve an in-depth understanding of an issue, policy makers and practitioners usually need to simplify them in

order to make action possible. A Canadian study by Waddell *et al* (2005) described the 'inherent ambiguity' that challenges policy makers' decision-making in the face of competing priorities, institutional constraints, public opinion and conflicting ideas. The focus of their study was on why policy makers opted for incarceration as a way of dealing with conduct disorder in children and young people instead of utilising research evidence on the most effective strategies for dealing with the problem. Having heard the range of influences and the complexity of the policy making environment, the researchers acknowledge a wavering of their 'allegiance to rationality' (p.1655).

4.4 Supporting Knowledge Exchange through Partnerships and Collaboration

4.4.1 Partnership and Collaboration

It has been argued in previous sections that poor links and lack of partnership between those who carry out research and those who provide services to vulnerable children and their families compound organisational and cultural barriers to research use (Baratt, 2003; Lewig *et al*, 2006, Walter *et al*, 2004; Landry *et al*, 2001). On the positive side, Nutley *et al* (2007) point out that that linkages can support research use even in initially antagonistic environments. Models of partnership between the research and policy communities in the health and education sectors indicate encouraging results, for example, Ross *et al* (2003), in a Canadian study on partnerships in health related research, identified: the roles of formal support (through committees); and responsive partnerships, where the policy makers respond to researcher's efforts to involve them. They also identify a role for integral partnerships, where the policy makers actively involve themselves in the conduct and dissemination of research. In another Canadian study, Goering *et al* (2003) identified four tiers of linkage and exchange as follows:

- formal inter-organisational relationships;
- interactive research projects;
- dissemination;
- policy formation.

While all the above models were not without contextual constraints, the outcomes of partnerships were considered to be successful.

Some of the Irish stakeholders, whose views are represented in Chapter 3 of this report, considered that stronger links between agencies and the research community would facilitate greater research utilisation. This idea is supported by Walter *et al* (2004), who suggest that relationships can be formal or informal but at the very least should involve contact. They go on to observe that 'rich

communication channels' will enable researchers to understand the exigencies of practice and enable practitioners to understand the craft of research.

Another distinct advantage, observed by Small (2005:328) is that by collaborating more closely with practitioners, researchers can gain insight into emerging issues that may not even be on the 'radar screen' of traditional academic scholarship. The Barnardo's (2000) review found that staff could be more influenced by research in which they had had some involvement, and that forging closer links and involving practitioners in setting research agendas could build trust. As one of the participants in their focus groups commented: 'A lot of researchers are based at universities, researching us all… whereas they ought to be with us where we are providing, we are on the face of service provision' (p.53). Nevertheless, the Barnardo's review cautions against 'feeding practitioners into the existing process', suggesting instead that energy should go into developing new collaborative approaches. The appointment of researchers within organisations was also supported in this review, albeit such posts were considered to be vulnerable and liable to be axed if resources came under pressure.

Walter *et al*, (2004) in a review of cross-sectoral research and practices on the impact of research in social care organisations carried out for the UK Learning and Skills Research Centre, developed case studies on eligible organisations. As part of this process, they identified four different models of research partnerships that were claimed to be effective in raising awareness in the sectors, increasing the practice relevance of research, impacting on attitudes and behaviours and promoting mutual understanding. The models are as follows:

- networking through personal relationships between researchers and organisations;
- project partnerships;
- ongoing partnerships between research and practice organisations;
- co-location of researchers and practitioners.

They additionally recommend training programmes in research use for researchers and practitioners, which, particularly when aided by support systems, will impact positively on attitudes towards and use of research. They quote Cordingley *et al*'s (2002) report of a school based research consortium which used a variety of methods to promote collaboration, including partnering teachers and academics, 'thinking lunches', thereby enabling teachers to conduct their own research and test out their findings.

However, a later review published by Nutley *et al* (2007), while supportive of the notion of partnership, identifies a number of challenges to its attainment, including:

- the need for investment of time, energy, finance and support;

- the need for shared appreciation and understanding of each other's cultures and ways of working;

- the need for clear objectives and channels of communication;

- the need for a wide range of opportunities for interaction.

4.4.2 Intra-organisational Partnerships

Research to Practice

One of the findings from the consultation with Irish stakeholders was that where resources exist within an organisation, and particularly where researchers are employed within agencies, research use is promoted and a culture developed whereby research is valued and encouraged. An interesting example of collaboration between researchers and practitioners within organisations can be found in the New South Wales (Australia) Department of Community Services, which is the statutory agency with responsibility for child protection, out of home care and disaster recovery (see http://www.community.nsw.gov.au/DOCS/STANDARD/PC_100859.html). A programme entitled 'Research to Practice' has been developed within the department, the aim of which is to create an organisational culture that will recognise the value of research, and promote its use. It claims to do this by means of dissemination, education, social influence, collaboration, incentive, reinforcement, facilitation and multi-faceted initiatives.

At a practical level, the programme consists of providing electronic summaries and research briefings, evaluation of practices, research seminars, two-way research forums/practice sessions, research networks that involve staff in conducting research and integration of research guidance in their information management systems. Staff are incentivised by the allocation of one half-day per week for attending seminars or reading research. Monthly research updates are published in electronic and printed form, which contain summaries of recently published journal articles on relevant research.

Knowledge Transfer Partnership

Another example of an intra-organisational project is the Knowledge Transfer Partnership (KTP). KTPs are part government funded collaborations between business and universities in the UK, involving three partners: a company (usually a children's services department) a knowledge base, for example a university and an associate (a recently qualified graduate). Normally, the company would contribute between 40% and 60% of the project cost, with the remainder being funded by research councils. An example of a KTP is the Wakefield-York Transfer Partnership Project which involved three stages of development over two years, firstly ensuring that all research undertaken within the company was of high quality, secondly identifying current levels of research activity and thirdly the development and implementation of an improvement strategy. The Wakefield-York project also launched a number of associated initiatives, including: online resources, a conference, a series of

workshops, fact sheets, a resource pack, research mentors and an ethics panel (see www.rip.org.uk/stories/stories.asp?story_id=12).

4.4.3 Research Centres

The establishment of research centres has been seen as advantageous in terms of the accumulation of expertise on a range of methodologies, opportunities to sustain long-term research programmes and the creation of a critical mass of skilled researchers (Iwaniec and McCrystal, 1999).

4.4.4 Informal Partnerships

A less formal type of collaboration was identified in Canada by Waddell *et al* (2005:) who gave the example of partnerships cultivated between 'creative' civil servants and 'trusted experts', normally senior academics, who could synthesise research evidence and apply it to local situations. The strengths of these researchers were identified as their non partisan approach and their ability to communicate with a variety of different audiences, thereby making connections with the community. This process was compared by the authors to 'entrepreneurship', which in this case meant both policy makers and researchers using the opportunity to 'couple problems, policies and politics' and thereby set the policy agenda (p.1656).

4.4.5 Knowledge Brokering Organisations

The term 'knowledge broker' is sometimes used to describe organisations whose principal purpose is to promote research utilisation in policy and practice. From the consultations with the Irish stakeholders reported in Chapter 3, it might be implied that the establishment of knowledge brokering organisations in Ireland could address a number of the barriers to research utilisation that were cited, including lack of access to Irish and international research, mistrust of research findings, and the off-putting nature of some statistically and theoretically dense research publications.

This section gives an overview of organisations specifically developed for this purpose from the UK, US, New Zealand and Australia. A detailed review of products and services provided by international knowledge brokering organisations is provided in Chapter 5.

Many of the organisations involved take a diverse approach that goes beyond electronic dissemination to more hands-on promotion by means of publication, conferences, seminars, workshops, helpdesks and individual mentoring. Some agencies such as Research in Practice and Making Research Count develop partnerships with services and provide small group training (www.rip.org.uk), providing link officers who elicit the support of senior managers and act as 'change agents' that open up channels of communication.

Generally speaking, knowledge brokering organisations aim to examine and improve the utilisation of research across key sectors, to ensure a relevant research base and access to research, to make research comprehensive and to draw out implications (Research Unit for Research Utilisation, 2008; Stevens *et al*, 2005). A former Economic and Social Research Council funded project entitled 'What Works for Children' operated a two-pronged approach. One of its activities was the provision of an implementation service to individual agencies. It addresses obstacles to research use, provides training in critical appraisal and also runs workshops on specific topics. Additionally, a team of researchers identified and summarised relevant research evidence. Key activities were helping practitioners formulate answerable research questions and taking questions from practitioners rather than simply disseminating findings (Stevens *et al*, 2005).

4.5 Summary of Key Chapter Findings

This chapter reviewed mechanisms to facilitate knowledge exchange, focusing on the three key stances adopted by researchers, as well as models for understanding research utilisation and models that allow for the support of knowledge exchange.

Three Key Stances

Three key stances adopted by researchers include:

■ the consensual approach: whereby there is agreement between policy makers and researchers about the central issues, and researchers work within the existing paradigm to provide policy makers with knowledge about how best to bring about the desired processes and outcomes;

■ the contentious approach: whereby researchers and academics critique from the sidelines, often publishing their work in journals or letters to newspapers or the media;

■ the paradigm changing approach: whereby researchers problematised existing frameworks and suggest alternative agendas for policy and practice development.

Models for Understanding Research Utilisation

Models for understanding research utilisation within the public service and social care sectors included:

■ the practitioner model in which the application of research is generally seen as the responsibility of the individual practitioner, and its use is perceived as a linear process of accessing, and applying research;

■ the embedded research model, where responsibility lies with the policy makers and managers; practitioners rarely engage directly with research findings and the use of research is both 'linear and instrumental' – existing research is accessed and used instrumentally in the design of tools, protocols and guidelines;

- the organisational excellence approach, which involves organisational cultures becoming more researched minded and forming partnerships with the research community;

- the cultures in context method, in which the wider domains of influence on policy and practice are grouped under six headings: organisational culture; pragmatics; individual attributes; sources of information; the nature of evidence; linkage and exchange mechanisms. It offers a composite model that problematises the dissemination-utilisation continuum.

As noted by Walter *et al* (2004), there are tensions between models of research utilisation and ultimately the recommended approach to research utilisation is the 'whole systems approach' which outlines key roles and responsibilities for the different stakeholders.

Models of Partnership

Models of partnership operated by and within organisations involved in knowledge transfer included the following:

- tiers of linkage and exchange including formal relationships, interactive projects, dissemination and policy formation;

- collaboration between researchers and practitioners including co-location;

- intra-organisational programmes aimed at putting research into practice;

- research centres;

- informal partnerships.

Challenges to some of the above models were noted, particularly the need for investment, mutual appreciation, clear objectives and a wide range of opportunities.

5 REVIEW OF KNOWLEDGE BROKERING ORGANISATIONS[5]

5.1 Chapter Introduction

This chapter presents a review of the products and services that are provided by a sample of research utilisation and knowledge brokering organisations to help put research evidence to work. Section 5.2 presents a list of products and services that can help to overcome obstacles to using research evidence for Irish practitioners and managers. The results of an analysis of relevant international and Irish organisations against this range of products and services are presented. Section 5.3 presents the results of a review of 20 international research utilisation and knowledge brokering organisations and Section 5.4 shows the results of an analysis of 15 relevant Irish organisations. The objective is to identify products and services that a practitioner or manager could access with relative ease. So the review is based on a detailed examination of the websites of relevant organisations. Finally, Section 5.5 discusses key chapter findings.

> **Note:** When reading Sections 5.3 and 5.4 of this chapter it is important to take the following into consideration. Firstly, we attempted to review the websites from the perspectives of practitioners or managers undertaking internet searches for relevant products or services. Secondly, while some organisations may provide certain products and services, we may not have identified these in our review of websites, either because we did not find them when reviewing their website (despite our detailed navigation and keyword searching of each website) or because an organisation may not explicitly mention a particular product or service on its website. Thirdly, the focus of the analysis should not be on the precise number of organisations identified as providing or not providing particular products or service, but rather on the broad pattern that emerges in the extent to which facilities are provided.

5.2 Approach to Reviewing Organisations' Products and Services

5.2.1 Overview

In this section we explain the process used to review organisations' websites. It involved four overall steps as follows:

■ Step 1: summarising the broad challenges limiting research use by practitioners.

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[5] This chapter was produced by the Children Acts Advisory Board (Robert Murphy, Ciarán ÓSearcaigh and Marion Martin) and the Children's Research Centre, Trinity College Dublin.

- Ste p 2: identifying which of the broad challenges facing practitioners a knowledge brokering organisation could address.

- Step 3: developing a broad list of products and services that could be offered by a knowledge brokering organisation to help practitioners use research and categorising these in relation to each of the broad challenges facing practitioners (as per step 2).

- Step 4: reviewing each organisation's website to identify the range of products and services provided and grouping them into the relevant category as developed at stage 3.

Each of these steps is described in more detail in the following sub-sections. The results of the review are presented in Section 5.3, for international knowledge brokering organisations, and in Section 5.4, for relevant Irish organisations.

5.2.2 Step 1: Summarising Broad Challenges Limiting Research Use

Chapters 2 and 3 considered the 'location/origin' of barriers to and facilitators of research use in terms of 'individual', 'nature of research' and 'organisational' groups. As a first step in reviewing knowledge brokering organisations we summarised the overall or main challenges to using research evidence faced by a practitioner or manager, based on a further analysis of the information from the Irish consultations presented in Chapter 3.

Examining in detail the evidence from the consultations shows seven fundamental or key challenges limiting service providers in their use of research evidence. The seven categories were arrived at by a process of starting with a larger number and reducing down to a set that reflected significant differences between categories. Numerous specific barriers mentioned during the consultations and indeed the range of different facilitators suggested during consultations also 'fall' into the seven broad issues or challenges. The seven key or broad challenges limiting the use of research evidence are:

1. Difficulty in identifying relevant research material.

2. Difficulty in obtaining relevant research material.

3. Difficulty in pin pointing and understanding the key messages (findings and judgments) from research evidence.

4. Lack of confidence in the reliability of research evidence.

5. Limited supports to help integrate evidence to practice and policy.

6. A lack or perceived lack of practice-relevant research evidence.

7. Limited organisational motivation and support to use and integrate research evidence.

These 'challenges' are best considered as a series or set of potential obstacles a practitioner or manager could face when it comes to using research evidence. For instance, a practitioner or manager wishing to inform his/her practice with research evidence would need to be able to identify relevant material, obtain it and be in a position to make sense of and understand the key messages from research for their relevant area. Confidence in the reliability of relevant research evidence is essential if any proposed changes to practice resulting from it, are to be acceptable to colleagues.

Furthermore, even where the above conditions are satisfied, other obstacles may persist. For example, the complexity of the practice area and/or available research, or constraints on the practitioner's/manager's time may raise the requirement for assistance from external 'experts' or intermediary organisations, and this may not always be available.

There is also the possibility that research use may be restricted by a lack or perceived lack of practice-relevant material. Additionally, limited organisational motivation and support to use and integrate research evidence can act as a considerable challenge even in a situation where many of the other potential obstacles are not applicable.

Some of the challenges to research use are linked. For instance, a perceived lack of practice-relevant research evidence (challenge 6) may, in part, be due to difficulty or limited skills in identifying relevant research material (challenge 1). Similarly, limited organisational motivation and support to use and integrate research evidence (challenge 7) may both lead to limited support from intermediary organisations in the integration of evidence into practice (challenge 5).

A summary of the issues identified in relation to these is presented in Figure 5.1.

Figure 5-1: Summary of Key 'Broad' Challenges Limiting Research Use in Practice

Difficulty in identifying relevant research material was linked with factors such as a lack of awareness on the part of practitioners of relevant research, their limited literature search skills, the sheer volume of research material emerging from an internet search and a perception about the lack of relevant Irish literature.

Difficulty in obtaining relevant research material was linked with limited or lack of access to research materials and a lack of time for accessing research.

Difficulty in pinpointing and understanding the key messages (findings and judgments) from research evidence was linked to a number of specific factors, namely the often theoretical, complex and non-user friendly way in which information is presented and disseminated (not tailored to policy, management or practitioner audiences and not enough engagement); limited critical/analytical skills; and lack of time for reflection.

Lack of confidence in the reliability of research evidence including a mistrust of research and researchers, lack of confidence in the quality of research, practitioner resistance to change, and a deep rooted perception that decision making is best based on individual professional judgment.

Limited supports to help integrate evidence to practice and policy, due to a lack of active discussion about the meaning and application of findings, limited 'informal sharing and discussion' of research evidence, and a perceived lack of co-ordination between practitioners, research and development sections, audit, education and training sections of organisations.

A lack or perceived lack of practice-relevant research evidence particularly in respect of research conducted and published in Ireland.

Lack of organisational motivation and support to use and integrate research evidence was widely identified as a difficulty by practitioners and managers in Ireland. It was suggested that use of research evidence is not a priority for organisations and there was a lack of research culture within agencies and services. This is reflected by: limited time and other resources to support its use; limited evaluative work by organisations; few incentives to promote research use; limited individual or group reflective practice; a reluctance among practitioners to formally cite or reference research; little experience of using research evidence in work.

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5.2.3 Step 2: Identifying the Challenges that a Knowledge Brokering Organisation Could Address

Step 2 consisted of identifying or determining which of the seven broad challenges, which were demonstrated in Step 1, could be directly and comprehensively addressed by a knowledge brokering or intermediary organisation.

We concluded that the first five challenges could be directly addressed or supported by research utilisation or knowledge brokering organisations and that the remaining challenges (i.e. a perceived lack of practice-relevant research evidence and lack of organisational motivation to use and integrate research evidence) could only be partially addressed by a third party or intermediary organisation.

Step 3 in the next sub-section considers the range of products and services that could be provided by research utilisation and knowledge brokering organisations to address the five key challenges.

5.2.4 Step 3: Developing a Broad List of Products and Services

Overview

Step 3 involved developing a range of products and services provided by research utilisation and knowledge brokering organisations that could help to address the first five key challenges.

A detailed list of interventions that could be used to help increase the impact of research in a range of settings has been developed by the Research Unit for Research Utilisation.[6] This typology was not duplicated here as it was developed for application in a wider context. Instead, the list of products and services, used in this chapter, was developed by reviewing all of the international knowledge brokering organisations, reviewing the descriptions provided of individual products and services, considering their core purpose or features and determining how they could address the key challenges identified at Step 2.

A brief description of the products and services under each of the five challenges is presented in the following sub-sections.

Identifying Relevant Research Material: Products and Services

Searchable research databases on relevant topics, where an organisation provides a searchable online research database, which may be searched on the basis of key-word searches or the

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[6] Walter I, Nutley SM & Davies HTO (2003), 'Developing a Taxonomy of Interventions used to Increase the Impact of Research', Discussion Paper 3, Research Unit for Research Utilisation, University of St Andrews.

application of filters.

Direct links to searchable research databases on relevant topics, where an organisation provides direct links from its website to searchable research databases produced by *other* organisations.

Structured links to research produced by *other* organisations, where a website provides structured links grouped under clearly indicated topics or topic groupings to research material from a range of organisations.

Summaries of relevant research material produced by *other* organisations, providing brief summaries to indicate the relevance of research material (e.g. in terms of topics covered rather than actual findings) produced by other organisations but not providing it through a searchable database.

Written guidance on research identification, where an organisation produces or provides direct links to documents or other written material explaining how to identify research and to determine its relevance.

Training on how to identify relevant research, where an organisation provides training on how to identify research and how to determine its relevance.

Obtaining Relevant Research Material: Products and Services

Direct downloads/supported access to research material produced by *other* organisations, where a website helps a user obtain research reports produced by *other* organisations by providing direct download facilities or report reference numbers for libraries or to purchase material.

Direct downloads/supported access to the *host* organisation's research material, where a website provides direct access to the host organisation's research material through download facilities or provision of report reference numbers for libraries etc.

Provision of library facilities, where an organisation provides public access to its library facilities.

Written guidance on accessing research reports, where an organisation produces or provides direct links to documents explaining how to obtain research material.

Training on obtaining research reports, where an organisation provides direct training on how to obtain research material.

Identifying Key Research Messages: Products and Services

Research information and awareness events, where an organisation hosts events (conference, seminar or workshop) presenting information or key messages from research evidence to increase awareness and facilitate discussion on a particular topic or a series of topics. They differ from training/learning events (see last sub-section) in that a participant in such an event would *not* be trained or enabled to directly integrate specific evidence based learning into their practice following an information/awareness event.

Summaries of key messages from research produced by *other* organisations, where a website provides summaries of key messages or points (findings and judgements) from research produced by *other* organisations.

Summaries of key messages from research produced by the *host* organisation, where a website provides summaries of key messages or points (findings and judgements) from research produced by the *host* organisation.

Material on critical analysis and appraisal, where an organisation produces or provides direct links to manuals or guidance documents on how to undertake critical analysis, appraisal and evaluation.

Training on critical analysis and appraisal, where an organisation provides training to build and develop critical analysis, appraisal and evaluation skills.

Confidence in Research Evidence: Products and Services

Quality rating systems, where an organisation signals research quality through the identification of a quality rating system that explicitly rates research evidence into different categories.

Other signals, where a website provides other (non-rating) signals in an attempt to promote confidence in the quality of research evidence. For example, where a website makes reference to quality checks of research provided, indicating for example where reports have been peer reviewed.

Support to Integrate Research Evidence into Practice: Products and Services

Evidence informed guidance and manuals on practice issues, where an organisation produces or provides written evidence informed guidance to support good practice.

Guidance on increasing the impact of research, where a website provides written guides on how to increase the impact of research evidence in practice.

Training/learning events, where an organisation provides an event (e.g. a workshop) with the objective of enabling the participants to learn 'how to' integrate evidence based learning into their practice.

Evidence integration projects, where an organisation supports another organisation or a group of organisations to explore (usually over a period of months) how to use research in policy making and/or practice. These projects typically involve the production of practical materials to capture project learning, the piloting of the developed approach and amendment thereafter.

5.2.5 Step 4: Review of Websites

Step 4 involved reviewing websites to identify the relevant products and services provided and categorising these under the product and service categories as described at Step 3.[7]

It is important to note that some of the products and services identified cut across a number of key challenges outlined in Step 1. For example, some databases solely identify relevant research, for example by generating a list of relevant articles in response to a word search. Some databases also provide facilitated access to material through download facilities, while in addition to the latter two features some databases also provide a summary of the key research messages from articles. For this reason products and services that address multiple barriers to research use are recorded more than once in the review, for example if a product helped address three barriers it was recorded against each of these.

The actual review of each website involved the following:

- ◼ Firstly, each website was reviewed by a member of the team (one member of the team reviewed the international websites and another member reviewed the Irish websites). A team member

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[7] The review of products and services for 'Confidence in Research Evidence' was restricted to identifying organisations that provided 'quality rating systems'. 'Other signals' as per Section 5.2.4 were not covered. This is because quality rating systems are the most 'direct and tangible' product/service in this area.

reviewed a website in terms of navigating a site's toolbars and following relevant links for products and services, and also undertaking key-word searches (e.g. database, seminar, training, research papers etc) on a website's search function to identify less 'visible' material on a website. The team member then used a standardised 'grid' to record the products and services on each website and also provided a description of the relevant material or basis for their categorisation.

■ Secondly, a member of the team reviewed colleagues' categorisations. This involved two elements: a review of the 'grid' as produced by each team member to check for correct and consistent categorisations; and an independent review of each website by another team member.

■ Thirdly, where there were differences between the categorisations at bullet one and two above, these were discussed and a definitive categorisation was agreed.

5.3   Review of International Organisations

5.3.1 Overview

As Chapter 3 demonstrated, while the internet is a popular source of research evidence, only a small number of Irish stakeholders in our sample from children's services consult specific research sites, relying instead on policy sites and Google searches. However, a number of knowledge brokering organisations in other countries, while not totally reliant on web-based dissemination, are increasingly known and accessed via the Internet. This section of the report reviews a sample of the better known web-based organisations in order to demonstrate their purpose, the nature of services provided, networking and outreach and connectivity through their websites.

Twenty international web-based organisations were reviewed, all of which place a particular emphasis on the importance of providing practitioners with an evidence base for their work. These organisations were selected after extensive internet searches, following up leads and links from individual websites, and consultations with experts in the field of research dissemination. A full list of the organisations reviewed, their titles, the countries in which they are located and the acronyms used throughout this document is present in Figure 5.2. The countries in which the organisations reviewed are based are the United Kingdom, the United States, Australia and New Zealand.

5.3.2 Purpose and Mission

All of the websites of the organisations contain a statement or description of their purpose, including the promotion of evidence informed practice with an affirmation of its positive impact on practice with children and families. A statement of purpose or mission for each organisation is presented in Figure E-1 in Appendix E.

These brokering or intermediary organisations provide a range of products and services to help bridge the gap between research production and the application of research in practice and/or policy. The precise focus of these varies from organisation to organisation but overall, they overcome a number of the impediments to research use presented in Section 5.2.

Figure 5-2: List of International Websites Reviewed

Organisations	Website Address	Country
1. Centre for Reviews and Dissemination	www.york.ac.uk/inst/crd/knowledge_transfer.htm	UK
2. Research in Practice	www.rip.org.uk	England and Wales
3. Research in Practice for Adults	www.ripfa.org.uk	UK
4. Research Unit for Research Utilisation	www.ruru.ac.uk	UK
5. Child Youth and Family Consortium	http://www.cyfc.umn.edu/about/	USA
6. The California Evidence Based Clearinghouse for Child Welfare	www.cachildwelfareclearinghouse.org/	USA
7. National Child Protection Clearinghouse	www.aifs.gov.au/nch/	Australia
8. Australian Clearinghouse for Youth Studies	www.acys.info/	Australia
9. The Campbell Collaboration	www.campbellcollaboration.org	Norway/International
10. ISPCAN	www.ispcan.org	USA/International
11. Social Care Institute for Excellence	www.scie.org.uk/	UK
12. Child Welfare League of America	http://www.cwla.org/default.htm	USA
13. New South Wales Government Department of Community Services	www.community.nsw.gov.au/DOCS	Australia
14. New Zealand Family Violence Clearinghouse	www.nzfvc.org.nz	New Zealand
15. Child Information Gateway	http://www.childwelfare.gov/index.cfm	USA
16. National Center for Children in Poverty	www.nccp.org	USA
17. Promising Practices Network on Children, Families & Communities	www.promisingpractices.net	USA
18. The Cochrane Collaboration	www.cochrane.org	UK/International
19. Prevention Action	www.preventionaction.org	International
20. Chapin Hall	www.chapinhall.org	USA

5.3.3 Products and Services to Address Barriers

Overall Findings

Table 5.1 shows the range of products and services promoted through the websites of the international sample of organisations. The products and services provided across the organisations are discussed in more detail in the following sections.

Table 5-1: Summary of Facilities Provided Through the Sample of International Websites

Products and Services	Number
Facilities Provided to Help Identify Research	
Searchable research databases on relevant topics	11
Direct links to searchable research databases on relevant topics	5
Structured links to research produced by *other* organisations	12
Summaries of relevant research material produced by *other* organisations	7
Written guidance on research identification	6
Training on how to identify relevant research	2
Facilities Provided to Help Obtain Research	
Direct downloads/access to research material produced by *other* organisations	14
Direct downloads/supported access to the *host* organisation's research material	20
Provision of library facilities	5
Written guidance on accessing research reports	6
Training on obtaining research reports	3
Facilities Provided to Help Pinpoint and Understand the Key Messages from Research	
Research information and awareness events	11
Summaries of key messages from relevant	16
Material on critical analysis and appraisal	8
Training on critical analysis and appraisal	6
Facilities Provided to Address Lack of Confidence in Reliability of Research Evidence	
Quality ratings systems	3
Facilities Provided to Support Integrating Research Evidence into Practice	
Written evidence informed guidance and manuals on practice issues	13
Written guides on increasing the impact of research	5
Training/learning events	4
Evidence integration projects	2

Identifying Relevant Research Material

Over half, i.e. 11 of the 20 websites, provided online databases that facilitate searches on relevant topics. The sophistication of the database search facilities varied considerably from one website to the next. Five organisations provided links to searchable databases on other websites. Twelve organisations categorised research material into searchable topics. Seven websites provided summaries of relevant research material, with the comprehensiveness of the summaries and overviews varying from one or two sentences to a full summary.

Figure 5-3: Sample of Facilities Provided Through Websites to Help Identify Research

Centre for Reviews and Dissemination provides searchable research database(s): DARE: 15,000 abstracts of systematic reviews, including over 6,000 quality assessed reviews; NHS EED: 24,000 abstracts of health economics papers including 7,000 quality assessed economic evaluations; HTA: 7,000+ completed and ongoing health technology assessments. It also provides training through an Introduction to Systematic Reviews and Critical Appraisal course.

Research in Practice (RIP) provides searchable research database(s): The EvidenceBank is a database of research reviews, the content of which relates to the Every Child Matters agenda. EvidenceBank is designed to help one critically assess the value of a review. RIP provides links to various searchable research databases It provides research/policy updates intended to help agencies keep up to date with national research and policy developments, and monthly signposts to useful material that one might otherwise miss. It provides guidance on research identification and relevance to help users to find and evaluate research and contains the following sections: finding research; accessing research; evaluating research; research governance; glossary of research terms; key journals; learning links.

Research Unit for Research Utilisation (RURU) provides searchable research database(s): the RURU database is a fully searchable library of references on research utilisation and the implementation of evidence based policy and practice (EBPP). It draws on papers from four key sectors: healthcare, education, criminal justice and social care. Developed by the RURU team, the database holds references to a wide range of materials including journal articles, books, reports, conference proceedings and seminar papers. It aims to provide a broad and accessible evidence base for the research utilisation field in order to support research synthesis and the development of new knowledge in this area.

Child Youth and Family Consortium (CYFC) provides links to research on identified topics: e.g. early childhood; school-age children; adolescents; family relationships and parenting; seniors and intergenerational issues; communities.

Australian Clearinghouse for Youth Studies (ACYS) provides searchable research database(s): the ACYS Database is a fully searchable library of references on research utilisation. The database holds references to a wide range of materials including journal articles, books, reports, conference proceedings and seminar papers.

Obtaining Relevant Research Material

All 20 websites examined facilitated the downloading of their research papers. The review shows that 14 of the 20 provide online access to other organisations' research material. Five provided access to a library search utility. Most of these did not provide for online ordering, or purchase, of documents or books. The quantity of downloadable papers varied from website to website. Some contained access to hundreds of papers while others contained a handful. Instructions or guidance material on how

research reports might be obtained is provided in 6 of the 20 websites and three provided training on how to obtain such reports.

Figure 5-4: Sample of Facilities Provided By International Websites to Help Obtain Research

Research in Practice facilitates obtaining research reports: *research links*: provides a range of research links that are useful for evidence informed practice. The research links are organised under different headings - databases, gateways, government research, online journals, online libraries, research organisations and evidence based initiatives; also supported through other services on website via issue one and two. Certain of the sites fit into one or more of the categories found on the menu. *Guidance/training* on how to obtain research reports: see research resources issue one.

Research Unit for Research Utilisation facilitates obtaining research reports: links to various RURU and RURU-related publications, with a focus on research utilisation.

Child Youth and Family Consortium facilitates obtaining research reports: links to various CYFC reports under publications and non-CYFC reports under topics as per issue one.

Australian Clearinghouse for Youth Studies facilitates obtaining research reports: Free online access to journals, databases, newsletters, resource sheets and conference presentations.

Pinpointing and Understanding the Key Messages from Research

Most of the websites, 16, provide summaries of key points from research for the browser. Information and awareness events covering a wide range of topics of relevance to practitioners/managers are provided by 11 of the 20 organisations. Manuals and guidance on how to undertake research/critical analysis are provided on 8 of the 20 websites contained. Six provided training on critical analysis and appraisal.

Figure 5-5: Sample of Facilities Provided Through International Websites to Help in Pinpointing and Understanding the Key Messages from Research

Centre for Reviews and Dissemination Training: Introduction to Systematic Reviews and Critical Appraisal course. Guidance and manuals on research issues: research methods, various publications. Provides report summaries/key points: as per databases. Report reference numbers.

Research in Practice Provides report summaries/key points: what works for troubled children and young people? These are interactive web pages (almost 1,000) providing information about evidence based interventions for children and young people with emotional and behavioural and other mental health problems. They suggest evidence based strategies that can be used to tackle specific problems and evidence based projects that might help 'troubled' children, young people and their families; its 'prompts' draw together three main types of evidence (research, policy documents and practice examples). Research evidence is gathered to summarise key current evidence on the chosen topic and provide an overview of what the evidence is saying. *Awareness events: learning events -* partnership conferences: partnership conferences present research and innovative practice around a key topic. They are broad in scope and likely to be of interest to a wide range of professionals working to improve outcomes for children and families.

Research Unit for Research Utilisation awareness events: events: organises seminars on research utilisation: the NORFACE Seminar Series on Evidence and Policy (2007- 2009); seminar on Using Evidence in the Scottish Polity; Research Utilisation Seminar Series.

Child Youth and Family Consortium awareness events: family impact seminars - following a national model used in 25 states, Family Impact Seminars connect research and state policy making by providing state-of-the-art information in an objective, non-partisan manner. Each topical seminar includes forums, briefing reports, and follow-up activities explicitly for legislators, key agencies and staff. Rather than lobbying for particular policies, the seminars offer a range of policy options and provide opportunities for participants to identify common ground. CYFC events and activities calendar - the events calendar of the CYFC promotes University of Minnesota events focused on issues related to children, youth, and families. Examples of events could include public forums, academic symposia, and conferences.

National Child Protection Clearinghouse (NCPCH) the information resources of the Clearinghouse are disseminated to a network of clients through regular paper and electronic publications. It includes for example 'resource sheets' defined by the Clearinghouse as 'brief, frequently updated articles, compiled by staff …covering a wide variety of topics such as the economic costs of child abuse, mandatory reporting, child abuse offenders and child abuse statistics.'

Research in Practice for Adults (RIP*fa*) provides accessible summaries of the most up-to-date relevant evidence on key issues for policy and practice. This website also provides what is termed 'evidence clusters' and 'information clusters'. Information clusters are defined as 'literature assembled from recent articles, policy documents, newsletters and any other available sources. They are intended to provide a good general introduction to the topic.'

Supports to Address Lack of Confidence in Reliability of Research Evidence

A number of websites make reference to quality checks of research provided, indicating for example where reports have been peer reviewed. A small number of organisations, three, provide explicit rating systems and these are described in Figure 5.6. Some organisations also provide some description of their quality approval system, although their websites do not explicitly rate research into different categories, for example the Campbell Collaboration (C2).

Figure 5-6: Sample of Facilities Provided Through International Websites to Address Lack of Confidence in Reliability of Research Evidence

The California Evidence Based Clearinghouse (CEBC) for Child Welfare

The CEBC organisation has a scientific panel and a panel of topic experts who explicitly rate and review the quality of research to ensure its integrity. A scientific rating scale is used to determine the level of research evidence for the programme and a child welfare relevance rating scale examines the degree to which the programme or model was designed for families served within the child welfare system. Each programme that has been identified and reviewed is rated on both scales.

Scientific Rating Scale	Child Welfare Relevance Rating Scale
1. Well-Supported by Research Evidence	1. High
2. Supported by Research Evidence	2. Medium
3. Promising Research Evidence	3. Low
4. Evidence Fails to Demonstrate Effect	NR - Not able to be Rated
5. Concerning Practice	
NR. Not able to be Rated	

Child Welfare League of America (CWLA)

The CWLA Research to Practice (R2P) effort is focused on discovering and presenting relevant information regarding programmes and/or practices involved. CWLA notes that it conducts regular reviews of research literature in key practice and policy areas and maintains relationships with child welfare researchers. Each programme or practice in a R2P initiative has been identified as effective, with successes supported by a research component. A range of levels of research rigour have been developed to describe the level of empirical support available. Explicit ratings presented include:

1. Exemplary Practice

2. Commendable Practice

3. Emerging Practice

4. Innovative Practice

Promising Practices Network on Children, Families and Communities

This website notes that programmes have been screened for scientific rigour, relevance and clarity and reviewed by an expert panel. The evidence is assessed on the following criteria: type of outcomes affected; substantial effect size; statistical significance; comparison groups; sample size and on availability of programme evaluation documentation.

The programmes that are listed on the website are generally assigned either a 'Proven' or a 'Promising' rating, depending on whether they have met the evidence criteria. In some cases a programme may receive a 'Proven' rating for one indicator and a 'Promising' rating for a different indicator. In this case the evidence level assigned will be 'Proven/Promising', and the programme summary will specify how the evidence levels were assigned by indicator. The indicators are as follows:

■ Proven

■ Promising

■ Proven/Promising

■ Not Listed on Site

Supports to Help Integrate Research Evidence into Practice

Written guidance or manuals on issues of practice were available on 13 of the 20 websites scrutinised, with 5 organisations producing guides on increasing the impact of research. Four of the websites provide learning/training events. The nature of these events varied from one organisation to the next. Only two organisations' websites indicated that they provided expert advice on how to integrate evidence into practice.

Figure 5-7: Sample of Facilities Provided Through International Websites to Support Integrating Research Evidence into Practice

Centre for Reviews and Dissemination provides *guidance and manuals* on practice issues such as 'Effectiveness Matters - Smoking Cessation'.

Research Unit for Research Utilisation provides *guides on increasing the impact of research* including papers on assessing research impact.

Research in Practice provides *guidance and manuals* on practice issues on a range of areas. It hosts *learning events;* it describes 'research messages workshops' to address current research and discuss how to apply messages to practice. These workshops allow time for reflection, discussion and idea sharing, allowing one to identify how these research messages can be embedded into practice. It provides 'research support workshops' that aim to provide development opportunities for improving the use of evidence informed practice in your work. These workshops use tried and tested tools and techniques which can be taken back to practice; learning events - case study workshops: case study workshops examine real practitioner cases in small groups of up to 15 participants, led by an experienced facilitator. The aim is to use evidence informed models for working with children and families in difficult situations. It also provides 'change in projects' the aim of which is to bring together a few agencies from the network to explore with RIP (over a period of several months) a particular aspect of using research in policy making and practice. The product is a set of practical materials, an action pack, that crystallises the collective learning, usually accompanied by audio-visual resources. These are subsequently piloted and amended as a result of the pilot and finally published as a handbook.

5.3.4 Comments Re Formats and Dissemination Methods

Overview

The international websites reviewed have at their core the provision of easy access to pertinent research material. This is achieved through a variety of different products and services mentioned earlier and a range of different media is also used including audio, video, DVD, CDs, printable exercises and downloads. A number of websites also publish their own newsletters and some offer an opportunity for users to interact with one another for example through e-mail exchange, discussion boards and discussion forums. These are discussed in more detail in this section.

Optional Formats

A variety of optional formats are available on some of the websites and include multimedia sources such as audio versions, videos and DVDs, CDs, printable exercises and downloads. For example, available on the RIP website to accompany printed materials in a list of publications are videos, CDs and/or printable exercises, tools and support materials on CD or downloadable from the website. Another example of an innovative multimedia format can be found on the Australian Department of

Child Safety website, which hosts research forums three times a year for those who are interested in child protection related research and the application of research into practice. These forums are video-linked live around Queensland and afterwards each is recorded onto a DVD and copies are sent to all relevant services.

A small number of the websites provide their information in different languages. For example Research in Practice provides an option of reviewing its most popular research briefings in Welsh and the Child Information Gateway offers some of its information in Spanish.

Newsletters

A number of the websites publish their own newsletters, for example *Outlines* (RIP*f*A), the *Child Abuse Prevention Newsletter* (NCPCH), *Youth Studies Australia* (ACYS) and *Youth Field Xpress* (ACYS).

Professional Networking

In an attempt to make events more interactive the NCPCH website details how staff provide a visible presence at workshops, conferences and related activities, and frequently present papers and seminars. They also sit on a number of state-based and national advisory groups and committees committed to child abuse prevention or the improvement of the child protection system.

The Campbell Collaboration (C2) hosts a number of groups whereby interested people are invited to come together and identify topics for systematic reviews (co-ordinating groups). They work towards increasing the impact of C2 reviews in policy and practice arenas, as well as making the information more accessible to the public and recipients of the interventions (users group) and establishing priorities and determining scientific and general policies of C2 steering groups.

Interpersonal Communication

Attending and being a presence at workshops and seminars certainly provides opportunities for the target audience to interact and establish relationships with information providers. Such interpersonal communication is also being made available by other means on some of the websites such as through the provision of specialist advice services (NCPCH, RIP, RIP*f*A) on the phone and via e-mail. Membership of some of the websites (RIP, RIP*f*A, CEBC) affords particular access to staff members. For example members of the CEBC website can request that a particular area be reviewed.

Enhanced Connectivity through the Websites

A small number (four) of the websites reviewed (RIP, RIP*f*A, RURU, NCPC) provide users opportunities for e-mail exchange, discussion board and discussion forums with other users.

The NCPCH details boundaries regarding the content of such discussions and also details a moderation policy whereby e-mails being exchanged through their website are read and screened for inappropriate or irrelevant content. The website provides users with a list of the types of discussion it considers relevant for users to engage in.

The CYFC also provides a register of researchers known as an 'experts database' whereby users of their website can get in contact with someone who has a lot of expertise and experience in their area of interest. RIP has a similar service which they term 'register of researchers' and describe as:

'…. a database that holds contact details for researchers whose work may be of interest to children's services professionals, together with a list of their research interests and methods, their current research project and their key publications'.

Nine of the websites (RIP, RIP*f*A, CRD, CEBC, CH, ISPCAN, SCIE, NCCP, PPN) provide e-mail updates variously described as e-mail alerts, e-newsletters and e-updates. Prompts welcoming users to sign up usually have a prominent position on the homepage. With a little more searching of the websites it becomes apparent that some also provide specific e-alerts. For example, the ACYS offers table of content alerts from journals published by the website and others.

Information is also frequently provided regarding relevant events in the media and press releases pertinent to the website users. Prevention Action, for example, provides blogs and feeds that contain comment on happenings in the social care field and relevant events reported in the media. The ACYS also provides news feeds and a news watch service.

Other Areas

A number of other areas are worth mentioning as follows:

- **Helpdesks:** a phone-based helpdesk to provide information and advice to child welfare professionals and researchers is available from some organisations.
- **Specialist advice:** some websites indicate that specialist advice is provided. For example, the Clearinghouse website notes that research staff are available to help with requests requiring a more specialised response. This may include the detailed analysis and interpretation of current issues in child protection and child abuse prevention, informing programme development and professional practice, or providing advice on research methodology and programme evaluations.
- **Programme evaluation consultancy services:** some websites note that host organisations provide a service designed for service providers who run, or who plan to run, child abuse

prevention programmes. The aim is to provide greater support to those agencies and groups that want to evaluate their prevention programmes, but require advice and support to make it happen.

5.4   Review of Relevant Irish Organisations

5.4.1 Overview, Purpose and Mission

The focus of this section is to identify Irish organisations that provide products and services that assist organisations and practitioners working with children to apply research evidence to policy and practice. The method used to identify these organisations was an online review of organisational websites.[8] This entailed reviewing the services provided by the organisation against the facilitators that may assist in overcoming the five main barriers listed in Section 5.2.

An important task was to identify organisations that have as their core focus the production and/or provision of research evidence across services in the children's sector. Three organisations were identified as relevant under this category: the Office of the Minister for Children and Youth Affairs, the Children Acts Advisory Board and the Centre for Effective Services.

Because these organisations are relatively new, it was necessary to extend the analysis to other relevant organisations that provided relevant products and services. Although the core function of the other organisations was not to produce or disseminate research evidence, some have developed a number of the services which have been identified as addressing the five identified challenges. They included three academic centres with a focus on children and families, three information portals and six organisations that either have a specific focus on providing services to children and youth and/or whose services impact on children at risk (see Figure 5.8). A summary of their purpose and mission is presented in Figure E-2 in Appendix E.

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[8] The search for relevant Irish organisations in relation to research utilisation and integration involved three main elements. First, visiting the websites of 'well known' organisations in Irish children's services such as OMCYA, Barnardos, Focus Ireland, Combat Poverty, and university based children's research centres and so on. Second, undertaking internet searches using relevant keywords and searching for organisations that provided websites with research elements related to social care and children's services. The types of keywords used included: children research; research; children database; research evidence children; research to work; children's research evidence; social care research; social care research evidence; social care database; research social care; research social care children; research children services; putting research evidence to work etc. Third, examining additional websites for organisations that were identified on websites found during phases one and two of the search.

Figure 5-8: Sample of Irish Organisations Selected for Website Review

Office of the Minister for Children and Youth Affairs	Social Studies.ie
Children Acts Advisory Board	Irish Social Care Gateway
Centre for Effective Services	Applied Social Studies Community of Practice
	Combat Poverty
	Family Support Agency
Child and Family Research Centre, NUIG	Barnardos
Children's Research Centre, TCD	Focus Ireland
Centre for Social and Educational Research, DIT	Irish Youth Work Centre
	Breaking Through

5.4.2 Products and Services Provided [9]

Overall Findings

Table 5.2 shows the number of organisations providing the products and services that can assist in addressing five of the seven key issues limiting the use of research evidence in practice, as per Section 5.2. The specific findings in relation to each of these key issues are discussed in the next sub-sections. The overall finding is that there is relatively limited provision (as promoted through websites) of the potential products and services that could be provided to help address these issues. This is evident from the limited supply of assistance in these areas, both in terms of the number of organisations providing these facilities (as summarised later) and in terms of the detail in which these facilities are provided.

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[9] The specific services to be provided by the Centre for Effective Services Ltd were not specified on its website at the time of analysis as the organisation was at its development stage.

Table 5-2: Summary of Facilities Provided Through Sample of Irish Organisations

Products and Services	Number
Facilities Provided to Help Identify Research	
Searchable research databases on relevant topics	2
Direct links to searchable research databases on relevant topics	4
Structured links to research produced by *other* organisations	1
Summaries of relevant research material produced by *other* organisations	1
Written guidance on research identification	1
Training on how to identify relevant research	0
Facilities Provided to Help Obtain Research	
Direct downloads/access to research material produced by *other* organisations	0
Direct downloads/supported access to the *host* organisation's research material	9
Provision of library facilities	3
Written guidance on accessing research reports	1
Training on obtaining research reports	0
Facilities Provided to Help in Pinpointing and Understanding the Key Messages from Research	
Research information and awareness events	10
Summaries of key messages from research produced by *other* organisations	0
Summaries of key messages from research produced by the *host* organisation	6
Material on critical analysis and appraisal	1
Training on critical analysis and appraisal	0
Facilities Provided to Address Lack of Confidence in Reliability of Research Evidence	
Quality ratings systems	0
Facilities Provided to Support Integrating Research Evidence into Practice	
Written evidence informed guidance and manuals on practice issues	4
Written guides on increasing the impact of research	1
Training/learning events	4
Evidence integration projects	2

Identifying Relevant Research Material

The most frequently provided facility to help identify relevant research material is the provision of links to searchable research databases hosted by other organisations (mainly international organisations), which is provided by 4 of the 15 organisations. Other potential facilities to help address this issue are

either provided by fewer than two organisations (and only to a limited extent) or are not provided at all (see Figure 5.9).

Figure 5-9: Facilities Provided Through a Selection of Irish Websites to Help Identify Research

Searchable Research Databases on Relevant Topics:
CAAB's website states that it will provide online searchable databases on relevant topics such as inter-agency co-operation in children's services, and children in detention and out of home care.
Irish Youth Work Centre provides a database search facility containing details on over 7,650 items housed in the Irish YouthWork Centre and available for loan to members of the centre. It includes books, training materials, videos/DVDs, CD Roms, research reports, articles and statistics.
The **OMCYA** through the childrensdatabase.ie provides a searchable collection of online, full-text *policy* documents produced by Irish Government departments and approximately 70 state agencies from 1996 to the present on issues that directly affect children or their lives.
Direct Links to Searchable Research Databases Produced by *Other* Organisations:
Irish Social Care Gateway provides links to searchable research databases produced by other organisations, e.g. online directory of the social sciences.
socialstudies.ie provides links to searchable research databases produced by other organisations and organisations relevant to practice topics.
OMCYA through childrensdatabase.ie provides links to annotated websites (mainly international), involving a collection of databases, specialist libraries, Irish, European and international resources, in relevant areas such as: early education and development, education, and physical, emotional and mental well-being etc.
Irish YouthWork Centre provides links to other national and international organisations databases and websites.
Direct Links to Research Material From *Other* Organisations Grouped Under Identified Topics:
Irish Social Care Gateway provides links to either research articles or other organisations with research on identified topics, e.g. social care work, advocacy.
Summaries of Research Material (e.g. Topics Covered) Produced by *Other* Organisations:
socialstudies.ie reviews books, films or other materials of interest to the social care community, e.g. Sarah Otten reviews Manus Charleton's Ethics for Social Care in Ireland: Philosophy and practice.
Guidance Documents on Research Identification and Relevance:
Irish Social Care Gateway provides links to sites with guides for research and internet use e.g. Internet research, RMIT university library etc.

Training with Elements on How to Search for Relevant Research Material:
None.

Obtaining Relevant Research Material

None of the organisations' websites offer direct links to research reports produced by *other* organisations, albeit that 9 of the 15 provide access to research undertaken/funded by their *own* organisation. Three provide free library access; only one provides some information on how to obtain research reports in general and none provide training on how to obtain research material (see Figure 5.10).

Figure 5-10: Facilities Provided Through a Selection of Irish Websites to Help Obtain Research

Direct Downloads/Supported Access to Research Material Produced by *Other* Organisations:
None.
Direct Downloads/Supported Access to *Own* Organisation's Research Material
Provided by: OMCYA, CAAB, CFRC, CRC, CSER, Barnardos, FI, CP, FSA.
Direct Provision of Library Facilities:
Combat Poverty's website notes that its library has one of Ireland's largest collections on social policy, poverty, social exclusion and community development. All of the titles held by the library are recorded on its searchable online catalogue which may be accessed through the catalogue search link on the website. The library is open to the public and all its services are free of charge. **Barnardos** provides an online catalogue of its public library, which it notes, includes comprehensive information on a range of childcare related issues. **Irish YouthWork Centre's** library provides thematic catalogues of youth work related books and training materials available through a lending service, e.g. thematic reports, video and CD Rom catalogue.
Guidance Material on How to Obtain Research Reports:
Irish Social Care Gateway provides links to sites with guides for research and Internet use e.g. internet research, RMIT university library etc.
Training on How to Obtain Research Reports:
None.

Identifying and Understanding the Key Messages from Research

The provision of 'information/awareness events' is the most frequently provided facility to help managers and practitioners to identify and understand the key messages from relevant research,

used by 10 of the 15 organisations. Provision of other potential facilities is limited; only one organisation provides some information on how to undertake research or critical analysis; none provide summaries of key points from other organisations research (six providing snapshots of their 'own' research) and none provide training on critical analysis skills (see Figure 5.11).

Figure 5-11: Facilities Provided Through a Selection of Irish Websites to Help Pin Pointing and Understanding the Key Messages from Research

Information and Awareness Events:
Office of the Minister for Children and Youth Affairs hosts/supports research related launches and conferences.
Children Acts Advisory Board hosts Evidence to Practice Seminars, Network Seminars and conferences relevant across the children's sector, e.g. restorative practices, a differential response model, inter-agency co-operation.
Breaking Through hosts conferences e.g. The Breaking Through, 8th Annual Conference, 'Young Lives' - Image and Attitudes Report and provides links to information on other awareness events hosted by other organisations, e.g. 'Anti-Racism Education and Learning Through Football.'
Barnardos hosts an Annual Barnardos conference.
Irish YouthWork Centre holds events and seminars on youth work issues, e.g. SUPER Conference - Tackling Drugs in Local Communities, Supervision in Youth Work.
Combat Poverty hosts research seminars which it describes as an informal forum to discuss poverty-related research, e.g. The Living Alone Allowance as a Policy Response to Tackling Poverty. It also works on communications and public awareness through schools and curriculum work to promote poverty awareness amongst second-level students and teachers, e.g. Poverty the Curriculum and the Classroom, a project based in the City of Dublin Vocational Committee Curriculum Development Unit (CDU).
Child and Family Research Centre hosts seminars and conferences, e.g. 2007 Building Resilience in Children, Families and Communities - Theory and Practice, Family Support Then and Now: 'Reflecting on Contemporary Challenges'.
Children's Research Centre hosts seminars and lectures e.g. 'Children's Cultures in Contact Issues and Strategies in Intercultural Relations', The Irish Association of Young People in Care: 'From Care to Where...?':Leaving and Aftercare in Ireland. Time for Change'.
Centre for Social and Educational Research hosts 'contemporary newsworthy' conferences and seminars, e.g. 4th Annual North-South Criminology Conference, Early Childhood Care and Education Policy Seminar III: Considering Strategic ECEC Policy Approaches.
Applied Social Studies Community of Practice, supports conferences and seminars, e.g. Learning and Teaching Conference in Social Care 2009.

Direct Summaries or Snapshots of Key Messages/Points from Relevant Research of Other Organisations:
None.
Direct Summaries or Snapshots of Key Messages/Points from Relevant Research of *Own* Organisation:
Access to briefing notes and summaries of practice relevant research produced as part of *own* organisation's research activities available on websites of OMCYA, CAAB, CFRC, CRC, CP and FSA.
Manuals/Guidance Documents on How to Undertake Critical Analysis and Appraisal:
Irish Social Care Gateway provides links to information sources that help in conducting and analysing research.
Training on Critical Analysis and Appraisal:
None.

Supports to Address Lack of Confidence in Reliability of Research Evidence

None of the Irish websites reviewed provide quality ratings systems on research. Although it should be pointed out that only a small number of organisations in the international sample, see Section 5.3, provided this facility.

Supports to Help Integrate Research Evidence into Practice

The websites of four organisations reviewed provide access to written guidance or manuals on practice issues, four provide training/learning events, one mentions guidance on increasing the impact of research and two refer to evidence integration projects (see Figure 5.12).

Figure 5-12: Facilities Provided Through a Selection of Irish Websites to Support Integrating Research Evidence into Practice

Guidance and Manuals on Practice Issues:

OMCYA's website provides guidance and subject related materials: Child Welfare and Protection, Early Years Education, Childcare: National Guidelines or regulations relevant to the particular areas, e.g. National Quality Framework for Early Childhood Care and Education, Children First National Guidelines for the Protection and Welfare of Children.

CAAB's website provides good practice guidance on physical restraint and the work of a guardian *ad litem,* and mentions future guidelines for therapeutic interventions and inter-agency working.

Barnardos' website provides a range of publications on working with children and topics produced by Barnardos' Training and Resource Service, e.g. Sharing Good Practice.

Irish YouthWork Centre the IYWC has its own publishing label, the Irish YouthWork Press, which has produced over 50 publications to date, including a wide range of reports, guidelines and training manuals.

Guides on Increasing the Impact of Research:

CAAB's website makes reference to this report and the development of a Putting Research Evidence to Work Report and Gateway.

Training/Learning Events:

Barnardos provides consultancy and public training events, e.g. FETAC Level 5: Child Development Course, Understanding Challenging Behaviour.

Breaking Through provides information on learning events in other organisation such as seminars, lectures, training events, e.g. Urrús Training Days 2009: Homelessness and Drugs Addiction Studies etc.

Family Support Agency, Family Resource Centre Programme provides practical assistance to community groups such as training, information and advice.

Irish YouthWork Centre provides learning events via training/workshops on youth work issues, e.g. Anger Management - Interventions with Young People, Working with Young Refugee and Asylum Seekers.

Evidence Integration Projects:

Child and Family Research Centre's website notes 'The context for the CFRC's research agenda is greatly influenced by the need for evidence-based services and by practical, outcome-focused considerations, e.g. Supporting organisations with mapping needs, identifying models and tools for best practice and with measuring service delivery is at the core of our work.'

CAAB's website mentions evidence integration projects in relation to a differential response model and restorative practices.

5.4.3 Dissemination and Communications Methods

It is worth mentioning that while Expertise Ireland's website does not cover the facilitators as outlined under the five challenges in Section 5.2 (and is not covered in the sample above) its website is an information portal providing access to information that encourages collaboration between the research community and practice.

5.5   Summary of Key Chapter Findings

Internationally, brokering or intermediary organisations provide a range of products and services to help bridge the gap between research production and the application of research in practice and/or policy. The precise focus of these varies from organisation to organisation but in general, they address a number of impediments to research use in the following ways:

■ Provision of assistance in the identification of relevant material by providing searchable databases and links to other databases, providing summaries of research material and guidance and training on how to identify relevant research.

■ Provision of access to relevant material by providing reports that may be downloaded and links, including reference numbers, to other reports that may be purchased. Some of the organisations providing this access also provide library facilities and also provide guidelines and/or training on effective ways to obtain research literature.

■ Facilitation of the identification and understanding of key messages from research by providing guidance on critical appraisal, by providing summaries of key points from literature and by hosting learning events such as seminars and conferences.

■ Providing indicators of research reliability through identification of quality checks such as peer review processes and research quality rating systems.

■ Provision of supports such as manuals and training events on how to integrate evidence into practice and facilitating organisations to integrate evidence into specific practices and services.

All of the websites have at their core the provision of easy access to pertinent research material. This is achieved through a variety of different products and services mentioned above. A range of different media is also used including audio, videos, DVD, CDs, printable exercises and downloads. A number of websites also publish their own newsletters and some offer an opportunity for users to interact with one another through, for example, e-mail exchange, discussion boards and discussion forums. Collaboration is a key activity of many of these organisations.

 It is noted that the number of such organisations in Ireland and the range of products and services provided to help put research evidence to work is quite limited.

6   SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

6.1   Chapter introduction

This final chapter provides an overview of the project by summarising the main findings from both the literature and the consultation with Irish stakeholders. It then draws out the key implications from the project, and makes relevant recommendations.

6.2   Summary of Research Findings

6.2.1   Evidence Based, or Evidence Informed Practice

Evidenced based or evidence informed practice is best described as a philosophy and process designed to forward effective use of professional judgement. Typically, it involves the steps of formulating problems or questions, sourcing the best evidence to answer the question, critically appraising the evidence for validity, integrating the evidence with practice experience and specific contextual factors, taking action and then evaluating effectiveness. As understanding of the concept has evolved, the term 'evidence based practice' has, in many instances, been replaced by 'evidence informed practice' which is now commonly used in the literature to take account of the myriad of influences on policy and practice operating within an organisational and wider environmental context, including values and ideologies, organisational culture, resources and politics. However, both terms are used in this study to reflect their usage across the literature.

6.2.2   Extent and Nature of Research Use

We know from the literature that the term 'evidence' is open to wider interpretation than simply data about 'what works' and needs to incorporate professional insights and experience as well as service user views. We also know that there is not uncritical acceptance of the benefits of evidence based practice, particularly in the field of social care where, it is suggested that the dynamics involved in this type of work cannot always be separated from their often fluid and complex contexts.

Having acknowledged those realities, it has generally been accepted in Ireland as elsewhere that if outcomes for service users are to be optimised, then policy, protocols, procedures, assessment, intervention and evaluation must be informed by sound evidence about the impact of social and psychological factors on the lives of children and families. Some of the most significant dimensions of new public service management are transparency, accountability and measurement of effectiveness. The ability to ground decisions and innovations in a sound knowledge base is an underpinning principle of this process. Despite this, both international research findings and the outcomes of this

consultation project indicate that research utilisation in the social care sectors is limited, with only half of Irish stakeholders involved in this project claiming to access research as frequently as once a month, and half reporting that the work of their organisations was informed by research.

Research access also tends to be limited to government websites, generic searches and readily available print material, despite the prevalence of a significant number of sites and databases specifically dedicated to aspects of child welfare and presented in very user-friendly formats. Paradoxically, this under use of research contrasts with the majority view of stakeholders on the benefits of using evidence in designing and evaluating programmes as well as challenging and informing day-to-day practice. There is a clear implication that obstacles require addressing if the take-up of research use is to improve.

6.2.3 Barriers to Research Use

Both the international literature and the findings from consultations conducted as part of this project have highlighted a number of barriers to research use. As far as **individual** practitioners, managers and policy makers are concerned, the literature highlights the lack of available time, lack of or limited access to electronic and print materials, the need to apply immediate solutions rather than take the time to reflect, a lack of confidence in research findings, some uncertainty about ability to discern the quality of research and lack of critical appraisal skills.

Many of these barriers were echoed by Irish stakeholders in the survey findings, with the exception of access to research which was shown to be well provided for by organisations in respect of the internet and in some cases, reasonably well in terms of print literature. In fact some stakeholders expressed a sense of being overwhelmed by the sheer volume of evidence available, which itself was a barrier.

However, it appeared that the opportunities presented by access to research were themselves rendered inaccessible principally by lack of time as well as the other barriers. The literature also demonstrated a 'divide' between those who conduct research and those who deliver services, an issue that similarly featured in the discussions with Irish stakeholders.

Barriers in respect of the **nature of research** were also identified in the literature, which cited the lack of fit between research findings and the reality of practice, particularly where findings were aggregated and relevance was assumed. This was echoed in the consultations with Irish stakeholders who critiqued research that was impersonal, scientific and ignored the importance of context and relationship.

The literature also raised issues about the impediments created by stringent ethical requirements imposed on researchers and the gatekeeping practices of organisations that curtailed access to staff, service users and written records. The latter finding was also reflected in the views of stakeholders, who additionally displayed a level of resistance to involvement in the conduct of research in terms of providing data or completing questionnaires.

It is very evident from both the literature and the consultations that the way in which research is presented can also potentially create barriers to its use. The literature demonstrates a tension between academic priorities for peer reviewed and theoretical publications in high impact journals and the needs of service providers for research that is accessible in a simple and user-friendly format, a theme that was also reflected in the views of Irish stakeholders, who expressed irritation with material that was complex and contained excessive statistical data. The Irish stakeholders argued that unless research was readable and practical with implications clearly spelt out, it would not be useful.

Another obstacle raised by the stakeholders concerned the origins of research evidence, with several commenting on the dearth of Irish research and Irish databases and a resulting importation of material that may not be culturally appropriate.

The lack of a research culture in the workplace was the most commonly cited **organisational** barrier cited in the literature, by which was meant failure to invest in conducting or using research as well as prioritising the value of 'action' over 'reflection'. The views of Irish stakeholders also supported the notion that some organisations failed to value research and took a poor view of staff that devoted time to accessing and applying it.

Although most of the stakeholders considered that organisations facilitated research use by allowing them to try new ways of working, this type of support is of a passive rather than promotional nature. While three-quarters of the organisations represented had conducted or commissioned research over the previous two years, the survey data showed that only about half of the material produced was disseminated, with a greater chance of dissemination in situations where studies were jointly conducted between organisations and outside agencies.

6.2.4   Factors that Promote Research Use

When it came to consideration of factors that facilitate research use, there was further common ground between the literature and the outcomes of consultations with stakeholders, particularly in respect of **individual-practitioner** use, where personal motivation was seen to be a significant contributor. The importance of informal sharing of research findings was highlighted by the

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stakeholders, who also cited preparing conference papers and being required to write annual reports as incentives.

Facilitators relating to the **nature of research** that were demonstrated in both the literature and the consultations included accessibility, user-friendliness and practical relevance of research, provision of different formats such as CDs, websites, databases and audiotapes, strategic dissemination strategies and the availability of systematic reviews.

There was considerable emphasis in both the literature and the consultations on the responsibilities of **organisations** in the facilitation of research use, underlining the point that a linear relationship between research provision and research utilisation cannot be assumed, and asserting the need for mediation on the part of the organisations involved, to include both research providers and service providers.

Promoting organisational culture was defined in terms of various tasks such as improving access to research material, setting aside dedicated time for reading and discussion of research, giving a strategic lead by the nomination of certain staff as research champions, 'embedding' research by using it as a base for protocols, incentivising and rewarding research utilisation and adopting the habits of self-challenging and self-evaluation.

The creation of linkage and exchange mechanisms featured strongly in both the literature and the consultations, and stakeholders suggested the establishment of intra- and inter-organisational forums to provide opportunities to share and debate different topics. The view was also strongly expressed that the appointment of a research officer within an organisation significantly shifted the culture towards a stronger research focus, as did establishment of a research resource such as that operated by Barnardos.

The commissioning and conduct of research was also considered to be a facilitator to its ultimate use. Having expressed some resistance to co-operation with researchers in terms of providing data, stakeholders offered the view that improved feedback mechanisms and communication channels between researchers and those being researched would foster a sense of ownership of the outcomes and improve participation.

6.2.5 Models of Research Use, Mechanisms to Promote Research Use and Examples of Collaboration

Various **frameworks** for understanding the application of research to practice have been put forward in the literature. The Research Unit for Research Utilisation has conceptualised three models as

follows: the practitioner-researcher model, where both the initiative and responsibility for accessing and applying research to practice lies with the individual practitioner; the embedded research model, whereby research use is consistent but largely passive on the part of staff by its integration into policies, procedures and protocols; the organisational excellence model, whereby a strong culture exists that promotes and values the conduct, dissemination and implementation of research based on a number of elements including collaboration between staff, research commissioners and research producers.

The Cultures in Context model proposed by Holzer *et al* (2008) illustrates the fallacy of assuming a linear relationship between research provision and research utilisation by showing how organisational culture, pragmatics, attitudes and beliefs, sources and nature of information and linkage and exchange mechanisms all impact on the value placed on research and the likelihood of its utilisation. Similar dynamics were demonstrated from other studies.

Knowledge brokering organisations are those whose principal purpose is to promote research dissemination and utilisation, and they include some organisations best known for their internet sites (sometimes known as 'clearing houses') that provide access to research findings which are sometimes restricted to membership and sometimes freely available. Twenty of these organisations were reviewed for this project, and were classified in terms of the range of activities in which they engaged. These include building networks, providing various linkage and exchange mechanisms including interpersonal contact, blogs and helpdesks, access to relevant research, quality assurance, newsletters and practice tools, and learning events.

Internationally, brokering or intermediary organisations provide a range of products and services to help bridge the gap between research production and the application of research in practice and/or policy. The precise focus of these varies from organisation to organisation but in general, they overcome a number of impediments to research use by:

- Assisting in the identification of relevant material by providing searchable databases and links to other databases, providing summaries of research material and providing guidance and training on how to identify relevant research.

- Supporting access to relevant material such as downloadable reports and links, including reference numbers, to other reports which may be purchased. Many organisations providing this access also provide library facilities and some also provide guidelines and/or training on effective ways to obtain research literature.

- Facilitating the identification and understanding of key messages from research by providing guidance on critical appraisal, by providing summaries of key points from literature and by hosting learning events such as seminars and conferences.

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- Providing indicators of research reliability through identification of quality checks such as peer review processes and research quality rating systems.

- Supporting evidence integration through manuals, training events and facilitating organisations to integrate evidence into specific practices and services.

Collaboration is a key activity of many of these organisations, and extends along a continuum from selective and informal relationships between public servants and experts in various fields, to intra-organisational partnerships and co-location of practitioners and researchers as well as formal relationships between service provider organisations and research centres.

6.3   Implications for the Promotion of Research Use

6.3.1 Overview

Having considered the outcomes from both the literature review and the consultations with stakeholders, this section draws out their major implications in terms of future promotion of research use in the children's services.

While both the literature and the outcomes from consultations reflect a genuine interest and positive intention to apply research evidence to practice, the barriers to research utilisation that have been cited, together with the factors that have been identified as promoting research, underscore the fact that a linear relationship between the provision of research material and its use cannot be assumed, and that a systemic approach will need to be taken if the aspiration to achieve a higher degree of evidence informed practice is to be taken seriously.

6.3.2 Implications for Organisations

While the factors affecting individual research use and those relating to organisations were treated as different entities in this report, it can be argued that they are difficult to separate because research use by individuals, even those with high levels of enthusiasm, is to some extent dependent on the support provided by their employing organisations.

The assignment of dedicated time, access to research through internet and print literature and the provision of training in critical reasoning and research skills to staff would be beneficial. However, it is clear that an organisational culture that values research and recognises the necessity to integrate evidence into policies and protocols as well as supervision processes will be best placed to capitalise on and further encourage the motivation and interest of individual staff members.

Many organisations need to broaden their interest in research beyond evaluations of the economic effectiveness of services to include knowledge about the nature of the issues affecting their service users and the components of good practice. The understandable tendency for service providers to prioritise immediate solutions and actions over more self-evaluative and reflective activities implies that changing culture will be a challenging process for some.

The resistance to participation in research that was expressed by some stakeholders is undoubtedly related to under utilisation of evidence in practice, again illustrating an undervaluing of research at an organisational level. The finding from focus group discussions that the existence of research posts in organisations is a facilitator could mean either that the position itself has a positive effect on staff interest, or that the fact of appointing a researcher reflects an already existing research culture, but overall it appears to be a beneficial factor.

However, the finding of a low level of dissemination in many of the organisations that have invested in commissioning and conducting research implies a lack of thorough planning and underlines the necessity to develop research strategies. The need for greater levels of collaboration is implied, a point that will be further developed.

6.3.3 Implications for Research Funders and Commissioners

While some organisations directly commission research relevant to the services they provide, funding comes from a variety of sources, including government organisations, non-governmental organisations and philanthropists. It is interesting that despite a reasonable investment in child and youth research over recent years in Ireland, stakeholders claimed that there was a dearth of Irish research and a lack of databases from which to access that which does exist.

There is a clear need for a national strategy on research in the child welfare sector that provides a roadmap for future investment in the area, both identifying the gaps that need to be addressed and identifying and disseminating existing material. This would prevent overlap and also promote the dissemination of useful local and national studies that may otherwise remain unpublicised. While local studies may be considered unrepresentative in isolation, the accumulation of similar pieces of work conducted within common contexts and using similar methodologies may assume a reasonable weight and robustness.

The development of a template for the commissioning of research that incorporates ongoing collaboration between those commissioning the research, the research providers and the potential research users as well as strategies for dissemination in different formats aimed at different target audiences would be extremely beneficial.

6.3.4 Implications for Research Providers

An important point arising from both the literature and the consultations is the significance attributed to user-friendliness of the research material. Much research is carried out in universities and colleges whose standards and reward systems demand publications at an advanced level of theoretical reasoning in what are described as 'high impact' journals. However, service providers work in environments in which research evidence is only useful if it is clearly and succinctly presented in terms of basic facts and implications.

This issue has been successfully addressed by some of the internationally based knowledge brokering organisations that were reviewed in this report, but it has not been given as much consideration in Ireland. It requires a joint approach between the universities and other institutes of higher education as well as researchers and it highlights the need to produce research findings in different formats as a matter of course. The findings from this project, which signify a strong interest in interpersonal methods of dissemination, suggest that researchers should be prepared to include workshops, seminars and other interactive forums as part of their contractual obligation when receiving funding.

6.3.5 Implications for Partnership

Throughout the project, the majority of issues emanating from the literature and the consultations have referred either directly or obliquely to the need for stronger partnerships and collaboration within and between the different constituencies. The most obvious ones recommended are those between organisations and research centres or universities, drawing from the model of 'organisational excellence' proposed by Nutley *et al* (2007).

Collaboration within organisations is also recommended, where personnel involved principally in research collaborate with those in service delivery to ensure that the research conducted is relevant and ultimately disseminated in a manner that maximises its potential for take-up. As earlier sections have shown, collaboration between research commissioning bodies, research users and research providers is vital to ensure efficiency in the entire continuum of commissioning and conducting research and ultimately integrating research evidence into policy and practice.

6.4   Conclusions

While this study is subject to some limitations, its findings are considered sufficiently robust to support three overall conclusions:

1. **A simple linear relationship should not be assumed to exist between the production of research evidence and its use in practice.** This is due in part to the number of barriers to research use identified in this study, but also to the range of different factors that impact on practice in children's services.

2. **The use of research evidence in practice could be promoted by each of the main stakeholders involved, i.e. research commissioners, service provider organisations and research providers. Attention could be paid to the:**

    a. type and nature of research commissioned and undertaken;

    b. approach and methods used to undertake research;

    c. way in which research evidence is disseminated, communicated and integrated into practice;

    d. degree of collaboration and partnership developed between the key stakeholders.

3. **Strategies are required at national level to identify and address gaps in research and to facilitate the dissemination and integration of both Irish and international research which is relevant to children's services.**

    Throughout the project, the majority of issues emanating from the literature and the consultations have referred either directly or obliquely to the above issues.

6.5   Recommendations

This Section presents the recommendations emerging from the study. Recommendations 1 to 3 relate to actions that might be undertaken by each of the key stakeholders, i.e. research commissioners, service provider organisations and research providers. Recommendation 4 is relevant to all stakeholders but would require particular support from central government to drive its implementation.

1. Recommended Actions for Research Commissioners

General Recommendation for Research Commissioners

In order to promote more extensive use of research evidence, research commissioners should:

■ **Ensure that studies are relevant, applicable and capable of filling an existing gap in relation to practice and/or policy.**

■ **Require that clear identification of implications for practice is an integral element of completed work.**

■ **Ensure that plans for dissemination, using a range of methods, form part of the research process.**

■ **Promote the involvement of key stakeholders in the commissioning and conduct of research as this would enhance the potential for ownership and integration of the findings into practice and policy.**

Specific Recommended Actions for Research Commissioners

In order to contribute to the integration of research evidence into practice, research commissioners, should:

a. Ensure that the outcome of research is relevant, applicable and fulfils an existing gap in relation to practice and/or policy. This can be achieved by including the views of researchers, service providers and service user groups when commissioning and undertaking research.

b. Require researchers to provide dissemination strategies, including presentations and optional formats, such as summaries, briefing papers, CDs and podcasts for accessing research. Commissioners could factor in the cost of these into their budgets and identify them in invitations to tender and contracts.

c. Operate a partnership approach that keeps all relevant stakeholders involved from the beginning to the end of each research study and ensure the communication of information between them in the interim.

d. Develop or contribute to an online database or a combination of online databases of Irish research that would provide user-friendly, succinct and easily accessible overviews and briefings.

e. Enhance confidence in the quality of the research produced by building in benchmarks such as peer reviewing.

f. Commission overviews, systematic reviews and research summaries on topics identified as having current relevance.

2. Recommended Actions for Service Provider Organisations

General Recommendation for Service Provider Organisations

Service provider organisations, while continuing to value professional experience and expertise, should promote an organisational culture that signifies the value of research as a source of innovation, evaluation and challenge to existing policies and practices.

Specific Recommended Actions for Service Provider Organisations

In order to promote evidence informed practice, organisations that provide services, should:

a. Provide access to research articles and reports via the Internet and print literature such as books, journals and reports.

b. Appoint, where practicable and relevant, staff who are either full-time researchers, or whose job includes research, who will commission, conduct and disseminate research.

c. Establish strong links with research centres that can help put research evidence to work.

d. Implement, in line with the previous recommendation, ongoing programmes dedicated to integrating research into practice, which will allocate specific time, and involve a number of dissemination and training strategies including training in critical thinking, appraisal, self-reflection and evaluation skills.

e. Involve practitioners in the conduct of research, in collaboration with research staff within or outside organisations.

f. Support staff (champions) who display particular interest and motivation in the use of research evidence by recognising and/or rewarding effort and/or giving them particular responsibility for the promotion of research use.

g. Provide feedback to staff regarding how any statistical or other data that they provide will be utilised and where feasible and appropriate feedback the overall results from the analysis of aggregated information.

h. Promote learning by facilitating staff attendance at seminars and supporting further study that includes a research component.

i. Promote better collaboration within organisations between personnel involved in research and those in service delivery to ensure research maximises its potential for take-up.

j. Encourage staff within the organisations to avail of the opportunities presented to them by:

- accessing research that is available;

- drawing on research findings when conducting assessments, writing reports, devising intervention plans, evaluating programmes, tendering for funding, making organisational policy decisions and supervising staff;

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- participating in the conduct of research as either an informant or a researcher, thereby adding to the knowledge base of Irish research;

- availing of opportunities to attend or present research at seminars, conferences or other learning events.

3: Recommended Actions for Research Providers

General Recommendation for Research Providers

In order to promote evidence informed practice, research providers should endeavour to produce research evidence that is accessible and has practical relevance and applicability. They should employ diverse methods of research dissemination, and work collaboratively with staff and organisations to assist in the integration of research evidence into practice and policy.

Specific Recommended Actions for Research Providers

To enable the implementation of the research evidence research providers should aim to:

a. Collaborate with all relevant stakeholders from the beginning to the end of the research process.

b. Provide succinct reports that are well written, clearly presented and well-structured and which draw out implications for practice and make relevant recommendations.

c. Use language that is jargon free and styles of presentation that are engaging.

d. Provide an optional range of research *outputs* targeted at different audiences, including presentations, reports, summaries and briefing papers.

e. Provide an optional range of *formats*, such as electronic and print material, podcasts and audio files.

f. Commit to ongoing participation in interactive dissemination forums, seminars and workshops after research has been completed.

g. Work with service provider organisations to negotiate the most effective way of disseminating research to their staff once it is completed.

h. Negotiate with higher education institutions to place a more enhanced value on applied as opposed to highly theoretical research.

4. Recommendation for the Establishment of a Knowledge Brokering Service

The formal establishment of a knowledge brokering *service*, either through a designated organisation or through a commitment shared by several organisations is recommended. Such a service would:

- Identify and advise on how to address gaps in existing Irish research relevant to practice in children's services.

- Act as a conduit for the dissemination of research, both Irish and international, in a user-friendly format that clarifies and specifies implications for practice in children's services, and help to integrate research evidence into practice.

Ideally, responsibility for the establishment of this *service* would be taken by central government as an indication of the importance of evidence informed practice.

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B   PREW – QUESTIONNAIRE

The Children Acts Advisory Board have commissioned Trinity College Dublin to work in partnership with them to develop initiatives, together with relevant organisations, aimed at making research evidence more accessible to practitioners, managers and policy managers in the Health & Welfare, Youth Justice, Community and Voluntary and Education sectors.

As a preliminary exercise, we are seeking to establish the current application of research evidence in the four sectors, including barriers and enablers to its utilisation. We also want to get your views on what type of research evidence you would find useful in your work, and your preferences with regard to accessing it.

We are gathering data on this by two methods at this Network Seminar; a survey and focus groups. The attached questionnaire will provide us with some basic information and the focus groups to be held on the Day 2 of the seminar will provide a forum for a broader discussion on the issues.

We would be grateful if you would complete the questionnaire as comprehensively as possible, it should only take approximately fifteen minutes. No identifying details are requested, therefore all information gathered will be anonymous.

Terminology used in this Questionnaire

Research

The term research, as used in this questionnaire, refers to systematic investigation or studies to answer questions and explore phenomena. It can take the form of surveys, qualitative studies, programme evaluations or literature reviews.

Research Evidence

The term research evidence as used in this questionnaire refers to findings from such investigations or studies.

Accessing Research Evidence

The term accessing research evidence, as used in this questionnaire, refers to having and taking the opportunity to look up and read research evidence through sources such as the internet, library or journal subscriptions. It also refers to attending lectures, seminars or training.

Applying Research Evidence

The term applying research evidence, as used in this questionnaire, refers to using research to inform your work, for example writing a report, preparing a case plan, creating or changing policies or protocols or making a case for resources.

Section 1 Demographic Questions

1.1 Gender (Please tick one)

Male ☐ Female ☐

1.2 What is your age? (Please tick one)

18 – 24 years ☐
25 – 34 years ☐
35 – 44 years ☐
45 – 54 years ☐
55 – 64 years ☐
65+ years ☐

1.3 What is the name of your employing organisation? (Please specify)

_____

1.4 Within which of the following sectors do you work? (Please tick one)

Health & Welfare ☐ Education ☐

Justice ☐ Community & Voluntary ☐

1.5 Please provide your title and describe your role in your organisation.

_____

_____

1.6 How many years have you been working in your organisation? (Please tick one)

Less than 6 months

6 – 12 months

1 – 2 years

2 – 5 years

5 – 10 years

More than 10 years

1.8 What level do you work at within your organisation? (Please tick one)

Policy Level

Senior Management

Front Line Management and or Practitioner

1.7 How many years have you been working in your organisation? (Please tick one)

Less than 6 months

6 – 12 months

1 – 2 years

2 – 5 years

5 – 10 years

More than 10 years

Section 2 Accessing Research Evidence

2.1 Rate the extent to which you access research evidence within your current role? (Please tick one)

Daily	
About weekly	
About monthly	
About every two months	
About every six months	
About once a year	
Less often than once a year	
Never	

2.2 When did you last access work related research? (Please tick one)

Less than a week ago	
A week to one month ago	
One to six months ago	
Six months to a year ago	
More than a year ago	

2.3 How do you access research evidence? (Tick as many as apply)

Journal article	
Book	
Report	
Seminar	
Internet site	

Other, please specify _____

2.4 What is your most preferred method of accessing research evidence within your organisation? (Rate in order of preference, with 1 being the most preferred)

1. Internet access

2. Access to print research literature, books, journal articles

3. Attendance at learning events (for example, conferences, seminars, learning events)

4. Involvement in further study

2.4.1 Internet Access

2.4.1a Do you have access to a computer within your organisation? (Please tick one)

Yes

No

2.4.1b If yes, is your access exclusive or shared? (Please tick one)

Exclusive

Shared

2.4.1c Is your access to the internet restricted or unrestricted? (Please tick one)

Restricted

Unrestricted

2.4.1d If restricted, is it: (Please tick one)

Intranet only, no external access

Limited external access

2.4.1e If you use the internet to access research, what type of sites would you normally use? (Tick where applicable)

Key word search on Google or other search engine	☐
Specific database (for example childrensdatabase.ie)	☐
Specific research site or clearinghouse (for example, rip.org.uk)	☐
Specific policy site (for example omc.gov.ie, cpa.ie, ncb.org.uk)	☐
E publications website for practitioners (for example Practice Links)	☐
Journals on line (for example sagepub.com)	☐
Other, please specify	

_____

2.4.2 Access to Print Research Literature

2.4.2a What print research literature is available in your organisation? (Tick where applicable)

None	☐
Small library	☐
Extensive library	☐
Journal subscriptions	☐
Newsletters / publications through membership of network or advocacy group	☐
Internally circulated publications	☐

2.4.3 Attendance at Learning Events, for example Conferences, Seminars, Network Events

2.4.3 a How often do you attend learning events? (Please tick one)

Monthly or more frequently	☐
Every two months	☐
Once a quarter	☐

Every six months	☐
Once a year	☐
Less often than once a year	☐
Never	☐

2.4.4 Further Study

2.4.4a Are you currently involved in any further study that involves carrying out research? (Please tick one)

Yes ☐   No ☐

2.5a Does your organisation facilitate access to research evidence? (Please tick one)

Yes ☐   No ☐

2.5b If yes, how is access to research facilitated? (Tick as many as apply)

By providing internet access	☐
By encouraging evidence based practice	☐
By promoting attendance at seminars / training	☐
By commissioning research	☐
By participating in research	☐
By having research literature readily available (for example library, journal subscriptions)	☐

Other, please specify _____

2.6 What barriers, if any, limit your ability to access research evidence within your organisation? (Please tick where applicable)

No internet access

Lack of time to read and assimilate research

Limited access to the literature

Lack of relevant research

No time to attend learning events

No funding available to attend learning events

Section 3 Applying Research Evidence

3.1 To what extent, do you think, is work in your organisation informed by research evidence? (Please tick one)

Always	
Often	
Sometimes	
Seldom	
Never	

3.2 To what extent do you apply research evidence in your current role? (Please tick one)

Always	
Often	
Sometimes	
Seldom	
Never	

3.3 In your opinion how helpful is research evidence in providing an evidence base for your work? (Please tick one)

Very helpful	
Helpful	
Somewhat helpful	
Occasionally helpful	
Not helpful at all	

3.4 In your opinion how helpful is research evidence as a source of motivation and new ideas? (Please tick one)

Very helpful	
Helpful	
Somewhat helpful	
Occasionally helpful	
Not helpful at all	

3.5 At what point in your work would you refer to research evidence? (Please tick yes, no or not applicable for each item)

	Yes	No	N/A
When making referrals			
When consulting with other professionals			
When carrying out assessments			
When writing reports			
When formulating case plans			
When designing programmes			
When carrying out direct work with children / young people			
When talking to service users			
When reviewing work			
When carrying out or participating in supervision			
When preparing presentations			
When carrying out evaluations			
When commissioning further research or evaluations			
When requesting resources			
When developing policies, procedures or protocols			

3.6a Does your organisation facilitate staff to apply research evidence to their work? (Please tick one)

Yes ☐   No ☐

3.6b If yes, how do they facilitate this? (Tick as many as apply)

By implementing research recommendations in organisational policies ☐

By allowing staff to try new ways of working that are informed by research ☐

By rewarding innovation ☐

By encouraging staff to disseminate their own research ☐

By having a research focus in supervision or review of work ☐

By building in the principle of evidence based practice into the ethos of the organisation (for example including it in the mission statement) ☐

Other, please specify _____

3.7a Has your organisation carried out research within the last two years? (Tick where applicable)

Yes, internally carried out by own staff ☐

Yes, contracted out to research provider ☐

No ☐

3.7b If yes, please name and describe the most recent research undertaken

_____

_____

3.7c How were the findings from this research disseminated? (Tick where applicable)

Seminar ☐

Print Publication ☐

Electronic Publication ☐

Not disseminated at all ☐

3.8 What barriers, if any, limit your ability to apply research evidence to your work? (Tick where applicable)

Lack of authority to make changes to your work/practice based on research findings ☐

Resistance to change within the organisation ☐

Lack of confidence in research findings ☐

Lack of confidence in researchers and academics ☐

Lack of knowledge or skills about to apply research evidence (for example statistics) ☐

Presentation of research evidence too complex ☐

Presentation of research evidence not detailed enough ☐

Research on desired topic unavailable ☐

Organisation driven by a political rather than a research agenda ☐

Not considering research evidence as relevant to current role ☐

Need for immediate solutions and can't wait for research ☐

Applying research findings involves too much risk and responsibility ☐

Other, please specify
_____

3.9 At which level in your organisation is research evidence most likely to be used? (Please tick one)

Policy level   ☐

Senior Management   ☐

Front line Management and or Practitioner   ☐

Section 4 Research Resources

4.1 In accessing and applying research, what topics are of most interest to you? Please specify (For example, domestic violence, drug misuse)

_____

_____

4.2 In accessing and applying research, which of the following types of research evidence would you find useful? (Tick as many as appropriate)

Research on practice (for example assessment, skill development)   ☐

Sociological / theoretical research (for example, studies on exclusion, racism, gender)   ☐

Programme and service evaluations (what works)   ☐

Epidemiological / demographic studies (prevalence and incidence of particular factors)   ☐

Impact studies (for example, the effect of divorce/separation on children)   ☐

4.3 What way would you like to have research resources available to you? (Order in terms of your preference)

Printed research literature (for example, books, articles, research reports, briefing papers)

Interpersonal (for example seminars, network meetings, telephone helpdesk)

Electronic (for example dedicated research sites, e-lists, alerts and updates, interactive email, links to relevant databases)

4.4a If a web based research resource, relevant to your work, was developed, would you use it? (Please tick one)

Yes   No

4.4b If no, why not? (Please specify)

_____

_____

4.5 What would you like to see such a research resource provide? (Rate in order of usefulness with 1 being the most useful)

1. Briefing papers on specific topics (overall review of research on a specific topic usually takes the form of 10-15 pages, plain English, bullet points)

2. Fact sheets (one page bullet pointed summary on a specific topic)

3. Research summaries (individual summaries on a particular topic usually found in research reports, journal articles)

4. Practice frameworks / models (for example assessment frameworks, treatment models for working with substance misuse or behaviour modification programmes)

5. Subject databases (for example multidisciplinary collaboration)

6. Information on policies and procedures

7. Audio and visual feeds and streams

8. Links to other key websites

9. Online interactive forum

10. E-Newsletter

11. E-alerts about journal articles, upcoming events, policy initiatives

12. Service directories

13. Blog

14. Telephone helpdesk

C   TOPIC GUIDE USED FOR FOCUS GROUPS

You kindly filled out questionnaires for us yesterday, and we are now following up with a discussion on some of the issues. What we would like from this discussion is to hear your views on how best to make research findings more accessible in your sectors in a way that you might utilise them more.

What the discussion should reveal:

- What do people understand by Evidence Based Practice?
- Do people find research evidence relevant to their work?
- For what purpose do they use it?
- What would encourage them to use it more?
- What type of research would they find most useful?
- In what format?
- What are their suggestions about methods of accessing research

QUESTIONS

What are the primary influences on decision making in your work?

Prompts

Needs of service users?

Legislation /guidelines?

Resources?

Research evidence?

Experience?

Organisational culture?

Would you like to see research play a strong(er) role as a driver of practice?

Prompt

What does 'Evidence Based Practice' mean to you? Is it one of your goals?

Do you regard the research evidence that is currently available as relevant to your work? How?

Prompts:

Useful in individual cases – informing, explaining, problem solving, promoting best practice?

Helps in evaluating programmes?

Source of motivation and new ideas?

Informs policy making

Not relevant because too complex?

Too abstract?

Driven by producers of research rather than identified needs?

Don't really trust research?

Hard to judge the quality of research? Do people think that they can evaluate the validity and reliability of research?

What prevents you from using research?

Prompts

Lack of time,

Lack of access to research materials

Lack of skill to evaluate research (including statistics or technical language)

Mistrust of findings

When you do use research, what do you mainly use it for?

Prompts

Individuals access it independently to inform practice at the frontline

Policies, procedures, standards are informed by research evidence

To justify expenditure on a service or programme

Tools (risk assessment for example, or monitoring of progress) are research based Evaluations are commissioned or carried out on services

Training is informed by research evidence

Action research is employed when establishing new programmes or services

Relationships exist with researchers and research centres

What would promote use of research evidence in your organisation?

Prompts

Specific strategy for putting research evidence into practice? Expand?

A requirement to use it – say in performance indicators, or appraisals

Encouragement at individual levels

Research forums

Creation of research culture – expand on that, what precisely would that mean?

Active dissemination within the organisation e.g. articles etc. circulated internally, regular seminars, what else?

Making sure that training is informed by research evidence?

Making relationships with research centres/universities?

What would encourage you as individuals?

Prompts

Access to computer/internet

Training in doing searches /critical appraisal of research?

Dedicated time

Encouragement from supervisors/line managers or 'champions'

Doing further study?

What type of research evidence would you find most useful?

Prompts

Studies on specific topics e.g. drug use, self harm, attachment, prevalence and incidence of different factors

Evaluations which show 'what works' e.g. interventions, programmes, policies, procedures, tools and instruments that are in use in other countries

What would be your preferred format?

Prompts

Journal articles

Reports and research overviews

Summaries/key messages

Put into plain English?

Clear practice implications?

Any others?

What method of accessing research findings would you find most useful?

Prompts

Journal subscriptions

Site-based library

Externally based lending library

Regular newsletters with summaries of recent journal articles

Internet based services (e.g. RIP) with a range of resources

Telephone help desk or other interactive processes such as partnerships with research organisations that would prompt you towards using it?

Anything else?

D STATISTICAL DATA:
TABLES ILLUSTRATING SURVEY DATA

Data from the survey undertaken with staff from the different child welfare sectors is discussed in Chapter 3 of the report. This appendix presents the data in tabular unweighted form. For convenience percentages are rounded to the nearest decimal point, as a result the percentage breakdown for each question may not add to 100.

In obtaining the views of those working in children's services focus groups were a key means of the stakeholder consultation process. In addition, written questionnaires were completed by most of the participants in a supervised session as part of the network seminars. The quantitative findings from the questionnaires published in this report reflect the views of those attending the seminars only and should not be interpreted as being statistically representative of Irish children's services in general. The sample of organisations and professionals at the seminars is reflective of children's services. However, the employment data, by sub-sector, that would be necessary to weight the sample and extrapolate the findings to the population as a whole to produce statistically representative figures for the population, are not available. The quantitative findings provide a general picture of the views of the 150 plus people who participated in the consultation process. Figures and percentages shown for individual sectors (e.g. health and welfare, education etc.) should be interpreted as capturing the views of workers from these sectors who attended the network seminars and should not be interpreted as being statistically representative of the views of 'their sectors' as a whole.

Table 1: Organisations Consulted during Focus Groups and by Questionnaires.

Organisations		Positions
OMCYA	Irish Society of Prevention of Cruelty to Children	Social workers, psychologists, service managers,
HSE	Foróige	Guidance counsellor, childcare managers,
Residential Care Centres	Le Chéile Mentoring Project	Managers – children and family services, alternative care managers
Irish Youth Justice Service	Family Resource Centre	community social care leader,
Probation Service	IPPA, the early childhood organisation	Care managers from schools and residential services
Young Persons Probation	Youth training services	Adult education officers (VEC)
Garda Youth Diversion Programme	Local counselling services for young people	County childcare committee managers
National Juvenile Office	Local projects working with young drug users	Area Partnership childcare coordinators
School Completion Programme, DES	Local/regional youth services	Youthreach coordinators
National Educational Psychological Service	Representatives of Traveller organisations and projects	Youth advocates
National Educational Welfare Board	Ballymun YAP	Juvenile liaison officers
VECs	Partnerships/local employment services	Garda Youth Diversion project workers
Barnardos	A Range of Community & Voluntary Organisations	Others

Figure 1: Age of Respondents – Unweighted Data (n=155)

Legend: ☐ 18 to 24 yrs. ☒ 25 to 34 yrs. ☐ 35 to 44 yrs. ■ 45 to 54 yrs. ☐ 55 to 64 yrs.
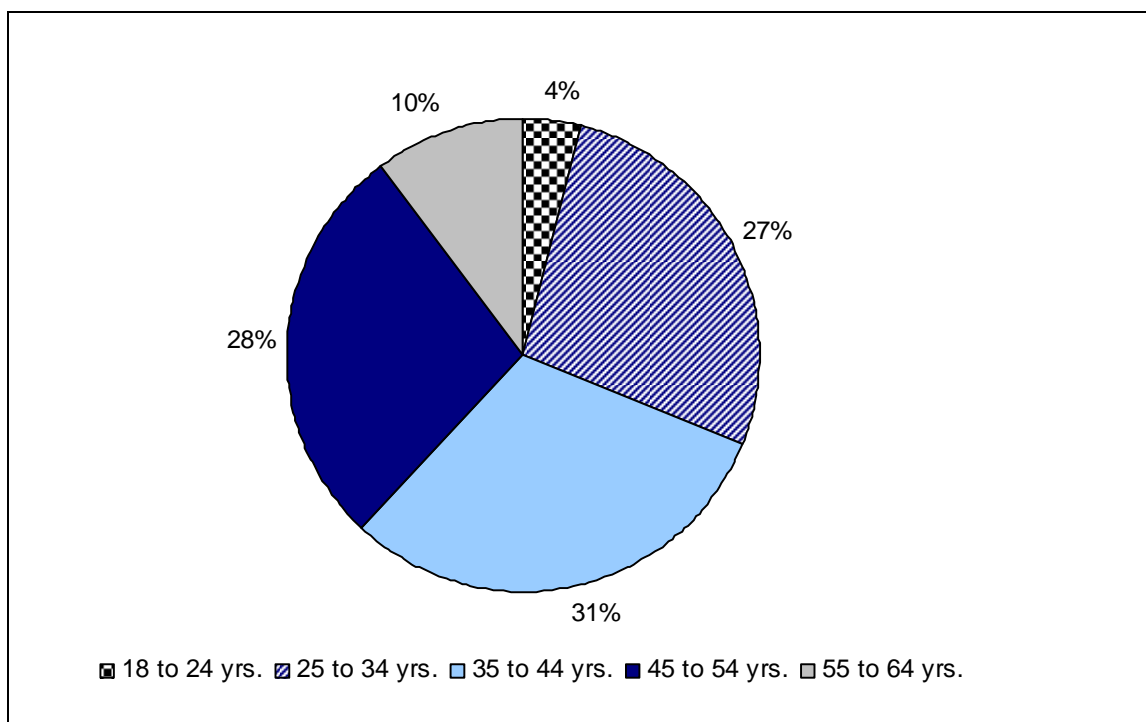
Figure 2: Sector in which Respondents Reported Working – Unweighted Data (n=143, 12 cases missing)

Legend: ☐ Health & Welfare ☒ Education ☐ Justice ■ Community & Voluntary
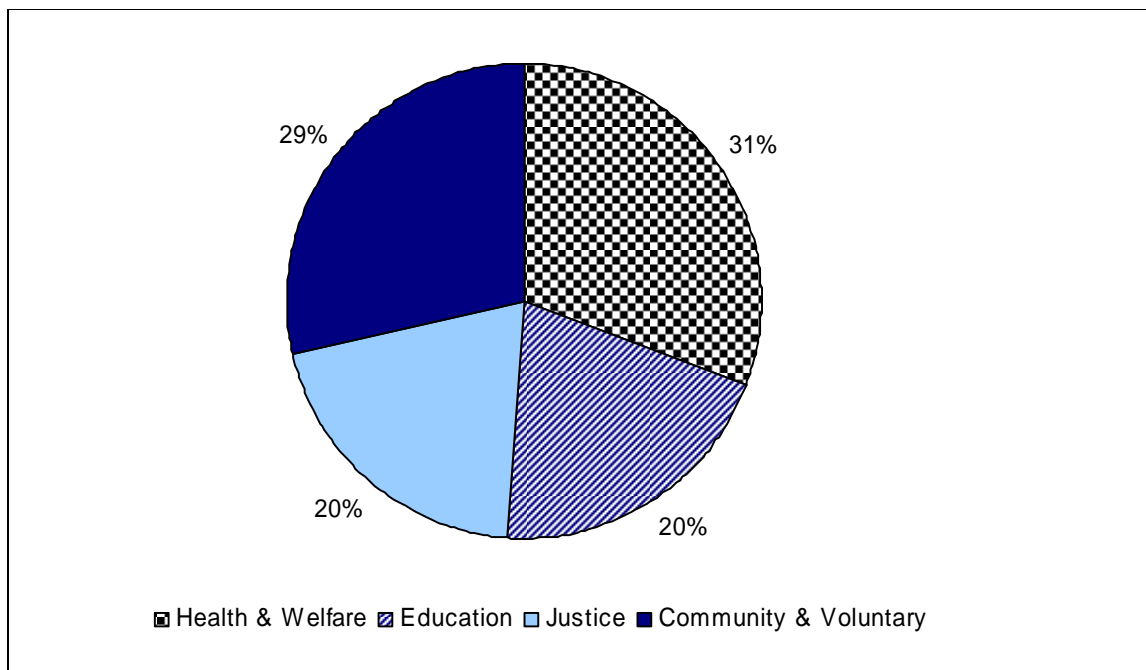
Table 2: Length of Time in Current Organisation – Unweighted Data (n=155)

	Frequency	%
6 months or less	7	5
6 to 12 months	11	7
1 to 2 years	12	8
2 to 5 years	31	20
5 to 10 years	48	31
More than 10 years	46	30
Total	**155**	**100**

Table 3: Frequency with which Respondents reported Accessing Research – Unweighted Data (n=152, 3 cases missing)

	Frequency	%
Daily	10	7
About weekly	32	21
About monthly	49	32
About every two months	25	16
About every six months	23	15
About once a year	5	3
Less often than once a year	6	4
Never	2	1
Total	**152**	**100**

**Table 4: Frequency with which Respondents Last Accessed Work Related Research –
Unweighted Data (n=154, 1 case missing)**

	Frequency	**%**
Less than a week ago	62	40
A week to one month ago	49	32
One to six months ago	32	21
Six months to a year ago	9	6
More than a year ago	2	1
Total	**154**	**100**

Figure 3: Ways in which Respondents Access Research Evidence – Unweighted Data (n=155)
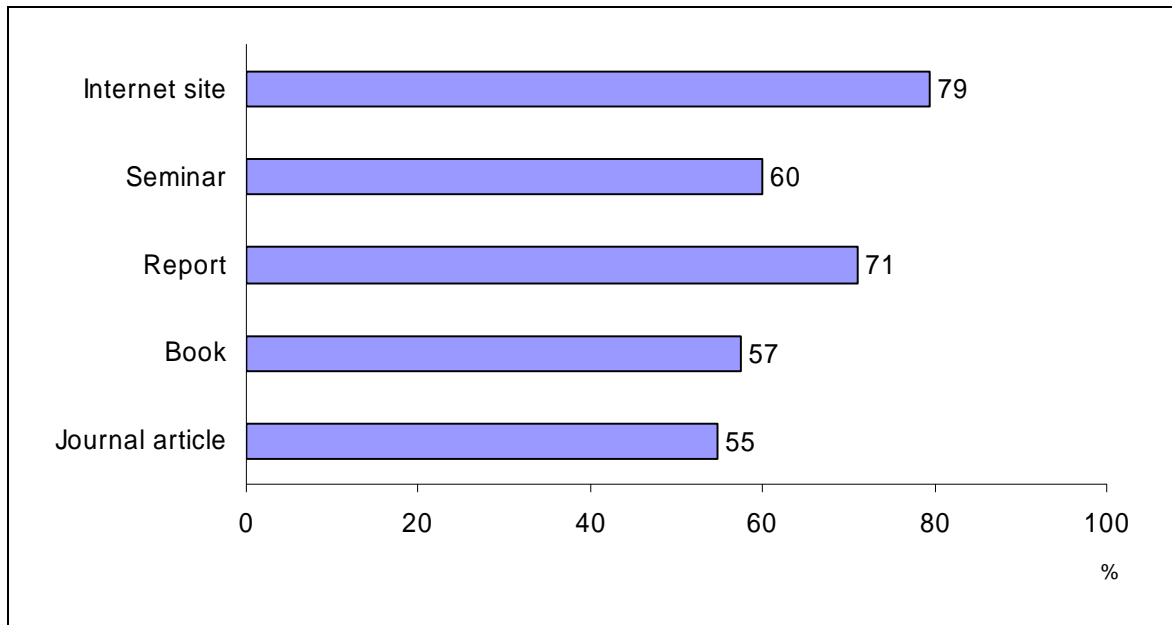
Figure 4: Participants' Preferred Method for Accessing Research Evidence within their Organisation – Unweighted Data
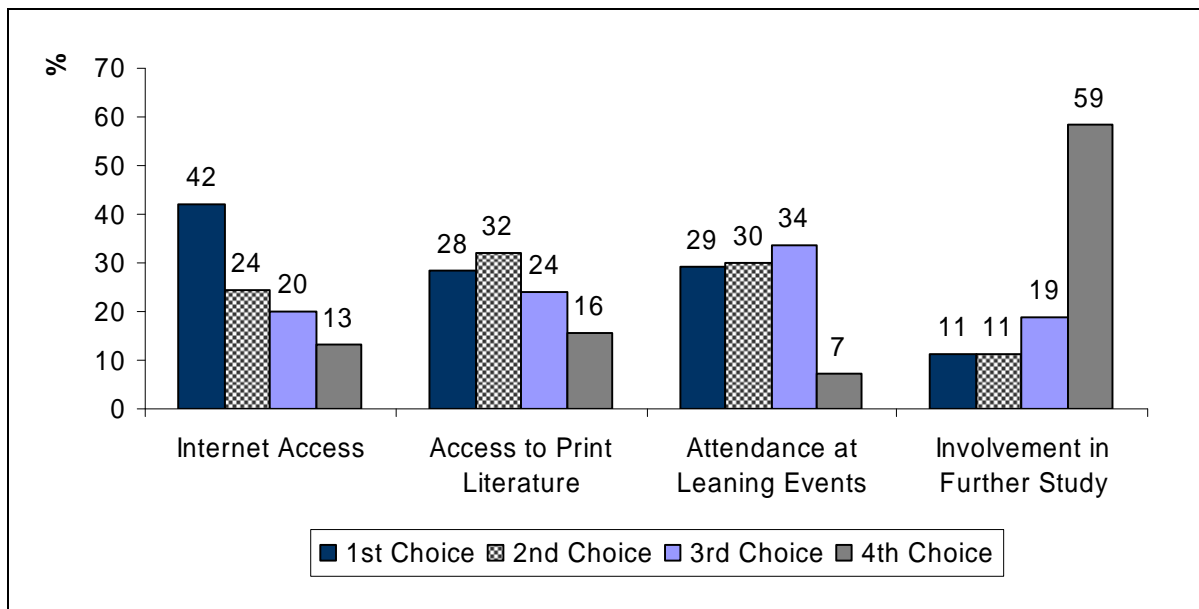
Figure 5: Type of Internet Site Normally Accessed by Respondents – Unweighted Data
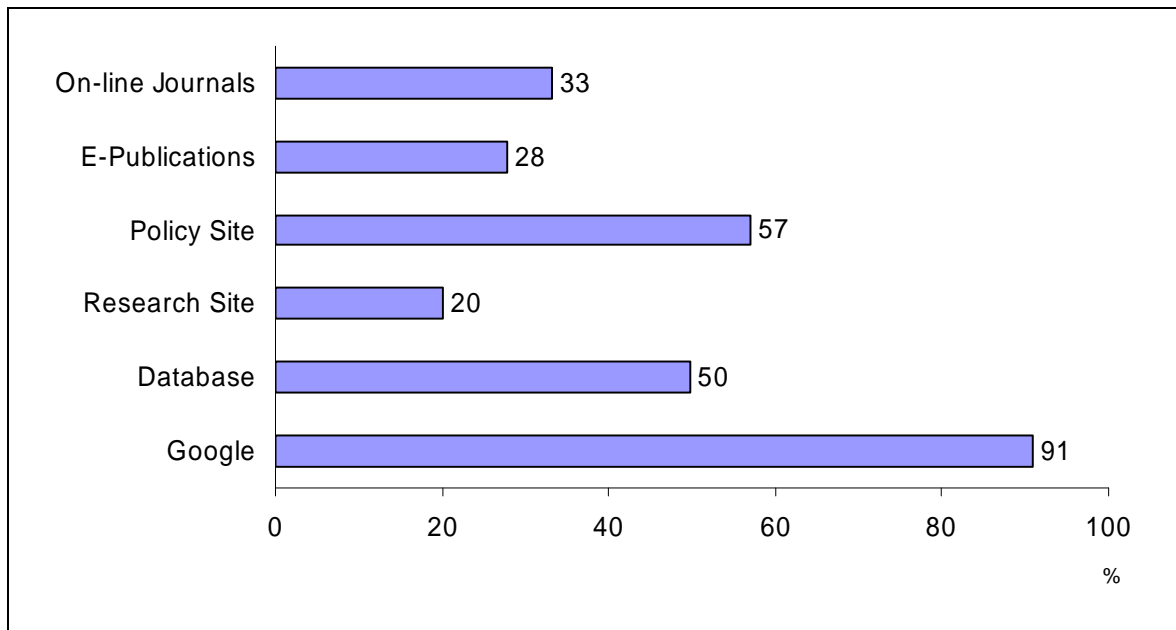
Figure 6: Type of Print Literature Available to Respondents in their Organisation – Unweighted Data
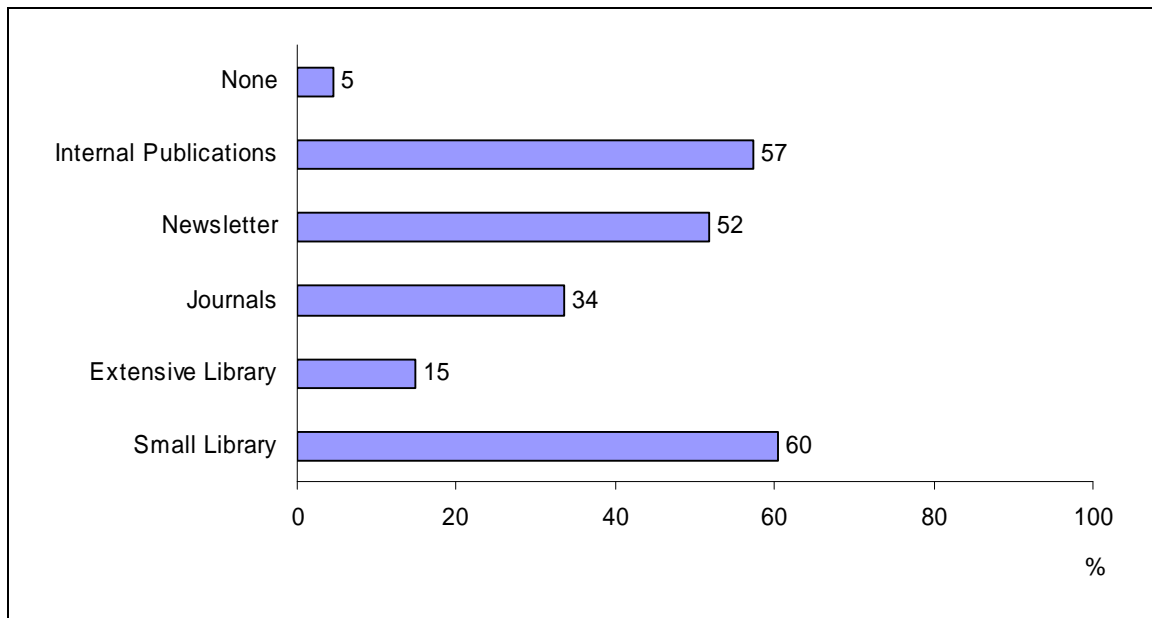
Table 5: Frequency with which Respondents Attend Learning Events – Unweighted Data (n=152, 3 cases missing)

	Frequency	%
Monthly or more frequently	16	11
Every two months	31	20
Once a quarter	42	28
Every six months	47	31
Once a year	10	7
Less often than once a year	4	3
Never	2	1
Total	**152**	**100**

Figure 7: Organisations that Facilitate Access to Research Evidence – Unweighted Data
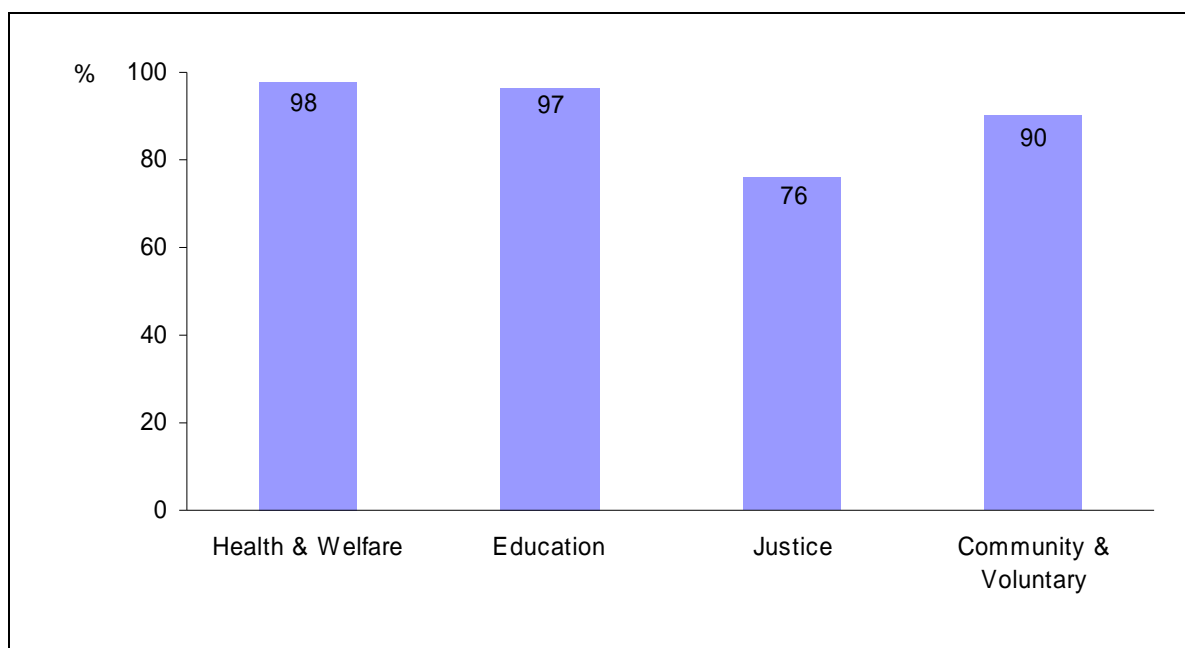
Figure 8: Ways in which Access to Research is Facilitated in Respondents' Organisations – Unweighted Data
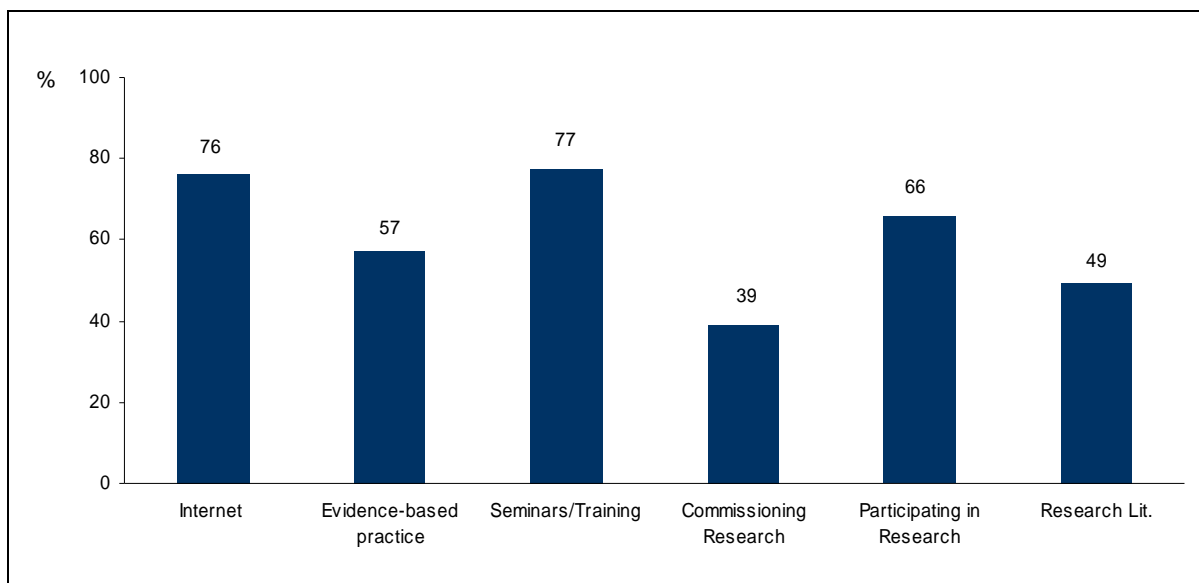
Figure 9: Barriers to Accessing Research in Respondents' Organisations – Unweighted Data
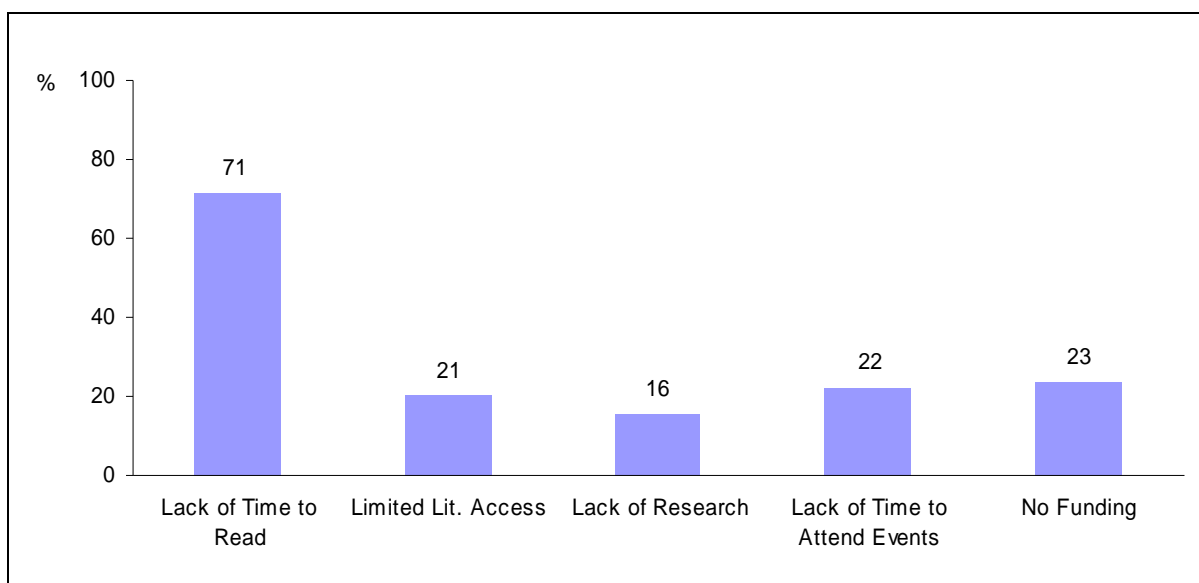
Table 6: Extent to Which Research Evidence Informs Work in Organisation and Application to Current Role – Unweighted Data

	Research Evidence Informs Work in Organisation (n=154)		Application of Research Evidence to Current Role (n=153)	
	Frequency	%	Frequency	%
Always	15	10	11	7
Often	75	49	76	50
Sometimes	55	36	58	38
Seldom	7	5	7	5
Never	2	1	1	1
Total	154	100	153	100

Figure 10: Responses to the Question 'To what extent do you think work in your organisation is informed by research evidence?' by Sector of Employment – Unweighted Data
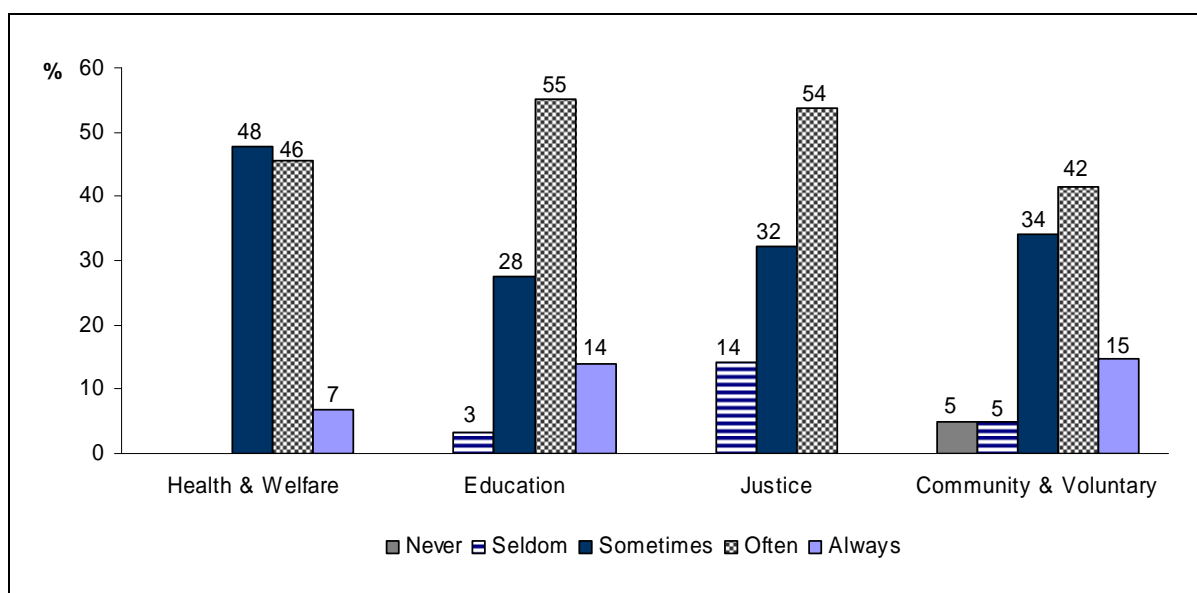
Table 7: Helpfulness of Research Evidence in Providing an Evidence Base and Research Evidence as a Source of Motivation – Unweighted Data

	Providing an Evidence Base (n=155)		Source of Motivation (n=154)	
	Frequency	%	Frequency	%
Very helpful	76	49	89	58
Helpful	62	40	50	33
Somewhat Helpful	15	10	14	9
Occasionally Helpful	2	1	1	1
Not helpful at all	0	0	0	0
Total	155	100	154	100

Figure 11: Helpfulness of Research Evidence in Providing a Base for Work by Sector of Employment – Unweighted Data
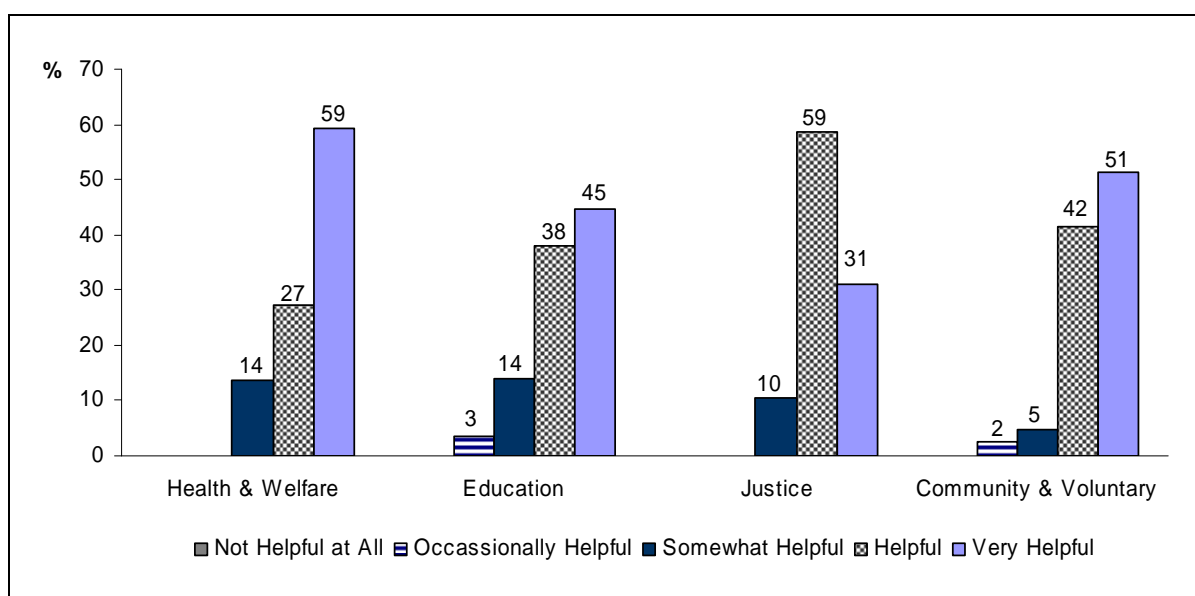
Figure 12: Helpfulness of Research Evidence as a Source of Motivation and New Ideas by Sector of Employment – Unweighted Data
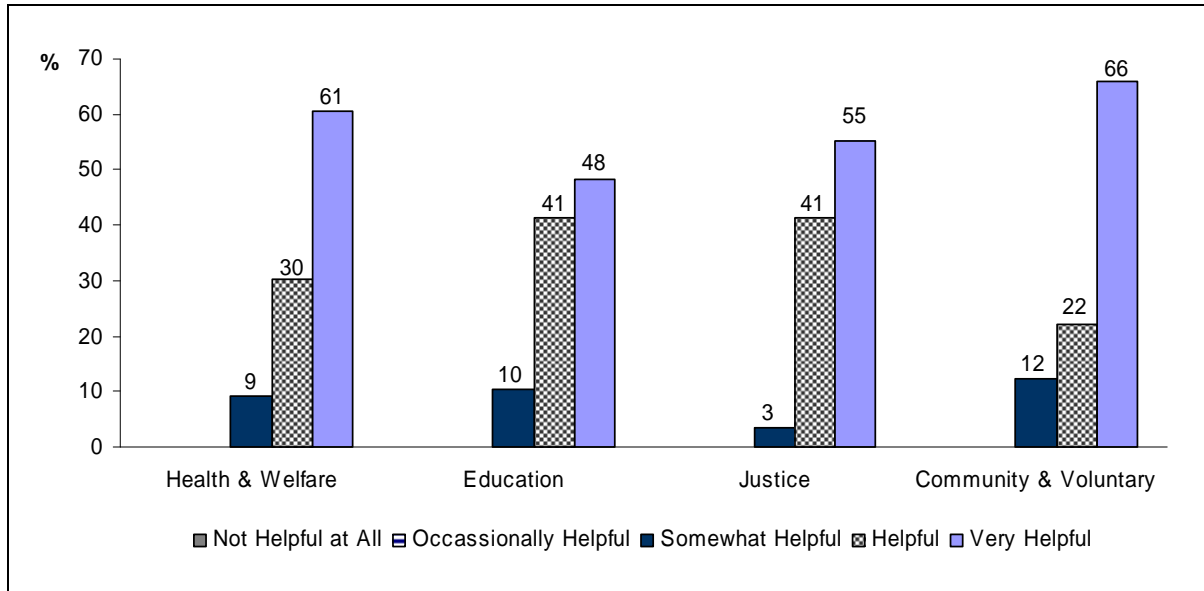
Figure 13: Point at which Respondents would Refer to Research Evidence – Unweighted Data (only applicable items shown)
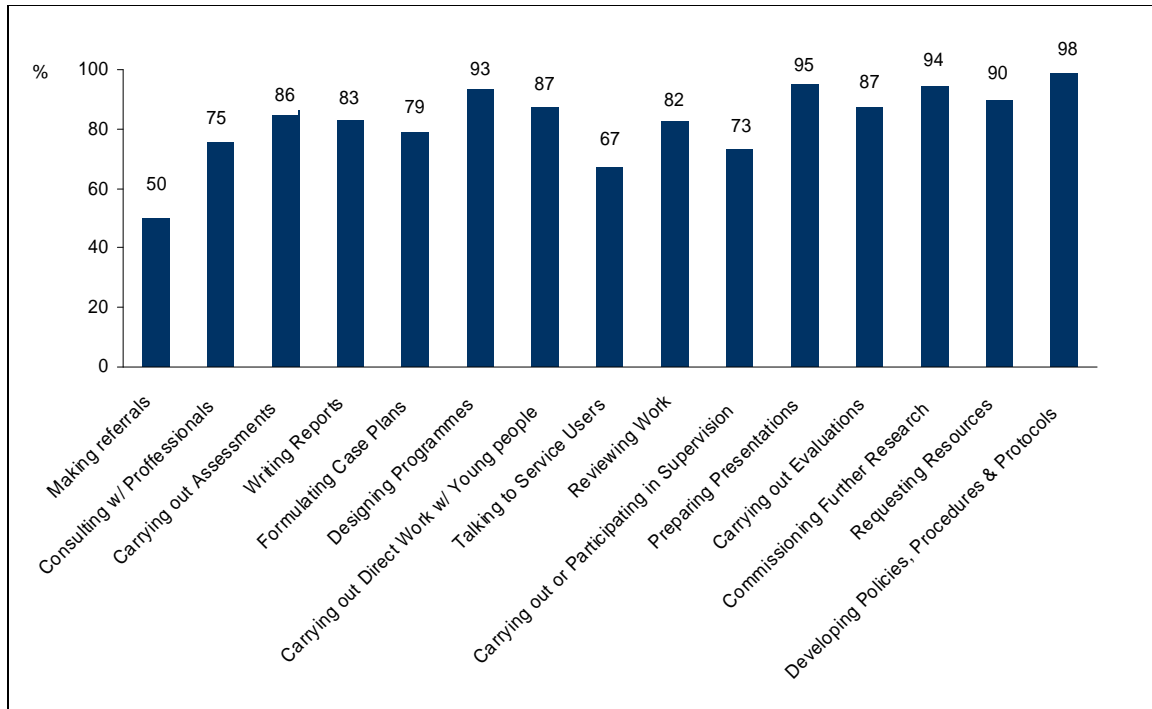
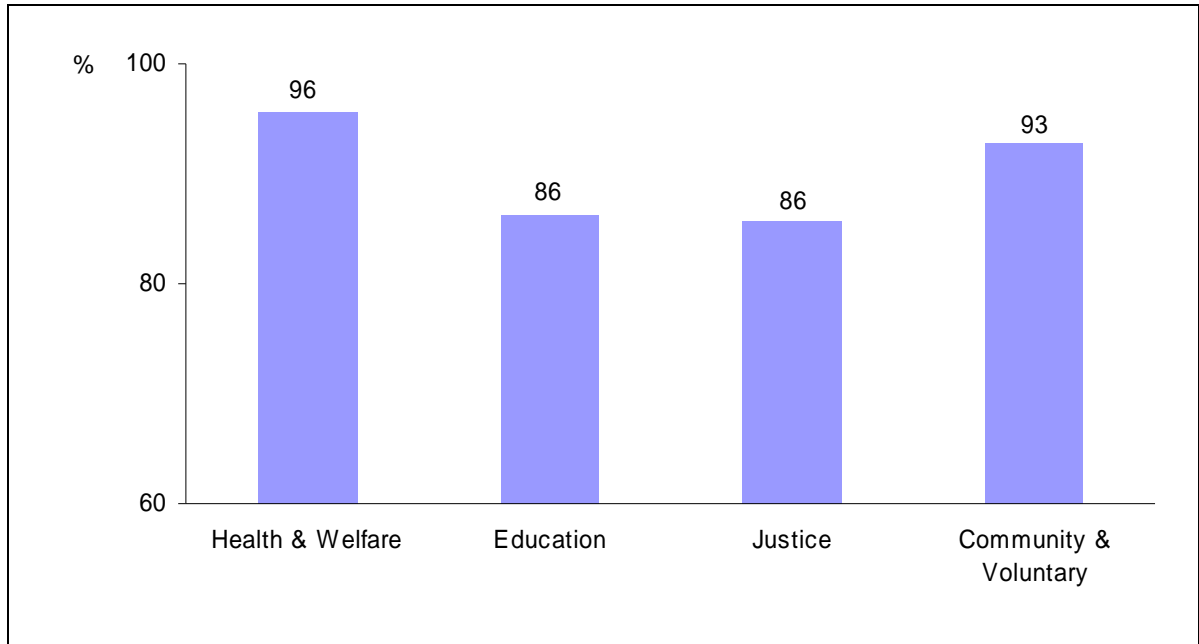**Figure 14: Organisations that Facilitate Staff to Apply Research Evidence – Unweighted Data**

Table 8: Ways in Which Organisations Facilitate Staff to Apply Research Evidence – Unweighted Data

	Yes (n, %)	No (n, %)
By allowing staff to try new ways of working that are informed by research	122 (87)	19 (14)
By building in the principle of evidence based practice into the ethos of the organisation	89 (63)	52 (37)
By implementing research recommendations in organisational policies	83 (59)	58 (41)
By encouraging staff to disseminate their own research	65 (46)	76 (54)
By having a research focus in supervision or review of work	54 (38)	87 (62)
By rewarding innovation	29 (21)	112 (79)

Figure 15: Responses to 'Has your organisation carried out or commissioned research within the last two years?' – Unweighted Data (n=150, 5 cases missing)
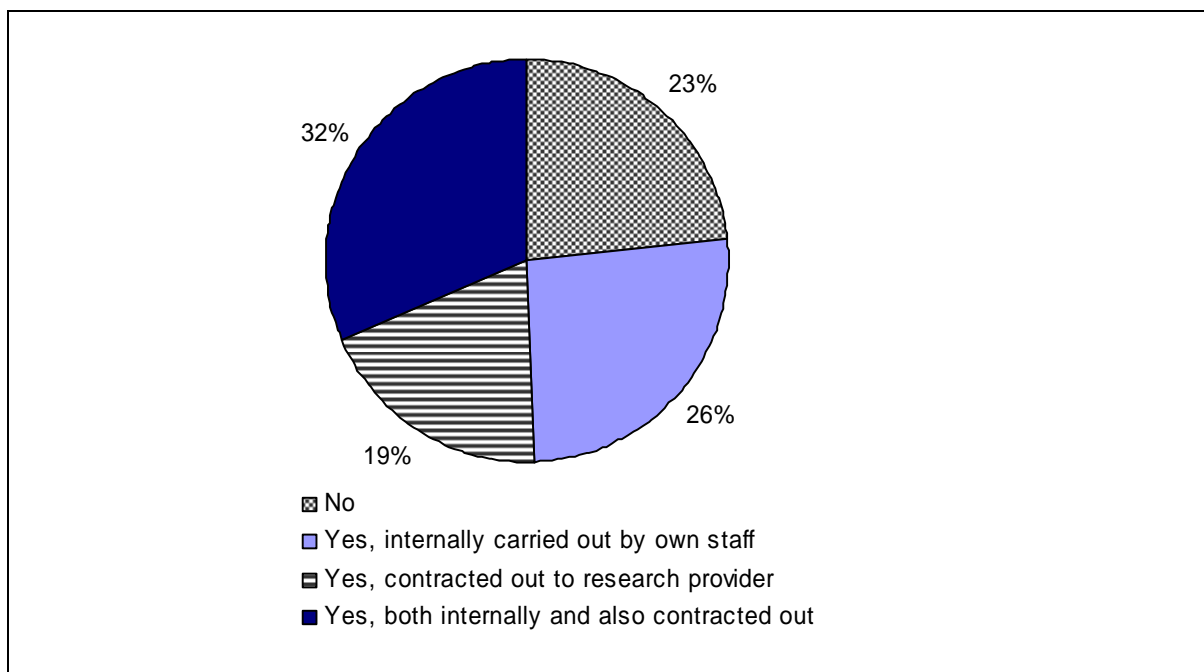

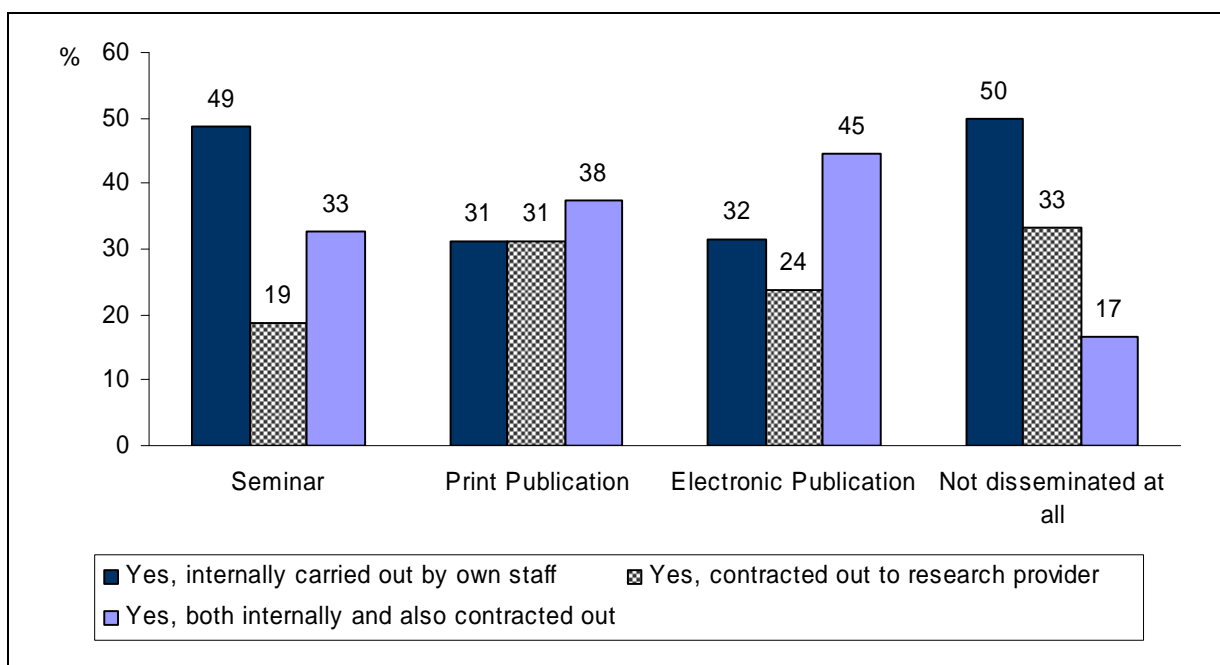**Figure 16: Mode of Dissemination of Research – Unweighted Data**

Table 9: Barriers to Applying Research Evidence – Unweighted Data (n=155 for all)

	Yes (n, %)	No (n, %)
Need for immediate solutions and can't wait for research	57 (37)	98 (63)
Organisation driven by a political rather than a research agenda	41 (27)	114 (74)
Lack of authority to make changes to your work/practice based on research findings	39 (25)	116 (75)
Research on desired topic unavailable	37 (24)	118 (76)
Resistance to change within the organisation	35 (23)	120 (77)
Lack of knowledge or skills about how to apply research evidence (for example statistics)	33 (21)	122 (79)
Presentation of research evidence too complex	28 (18)	127 (82)
Not considering research evidence as relevant to current role	16 (10)	139 (90)
Presentation of research evidence not detailed enough	15 (10)	140 (90)
Lack of confidence in research findings	14 (9)	141 (91)
Applying research findings involves too much risk and responsibility	13 (8)	142 (92)
Lack of confidence in researchers and academics	3 (2)	152 (98)

**Figure 17: Level in Organisation at which Research Evidence is Most Likely to be Used –
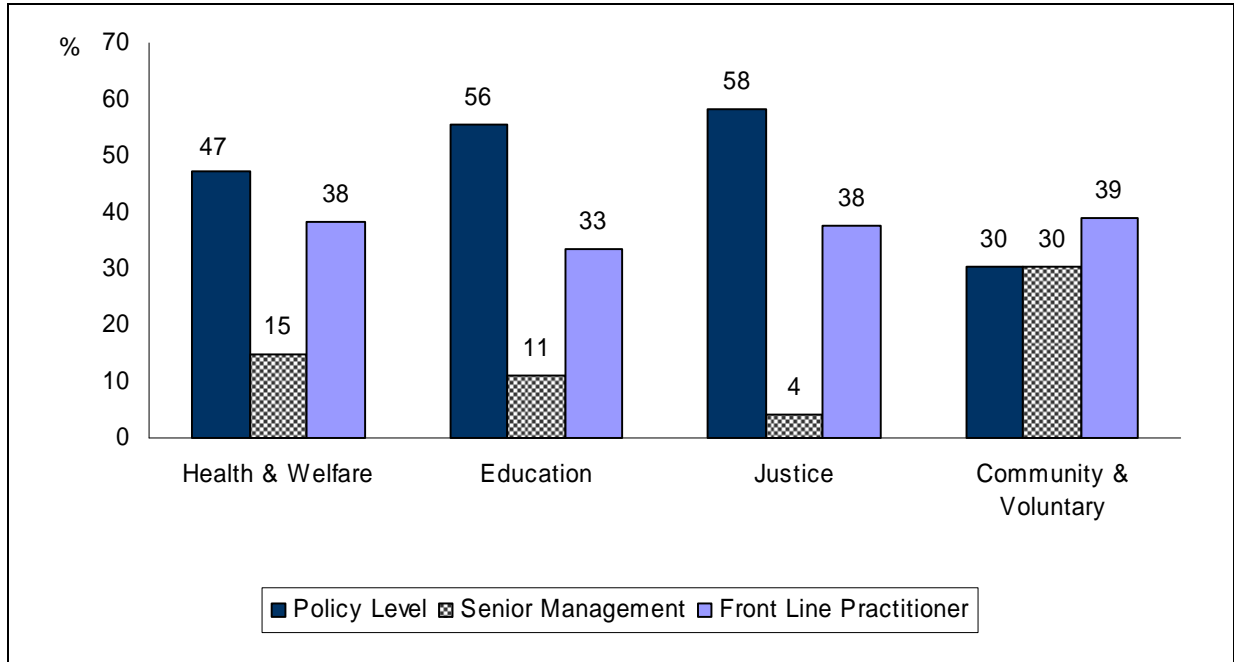Unweighted Data**

**Figure 18: Types of Research Evidence Respondent's Reported as Useful – Unweighted
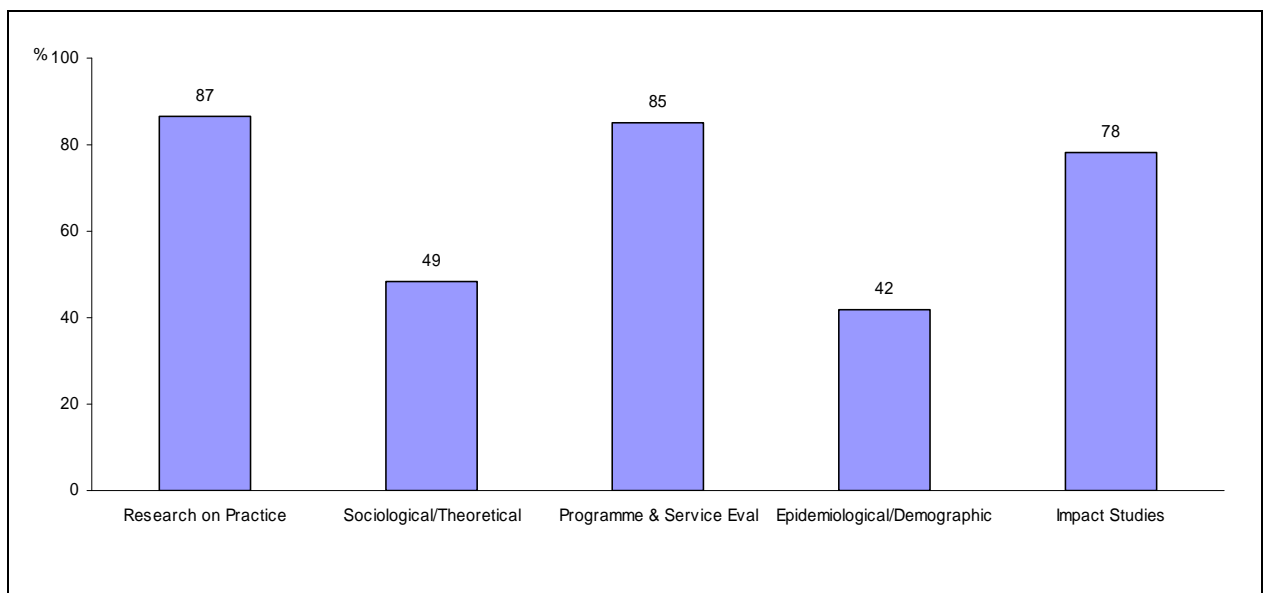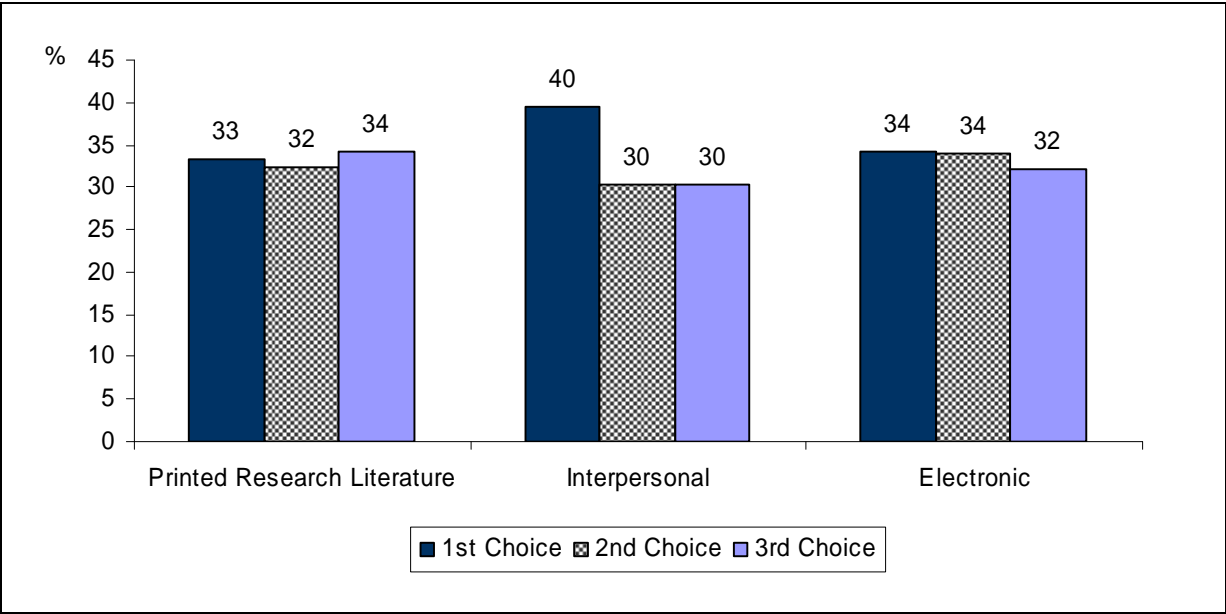Data (n=155 for all)**

Figure 19: Respondents' Preference for Mode of Research Availability – Unweighted Data

E   MISSION AND PURPOSE OF ORGANISATIONS REVIEWED

Figure E-1: International Organisations Reviewed – Summary Mission and Purpose

1. Centre for Reviews and Dissemination. Undertakes high quality systematic reviews that evaluate the effects of health and social care interventions.

2. Research in Practice. The mission is to promote positive outcomes for children and families through the use of research evidence. Its purpose is to identify effective methods of understanding and using research by providing services to a collaborative network of committed agencies.

3. Research in Practice for Adults. The mission is to promote positive outcomes for adult social care through the use of research evidence. Its purpose is to identify effective methods of understanding and using research by providing services to a collaborative network of committed agencies.

4. Research Unit for Research Utilisation. The overall aim is to facilitate the production and use of practical knowledge that will assist in enhancing the role of evidence in public policy and public services. The role of the unit is to develop a resource concerned with examining and improving the utilisation of evidence across the key public policy and public services areas of healthcare, education, criminal justice and social care.

5. Child Youth and Family Consortium. The aim is to build the capacity of the University of Minnesota and Minnesota communities to use research, inform policy and enhance practice to improve the well-being of Minnesota's children, youth and families.

6. The California Evidence Based Clearinghouse for Child Welfare. Provides child welfare professionals with easy access to vital information about selected child welfare related programs.

7. National Child Protection Clearinghouse. The aim is to inform policy, practice and research into child abuse prevention.

8. Australian Clearinghouse for Youth Studies. The mission is to contribute to the well-being of young people by providing comprehensive and up-to-date information about key issues and practices in the youth field for access by the community.

9. The Campbell Collaboration. Helps people make well informed decisions by preparing, maintaining and disseminating systematic reviews in education, crime and justice, and social welfare.

10. IPSCAN. The mission is to prevent cruelty to children in every nation, in every form: physical abuse, sexual abuse, neglect, street children, child fatalities, child prostitution, children of war, emotional abuse and child labour.

11. Social Care Institute for Excellence. The mission is to identify and spread knowledge about good practice to the large and diverse social care workforce and support the delivery of transformed, personalised social care services.

12. Child Welfare League of America. Aims to lead the nation in building public will to ensure safety, permanence, and well-being of children, youth, and their families by advancing public policy, defining and promoting practice excellence and delivering superior membership services.

13. NSW Government Department of Community Services. Promotes the safety and well-being of children and young people and works to build stronger families and communities.

14. New Zealand Family Violence Clearinghouse. Is the national centre for collating and disseminating information about domestic and family violence in Aotearoa/New Zealand.

15. Child Information Gateway. Promotes the safety, permanency, and well-being of children and families by connecting child welfare, adoption and related professionals as well as concerned citizens to timely, essential information.

16. National Center for Children in Poverty. Is a leading public policy centre dedicated to promoting the economic security, health, and well-being of America's low-income families and children.

17. Promising Practices Network on Children, Families and Communities. The organisation is dedicated to providing quality evidence based information about what works to improve the lives of children, youth, and families.

18. The Cochrane Collaboration. Is an international not-for-profit organisation, providing up-to-date information about the effects of health care.

19. Prevention Action. Is an online news publication reporting internationally on innovation and effectiveness among programs for improving children's health and development.

20. Chapin Hall. Is an independent policy research centre, at the University of Chicago, whose mission is to build knowledge that improves policies and programs for children and youth, families, and their communities.

Figure E-2: Purpose and Mission of the Selection of Irish Organisations

The Office of the Minister for Children and Youth Affairs is part of the Department of Health and Children. Set up by the Government in December 2005, its role is to improve the lives of children under the National Children's Strategy and bring greater coherence to policy making for children. Children now have a stronger voice on issues that affect them through the Minister for Children and Youth Affairs, Barry Andrews, TD, who attends all Cabinet meetings.

The Children Acts Advisory Board is an independent statutory board, advising the Ministers for Health and Children and Justice Equality and Law Reform. The key function of the board is to advise the Ministers on policy relating to the co-ordinated delivery of services under the Child Care Act, 1991 (care, protection and welfare) and Children Act, 2001 (detention). The Children Acts Advisory Board also has a role in conducting or commissioning research, promoting enhanced interagency co-operation, and promoting, organising or taking part in, seminars and conferences.

The role of the **Centre for Effective Services Ltd** is to make available technical and organisational expertise to client organisations that offer support to children and families at community level. The centre aims to fill an internationally recognised gap by connecting the design and implementation of children's services with scientific and technical knowledge of what works.

The Child and Family Research Centre is a partnership between the Health Service Executive and National University of Ireland, Galway. Based in the School of Political Science and Sociology, the CRFC undertakes research, education and training in the area of child and family care and welfare. The CFRC engages in research, evaluation and service design relating to practice, policy and interventions in the lives of children. Research undertaken aims to be strongly connected to applied work for children and families and relevant to a broad range of stakeholders including service users, policymakers, politicians, service managers and front line staff. Its website notes that the context for the CFRC's research agenda is greatly influenced by the need for evidence based services and by practical, outcome focused considerations. Supporting organisations with mapping needs, identifying models and tools for best practice and with measuring service delivery is at the core of its work.

The Children's Research Centre, Trinity College Dublin, is a specialist centre, established in 1995 which undertakes multi-disciplinary policy and practice relevant research into the lives of children and young people and the contexts in which they live their lives. The centre is part of the School of Psychology and the School of Social Work and Social Policy and is a member of Childwatch International a non-profit, nongovernmental network of institutions engaged in research for children. In its work the centre strives to produce high quality research of interest to researchers, policy makers and service providers. The centre also aims to build capacity and skills in researching children's lives. It works closely with statutory, voluntary and community bodies concerned with children and young people.

The Centre for Social and Educational Research (CSER) aims to be a dynamic and innovative research centre that seeks to improve the quality of life of children, family and society. The CSER aims to impact on social and educational policies and practices through the provision of accurate research data. The CSER's website notes that it has a well established track record of research in five classified research themes.

Applied Social Studies Community of Practice is a project of the National Digital Learning Repository (NDLR). The applied social studies community of practice aims to support communication and connection between lecturers of social care and applied social studies throughout Ireland. Through activities and events this group explores

innovations in learning and teaching approaches within all areas of applied social studies. With the support of the NDLR, training is provided to develop learning resources in this area.

socialstudies.ie is an Irish directory of information for social care practitioners, students, academics and all those interested in applied social studies.

The Irish Social Care Gateway is a social care gateway that acts as a portal to relevant sites and information for social care practitioners, students, academics and those interested in care issues. The gateway is maintained by the social care programme at the Institute of Technology, Sligo, on behalf of the Irish Association of Social Care Educators.

Combat Poverty is a statutory organisation responsible for advising the Irish Government on policies to reduce poverty in Ireland. Its website notes that advice given by Combat Poverty is based on evidence drawn from its research programme and from lessons emerging from practical, innovative projects.

The Family Support Agency is responsible for the Family and Community Services Resource Centre Programme, the Scheme of Grants to Voluntary Organisations providing Marriage, Child and Bereavement Counselling Services, the Family Mediation Service and research and information on matters related to its functions. The agency has clearly defined functions and responsibilities in the area of family policy and services. It provides a direct, nationwide family mediation service and supports, promotes and develops the provision of marriage and relationship counselling and other family supports.

Focus Ireland aims to advance the right of out of home people to live in a place they call home through quality services, research, and advocacy. It aims to influence the social and political environment in which Ireland operates by undertaking a programme of national and local research projects, policy analysis and development.

Barnardos supports children whose well-being is under threat, by working with them, their families and communities and by campaigning for the rights of children. Barnardos' mission is to challenge and support families, communities, society and Government to make Ireland the best place in the world to be a child, focusing specifically on children and young people whose well-being is under threat.

The Irish YouthWork Centre is an initiative of Youth Work Ireland, providing an information, library and training supports service to youth and community workers throughout the country. It acts as a one-stop research and documentation centre developed to respond to the varied information, research and training support needs of those who work in the field.

Breaking Through arose from a 1999 European Conference titled 'Young People, Crime and Disadvantage'. A network was established to bring people together with an interest in the policy and practice relating to supporting young people at risk. The overall aim of the organisation is to provide a network for practitioners to promote effective interventions for young people at risk.