Preface

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At a time when society faces serious social, economic, and planetary problems, the social work profession struggles to redefine its role in reducing those problems and their impact on individuals. At the same time, the pursuit of “social good” is no longer a valued outcome in itself. The profession must demonstrate its relevance and effectiveness to a broad constituency of legislators and the public as well as to clients and practitioners. An important asset is research on social work practice: research on what social workers actually do; variations; benefits; the processes, cultural competences, and ethics of practice; and effectiveness. Still, despite forty years of emphasis on empirically based clinical practice, the promotion of clinician-scientists, development of infrastructure for agency-based research, and more recently Evidence-Based Practice (EBP), the amount of intervention research comes up perilously short (Fraser 2004). The needs of underserved, diverse, and culturally identified populations are often poorly addressed.

This book provides a direction for social work practice research by reviewing the recent history of empirical practice, summarizing current knowledge in key areas, tracing an empirically developed social work model (task-centered practice), and developing an agenda for research in the twenty-first century. The book is a tribute to William J. Reid (1928–2003), a social work scholar who influenced social work in several areas: 1) with Laura Epstein, developing an evidence-based intervention model (1972) (see chapter 13 for a description of the task-centered model); 2) systematizing research methods and disseminating them to social workers (Research in Social Work, Reid and Smith, 1981); 3) integrating many approaches to research while other scholars squared off in epistemological debates; 4) assiduously promoting empirically based practice long before its current cachet;
and 5) more recently, synthesizing intervention knowledge and framing an agenda for future research (Reid 2000; Reid, Kenaley, and Burton 2004).

Part 1 reviews the development of social work research. Ronald A. Feldman (chapter 1) focuses on paradoxes inherent in the infrastructures that shape research over time: 1) landmark reports from external organizations (Flexner, Russell Sage Foundation, National Institutes of Mental Health); 2) growth in educational programs for MSWs without concomitant growth in doctoral programs to produce faculty and researchers; 3) minimal research instruction and competency at all program levels; 4) a proliferation of organizations that effectively separate practice, research, and education; 5) journals that have low impact ratings and publish little original research; and 6) a profession reluctant to legitimate research findings. In chapter 2, Anne E. Fortune traces the development of empirical practice in social work from Mary Richmond’s “scientific art” (1917) to the current proliferation of Evidence-Based Practices. While the rest of the book describes primarily quantitative research, Ian Shaw (chapter 3) summarizes the contributions of qualitative research. Qualitative research enables one to study individual outcomes (not evaluate a program) and advance an emancipatory research agenda. It shifts research questions from academicians' concerns “to those that sufferers and survivors think are central” (page 35).

The second part of the book includes summaries of the current “state of the art” in key fields of social work service. EBP is currently defined in two ways. One way is “practice that uses knowledge and interventions with research validation” (Gellis and Reid 2004). This approach is sometimes called “EBP as a noun or product” (Proctor 2009), “evidence-supported intervention (ESI),” or “evidence-supported treatment (EST)” (Danya International 2008). It assumes that intervention guidelines can be crafted from available data or have been tested with randomized trials of manualized interventions. In most of social work, such forms of EBP are organized by problem or field of practice. This second part includes evidence on work with small groups to resolve individuals’ problems (chapter 4, Charles D. Garvin); large-scale social development prevention programs designed to strengthen protection while reducing risk for children (chapter 5, Richard F. Catalano and colleagues), intervention for children’s mental health (chapter 6, Mark W. Fraser and Mary A. Terzian), child welfare services (chapter 7, June G. Hopps, Tony B. Lowe, and Latrice S. Rollins), and aging (chapter 8, Barbara Berkman). Because validating effectiveness for different cultures is so important (Conner and Grote 2008), two chapters address culturally grounded approaches: drug prevention with Latino youth (chapter 9, Flavio Francisco Marsiglia) and development of interventions for poor inner-city African Americans with Alzheimer’s disease (chapter 10, June G. Hopps, Tony B. Lowe, and Ollie G. Christian).
A second definition of EBP is as a process for practitioners to generate case-relevant questions and then find the evidence for effective intervention, normally using bibliographic and (now) computerized searches (Gellis and Reid 2004). Proctor (2009) calls it “EBP as a verb or process.” This approach, championed in social work by Gambrill (1999) and Gibbs (2003), assumes that each practitioner will be an efficient retriever and critic of relevant research. Following this definition of EBP, Julia Littell (chapter 11) discusses the science of research synthesis: how to conduct a systematic literature review that reduces bias, the international efforts to make such systematic reviews readily available through the Cochrane and Campbell Collaborations, and misinterpretation when systematic review is not implemented.

The third part maps the development and dissemination of social work’s only “homegrown” empirical practice model, Reid and Epstein’s task-centered model for work with individuals, families, groups, administration, and supervision. Lynn Videka and James Blackburn (chapter 12) outline Reid (and Epstein’s) contributions to social work practice research. Reid used research and development (R&D) (Thomas and Rothman 1994) over forty years to build a model with an eclectic, pragmatic, and above all empirical approach. The model generated much dismay among social work practitioners when it was introduced in the late 1970s. Ideas that were controversial in the then-dominant psychosocial practice community included focusing on client-acknowledged problems, focusing on delimited problems in living, taking action (tasks) to resolve problems, and practitioner collaboration with the client.

A focus on the task-centered model is important in the history of social work research because Reid was an early advocate of mixed research methods, integrating quantitative and qualitative approaches. He and colleagues used a wide variety of research approaches in developing the task-centered model. These included quantitative methods like small randomized clinical trials (e.g., Reid and Epstein 1972; Reid, Bailey-Dempsey, et al. 1995) and tests of discrete interventions like the task-implementation sequence (Reid 1975). Qualitative methods to develop and validate new micro-interventions included content analysis of sessions (Reid and Bailey-Dempsey 1994), Interpersonal Process Recall (Naleppa and Reid 1998), and critical events analysis (Davis and Reid 1988). Indeed, as a harbinger of next steps in practice research in the twenty-first century, Reid’s last publication called for expanding the type of data used to support evidence-based practice to include practitioner-driven and local qualitative and quantitative research (Gellis and Reid 2004).

Subsequent chapters in part 3 focus on the dissemination of the task-centered model. Ronald H. Rooney (chapter 13) describes its contributions to American social work practice. Elsewhere, some countries adopted the task-centered model wholeheartedly. Social workers in Great Britain, the
Netherlands, and Norway developed programs of research and adaptation for their national contexts (chapter 14, Peter Marsh; chapter 15, Nel and Louwerus Jagt; and chapter 18, Rita Elisabeth Eriksen). With support from government, professional organizations, and systematic training, the task-centered model became the central framework for most social services and child protection in those countries.

In other countries, diffusion of the task-centered model was more limited. In Switzerland, it was subsumed in a broader intervention approach, a “service bundle” that included the task-centered model within the “counseling bundle” (chapter 17, Alexander Kobbel and Matthias Naleppa). In Australia and Hong Kong, it was integrated into eclectic intervention approaches (chapter 19, Christopher Trotter; chapter 23, Yueh-Ching Chou and Ronald H. Rooney). In some countries, only a few practitioners use the model, not always systematically (chapter 21, South Korea, Nam-Soon Huh and Yun-Soon Koh; chapter 22, Hong Kong, T. Wing Lo). The widespread international dissemination of the task-centered model suggests it is robust to cultural differences. It has adapted well to many worldviews of individual and situational difficulties and to different means of providing social welfare. Remarkably, the model appears to be useful with involuntary as well as voluntary clients. The range of problems with which it has been used is considerable, especially in an era where practice research focuses on specific problems rather than on generalizable interventions. Problems and populations include suicide and depression, addictions, sexual abuse, child neglect, frail elderly, maladaptive youth in treatment centers, homeless people with psychiatric difficulties, welfare and social services case management, schoolchildren, families of children with developmental disability, and substance abuse. Most of the research is on intervention with individuals—children, adolescents, adults, and elderly; some with families (especially those with child problems); some with treatment groups whose members share similar problems; and administration and supervision. The task-centered model is rarely used to address problems that have structural or societal causes; an exception is improving housing in Norway (chapter 18).

The fourth part of the book draws lessons learned from the practice research movement as well as visions for future agendas. In chapter 24, Enola K. Proctor argues that to date, social work researchers have missed the most important research questions. To develop useful, rich knowledge in this social-political era, Proctor’s agenda includes five research questions: 1. What do social workers do? 2. How does practice vary? 3. What is the value of social work practice? 4. What practices should social workers use? 5. How can social work practice be improved?

While that agenda may be clear, whether the social work profession can conduct the needed practice research is a different issue altogether. Feldman
(chapter 1) outlines efforts to improve social work’s research infrastructure, culminating in recent widespread efforts of the National Institutes of Health (NIH) and other organizations such as the Society for Social Work and Research (SSWR) and the Institute for the Advancement of Social Work Research (IASWR) to train, mentor, promote, and fund social work researchers (Jenson, Briar-Lawson, and Flanzer 2008; Zlotnik and Solt 2008; Williams et al. 2008). Although the amount and quality of social work research has increased, the research agendas have not necessarily been practice oriented. At the end of the twentieth century, intervention research was still a very small portion of published research (Fraser 2004).

To remedy the situation requires building infrastructures that support both conducting and disseminating intervention research (Bellamy, Bledsoe, and Traube 2006). In chapter 25, Jack M. Richman reviews models for conducting research—practitioner-scientist, agency research unit, and agency-university partnership—and analyzes the likely buy-ins from various stakeholders who determine if research is conducted and of what quality. Lastly, in chapter 26, the book editors Anne E. Fortune, Philip McCallion, and Katharine Briar-Lawson review other issues in intervention research and propose practical, cost-effective models of research, and EBP dissemination.

Much of the material for this volume was presented in earlier versions at an International Practice Research Symposium held in June 2005 at the University at Albany, in honor of William J. Reid. The symposium was co-sponsored by the National Institute of Drug Abuse (NIDA), the School of Social Welfare, and the Center for Excellence in Aging Services at the University at Albany.

Many chapters—particularly the reviews of current knowledge and visions of the future—began as invited presentations at the symposium. Other chapters, including the international dissemination of the task-centered model, were written later to complete the framework developed at the symposium. A different part of the conference—presentations of new research studies on social work intervention—was published separately as a special issue of the journal Research on Social Work Practice (vol. 18, no. 6, November 2008).

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Robert K. Merton, the sociologist and National Medal of Science winner, used the phrase “standing on the shoulders of giants” to refer to paradigm leaders (1965). William J. Reid was such a giant in social work. When we stand on his shoulders, the imperative to foster and accelerate twenty-first-century practice research agendas is clear. Like Reid, when we advance social work practice research, we also advance the future of the profession and its effectiveness in delivering positive results to those we serve.

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References


