

To EBP or Not To EBP?: Social Work's Dilemma with Evidence Based Practice

By Brandy R. Maynard

Abstract

Evidence-based practice (EBP) continues to be a widely debated and tentatively accepted movement in social work. Although there is a great deal of discussion of evidence-based practice within the professional literature, mainstream social work seems to be generally unaltered by this movement. This paper explores the history and evolution of social work knowledge development and the relationship between social work knowledge and practice in the context of the evidence-based practice movement. Evidence-based practice can be a useful framework to guide social work toward meeting the challenges of the profession, more effectively helping our clients and being better positioned to confront social problems. Adopting evidence-based practice will not be easy; there are a number of challenges, implications and choices that need to be considered. Critically considering evidence-based practice in the field of social work will put us in a better position to evaluate how we practice, and challenge us to do better.

Evidence-Based Practice in Social Work

Evidence-based practice (EBP) often elicits a range of reactions from social workers, including suspicion, criticism, apathy and enthusiasm. Evidence-based practice, which originated in medicine to address gaps between practice and research findings, has been widely adopted and advocated in medicine and nursing. EBP has also been more broadly adopted by human services professionals, including social workers in the United Kingdom and Australia, but remains in its infancy for social work in the United States (Gilgun, 2005; Rosen, 2003).

The social work literature reflects general support for embracing evidence-based practice; however, there are several authors and social workers who have expressed skepticism, rejection and caution of evidence based practice (Witkin, 1996; Witkin & Harrison, 2001; Blome & Steib, 2004; Gray & McDonald, 2006). It is becoming increasingly difficult to ignore the evidence-based practice movement as the President's New Freedom Commission report, the Council on Social Work Education (CSWE) and the National Association of Social Workers (NASW) have incorporated evidence-based language and are requiring social workers to use best evidence to guide practice (New Freedom Commission on Mental Health, 2003; NASW, 1999;

CSWE, 2004). There are also a number of entities with a certain amount of status, authority, and credibility that are promoting evidence-based practice, such as the Office of Juvenile Justice and Delinquency Prevention (OJJDP), Blueprints for Violence Prevention, the Substance Abuse and Mental Health Services Administration (SAMHSA), the Department of Education and various state agencies across the U.S.

Even though there is agreement in the literature and by social work authorities (e.g., NASW and CSWE) on incorporating evidence-based practice into the social work profession, there are several issues that impact the ability for this to be broadly accepted by social work practitioners, educators and researchers. These issues relate to the definition of evidence-based practice, the nature of knowledge and how knowledge is used in social work practice, and the technical aspects and barriers to engaging in evidence-based practice (including the role of higher education, technology, dissemination, etc.).

What is Evidence-Based Practice?

Although there are a number of reasons for social work's ambivalence toward evidence-based practice, adding to the misunderstanding and confusion is the multitude of definitions of EBP found in the literature, a few are noted below:

Evidence-based practice...is the integration of best research evidence with clinical expertise and patient values (Crossing the Quality Chasm, 2001, as cited in Campaign for Mental Health Reform, 2003, p. 1)

EBP involves using the 'best available' evidence...about specific types of practices with particular problems. (Witkin & Harrison, 2001, p. 293)

Evidence-based practice is the conscientious, explicit, and judicious use of the current best evidence in making decisions about the care of clients. (Gibbs & Gambrill, 2002)

EBPSW [Evidence-based practice in social work] is defined as *the planned use of empirically supported assessment and intervention methods combined with the judicious use of monitoring and evaluation strategies for the purpose of improving the psychosocial well being of clients.* (O'Hare, 2005)

Evidence-based practice means basing intervention on proven effectiveness derived from empirical research. (Gray and McDonald, 2006)

The definition of evidence-based practice in social work has been, and continues to be, evolving; however, many authors continue to misrepresent evidence-based practice by defining it narrowly, neglecting many important characteristics of EBP as a philosophy of practice, selecting fragments of EBP, re-labeling old practice or practice as usual as EBP or ignoring it altogether (Gambrill, 2003). Evidence-based practice does not simply mean using research as the basis for making clinical decisions and selecting interventions nor does it simply refer to programs and interventions that have been deemed an "evidence-based practice" (e.g. Multisystemic Therapy [MST], Assertive Community Treatment [ACT], Integrated Dual Disorders Treatment [IDDT]) by various entities that are evaluating the efficacy of specific programs.

Eileen Gambrill (1999, 2003, 2006) has written extensively about evidence-based practice in social work and provides this description:

Evidence-based practice suggests a philosophy of practice as well as a unique series of steps and related technological innovations designed to help practitioners to integrate evidentiary, ethical and implementation concerns. (2003, p.19)

Most social workers do not argue with the need to provide effective and ethical services to clients, so why are social workers objecting to, misrepresenting, misunderstanding or ignoring evidence-based practice? To get a better understanding of evidence-based practice in relation to the social work profession, one must examine the historical, social and political context of the evolution of the social work profession, both in terms of knowledge and practice.

The Knowledge Base of Social Work

What do social workers know, what do social workers do and is there any connection between what social workers know and do? These are the age old questions that have plagued the social work profession since its inception. Social workers have long engaged in research and gathering evidence about interventions (Klein and Bloom, 1994; Tyson, 1995; Kirk & Reid, 2002), although the role and application of research and knowledge as it relates to practice have been elusive to the social work profession (Kirk & Reid, 2002; Tyson,

1995; Fischer, 1981; Fraser & Taylor, 1991).

Much of the U.S. health and human service system was developed out of organized religion. As churches and religion became more diverse and better organized, they began to develop more sophisticated networks of health and human services and demand was made for more professionally operated services and organizations using the latest information from the social sciences (Kirk & Reid, 2002). This occurred during the Progressive Era, a time in which greater emphasis was placed on technical expertise and empirical information.

In the 19th century, social workers advocated "scientific philanthropy," which was shaped by social, religious and moral views of the causes for social problems (Marx & Hopper, 2005; Fraser & Taylor, 1991). Also during this time, a movement toward professionalization began with the charity organization societies and the settlement house movement. These two groups, along with the psychiatric social work group, comprised three distinct kinds of social work research communities and developed distinct models and clinical practice in the early 20th century (Tyson, 1995). Tyson (1995) provides an in-depth discussion of research contributions from each of these communities as well as the diverse philosophical views they held about science and research. She described all three communities as having shared beliefs about scientific social work research. They all drew from pragmatism, rejected the positivist view of science and viewed the purpose of research as generating workable solutions for problems. Other social and behavioral scientists were being influenced by a positivist philosophy of research; however, logical positivism, the more stringent offshoot of positivism, was not adopted by social work researchers until the 1950s (Tyson, 1995).

Tyson (1995) identified three common beliefs about generating social work knowledge that the settlement houses, charity organization societies and the psychiatric social work group shared:

- 1) methodological pluralism....[using] diverse research designs without prescribing any one as inherently superior. . . .;
- 2) a non-restrictive approach to the variables that could be studied scientifically;
- 3) social work research actualizes value. . . about how the researcher should relate with clients and how to advance large-scale social reform (pp. 47, 49).

Social work pioneers, including Jane Addams, suggested that systematic data collection and information processing were critical aspects of effective individual-level interventions and community practice strategies

(Fischer, 1973). Fraser and Taylor (1991) also noted that early social workers viewed the profession as scientifically based, in that practice should be continually informed by scientific knowledge. Mary Richmond, exemplifying a largely positivist perspective in *Social Diagnosis* (1917), "chose to define social casework as a science and emphasized the collection of accurate information about families and individuals as the basis for rational decisions about service" (Fraser & Taylor, 1991, p. 7).

In 1915, Abraham Flexner, who had transformed the medical education and practice in ways that are still apparent today, concluded that social work was not a profession, with criticisms about social work's knowledge base being a significant factor (Flexner, 2001). Flexner's conclusions about social work were not based on the results of careful studies, interviews, or a systemic review of the literature, but rather were derived from his consideration of what criteria must be met for any occupation to be a profession in its own right, extracting the criteria he used by looking at those professions that were universally accepted as professions at the time: law, medicine and preaching (Kirk & Reid, 2002). This had a profound effect on the social work profession, providing an impetus for social workers to professionalize their occupation and, ultimately, bringing into focus the need to identify a body of scientific knowledge in social work (Kirk & Reid, 2002).

A New Paradigm: The Scientist-Practitioner

By the 1950s, little progress was made toward developing a body of knowledge based on research, despite the recommendations that Flexner had provided to advance social work as a profession forty years earlier. "The profession still had few, if any journals devoted to research, few research-oriented doctoral programs, and virtually no research establishment" (Kirk and Reid, 2002, p. 9). Questions continued to be raised about social work's status as a profession. Another set of criteria for social work's professional status was outlined by Ernest Greenwood, including 1) a systematic body of knowledge, 2) professional authority and credibility, 3) regulation and control of members, 4) a professional code of ethics, and 5) a culture of values, norms and symbols. Using these criteria, Greenwood concluded that social work did meet acceptance as a profession in the 1950s (Kirk & Reed, 2002). Despite Greenwood's assurances that social work was indeed a profession, there continued to be disputes whether social work had an identifiable knowledge base as well as epistemological concerns about whether the profession was using appropriate methods of scientific inquiry. A report of a conference published two years after Greenwood's pronouncement

opened with the following sentence: "Social work has not produced a systematic body of knowledge, although it exhibits many characteristics of a profession" (NASW, 1964, iii, as cited in Kirk & Reid, 2002, p. 11).

In addition to the efforts to construct social work's body of knowledge and the epistemological debates that were ongoing through the latter half of the twentieth century, there was also much criticism of the outcomes of social work practice. In the 1950's, "social work was largely conviction, tradition and untested practice theory" (Kirk & Reid, 2002, p. 9) and many questions were being raised to examine the effectiveness of social work. These factors led to yet another effort to construct a knowledge base, one that was built from scientific inquiry, rather than the traditional forms of knowledge based on conviction and values (Kirk & Reid, 2002).

In the first half of the twentieth century, there was very little in the way of empirically based intervention knowledge and, according to Kirk and Reid (2002), the early outcome studies that did exist were "rather crude efforts at determining effectiveness of social work" (p. 37). Due to judgments of effectiveness being made by those with interest in the program, with little attempt to determine measurement reliability and no controls to determine if the gains were due to the intervention or other factors, Richard C. Cabot, in 1931, called for social workers "to measure, evaluate, estimate, appraise your results" (cited in Kirk & Reid, p. 38). At this time, the profession "had a strong stake in determining if the methods used by practicing professionals and taught in schools of social work were indeed effective in alleviating client problems" (Kirk & Reid, 2002, p. 38).

"The social and political climate of the 1960's [also] created an interest in program evaluation and led to a questioning of social work's effectiveness" (Witkin, 1996, p. 69). By this time, controlled evaluations had accumulated and evidence began to emerge that social work services were not effective (Kirk and Reid, 2002; Fischer, 1973). Some concluded, as Fischer had, that the social casework interventions which were examined were deficient. Others, like Helen Perlman and Carol Meyer, concluded that it was the research methodology that was deficient, not the programs. Kirk and Reid concluded that both the programs and the research strategies were deficient (Kirk & Reid, 2002).

A shift to a logical positivist approach to social work research was also occurring in the mid-twentieth century. The logical positivist philosophy of science restricted social work research to that of "scientific" versus "non-scientific," a focus on theory verification rather than discovery, a prioritization of experimental design over other research designs and the belief that scientific research can and should be value-free. This, as Tyson

(1995) argues, was a diverging view of social work research which had been adopted by the early social work researchers. While the early social workers were engaged in practitioner-research, the new definition of valuable research led to the conclusion that "competence in research design calls for a degree of specialization which most practitioners cannot be expected to achieve" (Fletcher, 1955, p. 13, as cited in Tyson, 1995, p.76).

As a result, the gulf between practice and research widened in the 1950s and 60s. A new hierarchy was established in that the researcher was the expert and contributor to science and knowledge, while the social work practitioner was one who applied what was already known. Tyson acknowledges that the gulf between research and practice "reflected not only beliefs about social work knowledge but also differences between the authority and status of women and men in the social work profession. . . More women were in direct practice, whereas more men held management, research and faculty positions" (Tyson, 1995, p. 84).

These factors, as well as other social factors (see summaries in Tyson, 1995 and Witkin, 1996) led many schools of social work and the Council on Social Work Education to promote practice strategies that had a research base. The scientist-practitioner framework was promoted as a practice strategy to encourage social workers to rigorously evaluate the effects of intervention with clients by using research strategies associated with single subject design. "A testament to the importance relegated to this framework was the incorporation of the scientist-practitioner model into most schools of social work graduate programs in the 1980s" (Jenson, 2005, p. 131).

Although there was much effort to connect science with practice, the results proved largely unsuccessful and failed to contribute the kind of empirically tested intervention knowledge hoped for. Relatively few practitioners engaged in single subject design or systematic practice evaluation, and investigators found that "most practitioners did not consider empirical evidence when selecting interventions for clients" (Jenson, 2005, p. 131). Despite the lack of success of these efforts, a number of methodological lessons were learned which helped pave the way for new approaches (Kirk & Reid, 2002).

The "Social Work Revolution": Toward a Postpositivist Orientation

In 1981, Fischer described a "social work revolution," referring to the way that social workers viewed knowledge and practice and in the way social workers used that knowledge to conduct practice (Fischer, 1981). Also that same year, Heineman (1981) proposed an alternative, less restrictive approach for social work research,

heuristics, which provided the impetus for a shift in social worker's epistemological stance (Heineman, 1981; Tyson, 1995).

In 1989, Heineman Pieper put forward a post-positivist perspective, the heuristic paradigm, as an alternative paradigm of research to replace the "overly restrictive, outmoded logical positivist paradigm. *Heuristic* in this usage simply means any problem-solving strategy that appears likely to lead to relevant, reliable, and useful information" (As cited in Tyson, 1995, p. 207). Heineman Pieper argued that research studies based on the logical positivist paradigm, which placed artificial limits on treatment, manipulated variables for the sake of research design, and ignored the needs of practitioners and clients, resulted in research that appeared irrelevant to the practitioner and client, and was thus largely ignored. Heineman Pieper proposed that the use of the heuristic paradigm would decrease the tension and gap between researchers and practitioners by allowing research to be more collaborative and relevant, thus motivating practitioners to read and engage in research (Heineman Pieper, 1989 in Tyson, 1995, p. 211). Heineman Pieper (1989, in Tyson, 1995) notes that another important implication of the heuristic paradigm is:

no one category of facts is inherently better at telling us about reality than another category of facts. The heuristic researcher selects types of data and methods of data gathering for their appropriateness both to the theory chosen to guide the research and also to the problem under study (p. 211).

Heineman described a number of reasons for adopting a heuristic paradigm of research including contemporary philosophy having undercut logical positivism's claims, that the heuristic paradigm "welcomes the complex... problems that have been social work's focus," facilitates "cooperation between researcher and practitioner and between researchers in different fields" and it "makes research user-friendly by expanding...the operation of human judgment in the knowledge-building process" (Heineman, 1989 in Tyson, 1995, p. 219).

As represented by Heineman, the social work literature over the past twenty years, as well as the CSWE and schools of social work, appear to be reflecting a commitment to a postpositivist orientation (Fraser & Taylor, 1991).

"Postpositivism relies on 'critical multiplism,' or the use of multiple methods of inquiry and sources of information (for example, observation, self report, worker report, and management information system data)....

Ontologically, postpositivism acknowledges that the world is imperfectly known and measurable, but it subscribes to an objective reality (Fraser & Taylor, 1991, p.9).

Postpositivists acknowledge that objectivity may be elusive, but remains a goal toward which researchers strive, emerging from the process of replication (Fraser & Taylor, 1991).

The Current Status of Social Work Research

Over the past twenty years, social workers have taken positive and concrete steps toward connecting science with practice. The National Institute of Mental Health (NIMH) appointed a Task Force on Social Work Research in 1988. NIMH issued recommendations from that Task Force which contributed to a number of advances in social work research and subsequently funded seven Social Work Research Development Centers in schools of social work during the 1990's. This task force influenced important guidelines on research training in doctoral education and also made way for the creation of national organizations designed to promote social work research—Institute for the Advancement of Social Work Research (IASSWR) and the Society for Social Work Research (SSWR) (Jenson, 2005).

Although social work seems to be making great efforts in expanding the research and knowledge base, only about half of all articles published in journals for or by social workers were research based (Rosen, Proctor & Staudt, 1999; Fraser & Taylor, 1991). Two studies that reviewed social work literature within the past two decades revealed that 55.2% (published between 1985 and 1988) and 47% (published between 1993 and 1997) of articles were research based (Rosen, Proctor & Staudt, 1999; Fraser & Taylor, 1991). Fraser and Taylor (1991) noted that of those 55.2% of research-based articles, only 26.7% were written by social workers while the remainder was written by authors in other professions. The majority (70%) of articles that social workers wrote were composed of interpretation of theory, social comment, personal anecdote, and program advocacy (Fraser & Taylor, 1991). "A substantial portion of the research base of the [social work] profession appears to consist of contributions by authors with training in disciplines other than social work" (Fraser & Taylor, 1991).

In addition to a lack of research-based knowledge in social work literature, there is very little research on interventions (Rosen, Proctor & Staudt, 1999; Fraser, 2004; Kirk & Reid, 2003). Fraser (2004) argues that "in addition to explanatory research, intervention research is requisite for a profession because professions are com-

mitted to change...[and] the central most activity in social work is intervention and research on intervention is foundational to the profession" (p.210). Rosen, Proctor and Staudt (1999) reviewed 863 research articles published in 13 practice-oriented journals for or by social workers between January 1993 and July 1997. Only 15% of those research articles were focused on the effects of an intervention while 49% pursued knowledge for explanation and 36% were aimed at descriptive knowledge. Only "about a dozen research reports a year described an evaluated intervention in such detail that a practitioner might be able to replicate it [which] seems...a small number for a practice-oriented profession" (Fraser, 2004, p. 212).

Although social work is slowly developing a knowledge base, social work practitioners are not using this knowledge in practice (Jenson, 2005; Fraser, 2004; Nathan, 2004; Rosen, 2003). "Policy and practice are often not based on evidence but on ideology or politics, which may lead to an *ignoring* of the evidence" (Humphries, 2003, p. 82). Nathan (2004) notes that "despite the outpouring of research on counseling and psychotherapy over the past half century, the clinical activities of most counselors and psychotherapists remain largely untouched by it" (p. 949). Many gaps remain in our knowledge about "what works...that is, about the most effective...means of helping" (from Task Force on Social Work Research, 1991, p. 4, as cited in Rosen, 2003, p. 7).

Gambrill (1999) attributes the lack of the use of evidence in social work practice as social workers relying heavily on authority based criteria, "such as opinions of others, pronouncements of 'authorities,' unchecked intuition, anecdotal experience, and popularity (the authority of the crowd)" (p. 348). Based on the amount of literature that demonstrates a significant void of systematic research, a lack of research focused on interventions, few social workers reading research related materials, and evidence that social workers are not using research findings, research methods and methods of intervention based on practice research literature, it does appear that social work practice is based on authority rather than evidence (Fraser, 2004; Myers & Thyer, 1997; Rosen, 2003, Mullen & Bacon, 2004).

Clearly, social work is still struggling with many of the same questions our foremothers were struggling with in the early years of the social work profession: what do social workers do, how is knowledge used and are we effective in promoting change and solving the problems to which we set out?

So as we arrive at the present day, it is quite interesting, although not altogether surprising, that we are still not much further along than we were in the early

years of the profession in coming to an understanding of the roles research, knowledge and practice play in social work. Will evidence-based practice be the answer to this dilemma in social work? Before we try to answer this question, it is important that we look at the purpose and role of social work knowledge and practice.

The Purpose of Social Work Knowledge and Practice

Man must prove the truth, i.e. the reality and power, the this-sidedness of his thinking and practice...All social life is essentially practical. All mysteries which lead theory to mystics, find their rational solution in human practice and in comprehension of this practice...The philosophers have only interpreted the world, in various ways; the point is to change it. (Marx, 1845, as cited in Smith, 1999, p. 11)

Is social work a theoretical discipline, one in pursuit of the truth through contemplation, the attainment of knowledge for its own sake; one of production (*poietike*), making action from a guiding plan or idea as a skilled artisan; or one of practice (*praxis*), informed and committed action? Many readers may be inclined to say that social work is about *praxis*, to which I would agree as a premise, but we must further examine each to determine if that is what social work is, or what it should be (Smith, 1999).

According to Aristotle, contemplation was the form of thinking appropriate to theoretical activities (Smith, 1999). It involves mulling over facts and ideas that the person already possesses. For many in various disciplines, as it was for Aristotle, gaining knowledge for its own sake, and to reflect and contemplate on that knowledge, is the highest form of human activity (Smith, 1999). Although gaining knowledge for its own sake may be a relevant undertaking for some, it is not enough for a social worker. Fischer (1984) argues that "possessing a conceptual framework to help us understand or assess problems in practice does not lead automatically to knowing what to do or how to intervene with those problems. Understanding is not helping" (p.73).

The kind of knowledge involved in productive disciplines was a 'making' action (*poietike*) (Smith, 1999). This is most easily associated with craftspeople. Making action involves both skill (*techne*) and creativity in an artistic sense, but always begins with a plan or idea (*eidosis*) and ends with a thing or an object. Although the product can only come into being through the skill of the practitioner, it is the *eidosis* that prescribes the nature of the

product, not the practitioner's skill (Smith, 1999).

Praxis is the third form of reasoning as offered by Aristotle (Smith, 1999). *Praxis* is guided by a moral disposition to act truly and rightly and a concern to further human well-being. It begins with a question or situation which is considered in relation to what is thought to make for human flourishing, is then guided by a moral disposition to act truly and rightly which allows one to then engage with the situation or question as committed thinkers and actors. The outcome, then, is process. What this process involves is a round of interpretation, understanding and application (Smith, 1999).

Theory and practice are not completely separate entities. Practice cannot lack theory and theory is not usually devoid of reference to purposeful action. "Practice is soaked in theory" (Smith, 1999, p. 4); it is a constant process of theory making and theory testing. In *praxis*, there can be no prior knowledge of the right means by which we realize the end in a particular situation. For the end itself is only concretely specified in deliberating about the means appropriate to a particular situation. There is a continual interplay between ends and means as well as thought and action. *Praxis*, then, is not simply action based on reflection. It is action which embodies certain qualities, including a commitment to human well-being, the search for truth and respect for others (Smith, 1999).

Social work, then, seems to be a little of all of these. Social work has been a discipline often concerned with *poietike*, in that our "actions" have, at least some or most of the time, been dictated by a plan or design that was given to us (by the dominant culture or another discipline) and we simply were involved in "making action." As long as we understand practice to be merely application of theory, what is often believed to be 'real' knowledge, we will not be able to move past that of a "skilled artisan implementing the 'design' of others" (Smith, 1999). In this sense, the 'design' of others can be viewed as theories that we subscribe to, but do not critically evaluate, as well as in terms of aligning with the dominant culture and ignoring our social work mission.

Encompassing a truly practical discipline, *praxis*, one devoted to the act of doing in an informed and committed manner, involves a commitment to our mission: to "enhance human well-being and help meet the basic human needs of all people" (NASW, 1999, p. 1). *Praxis* would also involve asking questions relevant to a situation or person, to be guided by our ethics and values as well as "truth," or evidence, and engaging with the situation or person as committed thinkers and doers (Smith, 1999).

If we agree that the profession of social work is one of *praxis*, and that theory is an integral part of *praxis*, social work knowledge must then be comprised of both theoretical and practical knowledge, informed by ethics

and truth, guided by questions relevant to the situation or person and resulting in action. Social work literature has been comprised primarily of theoretical knowledge, but lacking in intervention knowledge, something that is required for the act of doing in an informed and committed manner.

Is Evidence-Based Practice the Answer?

There is clearly a need to have a framework or process to more effectively build a knowledge base that is meaningful and useful, to be good purveyors and consumers of research, to use evidence to guide practice decisions and interventions and to evaluate if what we are doing is effective and is achieving the intended impact. Can evidence-based practice be that framework? Jenson (2005) offers that “the recent interest in using principles of EBP to improve connection between research and practice offers a new sense of optimism in the movement to integrate science and intervention” (p. 132).

Indeed, evidence-based practice is a new way of doing things and involves a shift in paradigms (Gambrill, 2003, p. 13). EBP is not a different name for what has been proposed in the past (empirical clinical practice, empirically validated treatments). Although there have been many attempts to integrate knowledge and practice, EBP is quite different from what has been tried before. The unique process for drawing on external research findings and the greater attention given to ethical issues, such as informed consent and the importance of considering client values and expectations, the importance given to involving clients as active participants in the decision making process and the emphasis on the critical appraisal of practice and policy research set EBP apart (Gambrill, 2003). “Other differences include the greater emphasis in EBP on helping practitioners and clients to acquire critical appraisal skills, the promotion of transparency of what is done to what effect and focus on out-

comes *clients* [italics added] value” (Gambrill, 2003, P.13). Gambrill (2006) effectively summarizes EBP as

a guide for thinking about how decisions should be made....A systemic approach to integrating ethical, evidentiary, and application concerns that emphasize transparency regarding the uncertainties involved in helping clients....It describes a philosophy and process designed to forward effective use of professional judgment in integrating information regarding each client's unique characteristics, circumstances, preferences and actions and external research findings (p. 339).

Gilgun (2005) presents four cornerstones on which evidence-based practice in social work rests: (1) what we know from research and theory; (2) what we and other professionals have learned from our clients, or practice wisdom, which also includes professional values; (3) what we, as social workers, have learned from personal experience; and (4) what clients bring to practice situations. All four come into play and mutually affect each other as we go about our daily work with clients. “In sum, EBP promotes a high degree of practitioner reflection and mindfulness” (Gilgun, 2005, p. 52).

The facets of EBP are very much in line with Heineman's heuristic paradigm, a postpositivist philosophy of research and evaluation. Sackett et al. (as cited in Gambrill, 2006, p. 340) describes a five-step process in doing EBP to which I compare the heuristic paradigm to research and evaluation.

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Applying the Heuristic Paradigm to Evidence-Based Practice

EBP 5 step process	Gambrill's description (2006 p.340)	Heuristic counterparts (Heineman Pieper, 1985 and Tyson, 1995)
Defining the problem/ formulating the question	Converting information needs related to practice decisions into well-structured answerable questions.	Include the following considerations when generating the question/problem formulation (Tyson, p. 228): 1. What values underlie the problem formulation? 2. What possible solutions will the problem formulation lead? 3. Why is this problem formulation important? 4. Who is the client and how can the research be helpful to the client? 5. What are the ontological and epistemological assumptions that underlie the problem formulation? 6. What biases are evident? 7. How can biases be regulated?

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EBP 5 step process	Gambrill's description (2006 p.340)	Heuristic counterparts (Heineman Pieper, 1985 and Tyson, 1995)
Discovering evidence	Tracking down, with maximum efficiency the best evidence with which to answer them	<p>All data and evidence available to the practioner are appropriate for use. The strategies for discovering evidence are heuristics that prioritize one form of accuracy at the expense of the others. (Tyson, p. 438)</p> <p>The evidence that the practitioner will seek is determined by the question/problem conceived in step one.</p> <p>Use the "sense" in operationalism to examine how the theoretical assumptions in the problem/question formulation lead to gather some forms of data and exclude other data.</p>
Appraising the evidence	Critically appraising that evidence for its validity, impact (size of effect) and applicability, (usefulness in practice).	The practitioner selects the level of analysis in relation to the problem to be addressed and recognizes the biases of those selections. Using multiple levels of analysis will mitigate the bias (Tyson, p. 439).
Applying to practice	Applying the results of this appraisal involves deciding whether the evidence found (if any) applies to the desision at hand and considering client values and preferences in making decisions.	Deciding whether the evidence found applies to the situation at hand. Evidence is not judged solely on the methodology used. No methodology is "better" than another except in terms of how it answers the question/problem formulated.
Evaluating	Evaluation our effectiveness and efficiency in carrying out steps 1 to 4 and seeking ways to improve them in the future	<p>The practitioner selects levels of analysis and recognizes the biases of those selections. Using multiple levels of analysis will mitigate the bias (Tyson, p. 439).</p> <p>Using change indices can help practitioners reflect on the changes they aim to accomplish and to determine whether those changes are taking place (Tyson, p. 440).</p>

Challenges

There are a number of barriers and challenges to implementing a philosophy of EBP, as well as future implications. One of the challenges to evidence-based practice is related to epistemological issues. Much of the literature criticizing EBP is often based on the presumption that evidence-based practice is a logical positivist construct. This is based mostly in reaction to the inclusion of "empirical" evidence as part of EBP. It is also, quite rightly so, in response to how some are defining and constructing EBP, using a narrow definition that ignores the ethical and application concerns and other important principles of EBP. The term "empirical" is often misused as Heineman (in Tyson, 1995, p. xxiii) describes: "The

terms *empirical* and *empiricist* traditionally refer to knowledge arising from experience that originates extracranially. The positivists fallaciously apply these terms only to data collected in a manner compatible with the positivistic paradigm." "*Empiricism* means that the method ultimately rests on experiential information derived through observation using the senses (sight, sound, touch, taste, or smell)" (Anastas, 1999, p. 11). Empirical in this sense takes a much more postpositivist philosophy of research, not specifying anything about the nature of the observations or defining one kind of observation as inherently superior (Anastas, 1999).

Not everyone agrees on the use of research for social work practice or on whether there is consensus about when an intervention has been demonstrated to be effective, relating to methodology, quality and validity of

the research. Some have argued that the lack of objectivity, lack of consistent criteria for determining the generalizability of a study and the lack of consistent and agreed upon criteria for determining the quality and validity of qualitative research as reasons for not using evidence-based practice (Kirk & Reid, 2002). In response, Kirk and Reid (2002) argue that "the research credentials of an intervention can be problematic yet still [demonstrate] enough evidence of effectiveness to warrant its use over options supported by less [or no] evidence" (p. 159).

The types of research that are funded and published will both be impacted by and have an impact on evidence-based practice. If the definition and operationalization of EBP is restricted to a positivist philosophy, then the types of research that will be funded and published will be primarily quantitative. This will further reinforce the belief that qualitative research is an inferior form of research and we will be leaving out the very important ways in which qualitative research can inform practice (Morse, 2006). If, however, we take a postpositivist philosophy of evidence-based practice, qualitative research will have an important role in contributing to and enriching the evidence of the effectiveness of social work practice.

Organizational barriers also exist as the real world and competing pressures challenge a new paradigm. Social workers often have high caseloads and productivity pressures with very little time to seek out, read and appraise research. Supervisors and administrators are often wedded to certain models or practices based on tradition, ideological preference or funding issues. Staff who are interested and motivated to do EBP may encounter resistance as they are questioning the practices of the organization.

Institutions of higher education will also encounter their own set of organizational challenges. As schools of social work wrestle with if, when and how to teach evidence-based practice, they will be confronted with both intra and extra-institutional forces. It would be hoped that schools of social work would be teaching practices and developing curricula that is at the forefront of knowledge and technology; however, this is too often not the case. Schools of social work are organizations, and organizations are often characterized as investing considerable effort in maintaining old organizational patterns and myths, often based on opinion or authority-based social work practice and teaching (Soydan, in press). In addressing this resistance to change, some external forces are starting to have an impact on schools of social work, including social work practice organizations demanding a workforce capable of implementing EBP, research and grant funding and insurance reimbursements that are requiring practitioners, researchers and organizations to demonstrate EBP and consumers

and consumer advocacy organizations demanding accountability of providers (Soydan, in press). As students in schools of social work begin to learn about evidence-based practice through their own personal experiences or reading, they will also begin to demand that their institutions incorporate EBP into the curricula and field placements.

Another challenge of adopting EBP is the technical aspects of doing it. There is much one needs to know in order to practice EBP that has not been traditionally taught in schools of social work, such as asking well-structured answerable questions, seeking out evidence and critically appraising research. Some schools of social work are starting to address this by adopting evidence-based practice as a new pedagogical paradigm (Howard, McMillen & Pollio, 2003). They are teaching students the value and components of EBP as well as ethical responsibilities to use effective interventions. They are also integrating into their curricula interventions that have empirical evidence of being effective and informing their students in practice courses "to the amount, type, and quality of evidence supporting major theories, policies and interventions in practice" (Howard, McMillan & Pollio, 2003, p.236). As the Council on Social Work Education accreditation guidelines now calls for learning skills essential to EBP in bachelor's and master's programs, teaching evidence-based practice will challenge, among other things, current curricula, faculty, and field placements. Much of the future of evidence-based practice lies in how social work education meets these challenges and to what level and scope they choose to integrate EBP into their professional education programs.

Gambrill (2006) attributes the preference for authority-based practice as the most challenging obstacle faced by EBP. The philosophy of EBP, as being a participatory, antiauthoritarian paradigm that encourages transparency and the questioning of what we know, challenges those who prefer not to be questioned or who feel they know better or have more experience. Many social workers have been trained in specific theories that may or may not have an evidence base, but are held onto because of ideological grounds and tradition.

Conclusion

Evidence-based practice involves a shift in paradigms and cultures, a new way of thinking about knowledge, practice, research and teaching social work practice and policy. There are a number of challenges, valid limitations and implications to adopting an evidence-based practice philosophy; however, the barriers and limitations are not valid reasons to disregard or dispense with EBP.

We can no longer continue to make practice

decisions based on tradition, good intentions, authority, intuition or personal preference as this is not in the best interest of the people that we are ethically bound to help. There is a growing body of knowledge and an availability of a variety of effective interventions which our clients have the right to receive and we have the ethical obligation to provide. The NASW Code of Ethics (1996), calls upon us "to help people in need and to address social problems" (p. 3), "to engage people as partners in the helping process" (p. 3), "to promote the well-being of clients" (p. 4), "to critically examine and keep current with emerging knowledge relevant to social work" (p. 13), and "to base practice on recognized knowledge, including empirically based knowledge, relevant to social work and social work ethics" (p. 13). As Howard, McMillan and Pollio (2003) affirm, "Failure to adopt more scientifically sound practice methods and evidence-based instructional approaches, in the face of burgeoning database of relevant empirical findings, might eventually marginalize social work itself, and relegate our service customers to substandard professional interventions" (p. 256).

Adopting evidence-based practice, teaching and policy will provide the framework, principles and guidelines to help us meet our ethical obligations, to further our

knowledge base and develop and use effective practices in ways that are aware of and sensitive to our clients' unique characteristics, values and circumstances. In short, EBP will allow us to more effectively help those who will benefit most from evidence-based practice: our clients.

At this crossroads of using EBP, there are a number of choices we must make and others we must be involved in influencing and directing. The question at this point is not whether social work should adopt an evidence-based practice philosophy, but how will social work define and use evidence-based practice? Will we maintain the broad philosophy and process that EBP was originally intended to be or will we continue to ignore, misrepresent and maintain business as usual and allow a narrow view of EBP to reign? The answers to the questions raised by evidence-based practice will not come easily, but the debates and critical evaluation of our research, practice and teaching that have resulted from the EBP movement will undoubtedly raise our awareness of what we are doing and how we are impacting our clients and the social problems with which we are faced. In that respect, evidence-based practice has already demonstrated a great deal of promise for our profession.

Brandy R. Maynard, LMSW, received her MSW in 1995 from the University of Michigan and is currently a doctoral student in the School of Social Work at Loyola University Chicago. She has worked in the child welfare, mental health and juvenile justice systems, providing direct services to children and families and having held supervision and management roles. For the past 5 years, she has been working with juvenile justice and mental health systems to implement evidence-based programs. Her research interests include children and families involved in the juvenile justice and mental health systems, truancy, and the implementation of evidence-based programs, with particular attention to supervision and systemic/organizational issues that affect EBP dissemination and implementation.

References

- Anastas, J.W. (1999). *Research design for social work and the human services*. New York: Columbia University Press.
- Blome, W.W., Steib, S. (2004). Whatever the problem, the answer is "evidence-based practice"- or is it? *Child Welfare*, 83, 611-615.
- Campaign for Mental Health Reform. (2003). Evidence-based services and emerging best practices for treating mental disorders in adults and children. Retrieved on September 17, 2006 from <http://www.mhreform.org/policy/ebs.htm>
- Council on Social Work Education. (2004). *Educational policy and accreditation standards*. Retrieved November 12, 2006, from <http://www.cswe.org>
- Fischer, J. (1973). Is casework effective? A review. *Social Work*, 18, 5-15
- Fischer, J. (1981). The social work revolution. *Social Work*, 26, 199-207
- Fischer, J. (1984). Revolution, schmevolution: Is social work changing or not? *Social Work*, 29, 71.
- Flexner, A. (2001). Is social work a profession? *Research on Social Work Practice*, 11, 152-165.
- Fraser, M. & Taylor, M.J. (1991). Social work and science: Many ways of knowing? *Social Work Research and Abstracts*, 27, 5-16.

- Fraser, M.W. (2004). Intervention research in social work: Recent advances and continuing challenges. *Research on Social Work Practice, 14*, 210-222.
- Gambrill, E. (1999). Evidence-based practice: An alternative to authority based practice. *Families in Society, 80*, 341-350.
- Gambrill, E. (2003). Evidence-based practice: Sea change or the emperor's new clothes? *Journal of Social Work Education, 39*, 3-23.
- Gambrill, E. (2006). Evidence-based practice and policy: Choices ahead. *Research on Social Work Practice, 16*, 338-357.
- Gibbs, L. & Gambrill, E. (2002). Evidence-based practice: Counterarguments to objections. *Research on Social Work Practice, 12*, 452-476.
- Gilgun, J.F. (2005). The four cornerstones of evidence-based practice in social work. *Research on Social Work Practice, 15*, 52-61.
- Hayes, R.A. (2005). Introduction to evidence-based practices. In C. A. Stout & R. A. Hayes (Ed.), *The evidence-based practice: Methods, models and tools for mental health professionals* (pp. 1-10). New Jersey: Wiley.
- Heineman, M.B. (1981). The obsolete scientific imperative in social work research. *Social Service Review, 55*, 371-397.
- Howard, M.O., McMillan, C.J. & Pollio, D.E. (2003) Teaching evidence-based practice: Toward a new paradigm for social work education. *Research on Social Work Practice, 13*, 234-259.
- Humphries, B. (2003). What else counts as evidence in evidence-based social work? *Social Work Education, 22*, 81-91.
- Jenson, J.M. (2005). Connecting science to intervention: Advances, challenges and the promise of evidence based practice. *Social Work Research, 29*, 131-135.
- Kirk, S.A. & Reid, W.J. (2002). *Science and social work*. New York: Columbia University Press.
- Klein, W.C. & Bloom, M. (1994). Social work as applied social science: A historical analysis. *Social Work, 39*, 421-431.
- Marx, J.D. & Hopper, F. (2005). Faith-based versus fact-based social policy: The case of teenage pregnancy prevention. *Social Work, 50*, 280-282.
- Morse, J.M. (2006). The politics of evidence. *Qualitative Health Research, 16*, 395-404.
- Mullen, E.J. & Bacon, W. (2004) Implementation of practice guidelines and evidence-based treatment: A survey of psychiatrists, psychologists and social workers. In A. R. Roberts & K. R. Yeager (Ed.), *Evidence-based practice manual*. Oxford: Oxford University Press.
- Myers, L.L. & Thyer, B.A. (1997). Should social work clients have the right to effective treatment? *Social Work, 42*, 288-298.
- National Association of Social Workers. (1999). *Code of ethics of the National Association of Social Workers*. Retrieved September 13, 2006 from <http://www.socialworkers.org/pubs/code/code.asp?print=1>
- O'Hare, T. (2005). *Evidence-based practices for social workers*. Chicago: Lyceum Books.
- Rosen, A., Proctor, E.K., Staudt, M.M. (1999). Social work research and the quest for effective practice. *Social Work Research, 23*, 4-14.
- Rosen, A. (2003). Evidence-based social work practice: Challenges and promises. *Social Work Research, 27*, 197-208.
- Sackett, D.L., Rosenberg, W.M., Gray, M.J.A., Haynes, R.B., Richardson, W.S. (1996). Evidence based medicine: What it is and what it isn't. Retrieved on November 15, 2006 from <http://www.bmj.com/flagship.luc.edu/cgi/content/full/312/7023/71>
- Shek, D.T.L., Tank, V.M.Y., & Han, X.Y. (2005). Evaluation of evaluation studies using qualitative research methods in social work literature (1990-2003): Evidence that constitutes a wake-up call. *Research on Social Work Practice, 15*, 180-194.
- Smith, M. K. (1999). Praxis: An introduction to the idea. Retrieved from on November 15, 2006, from <http://www.infed.org/biblio/b-praxis.htm>
- Soydan, H. (in press). Improving the teaching of evidence-based practice- challenges and priorities. *Research on Social Work Practice*.
- Tyson, K. (1995). *New foundations for scientific social and behavioral research: The heuristic paradigm*. Boston: Allyn & Bacon.
- Witkin, S.L. (1996). If empirical practice is the answer, then what is the question? *Social Work Research, 20*, 69-75
- Witkin, S.L & Harrison, W.D. (2001). Whose evidence and for what purpose? *Social Work, 46*, 293-296.
- Gray, M. & McDonald, C. (2006). Pursuing good practice: The limits of evidence-based practice. *Journal of Social Work, 6*(1), 7-20.