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**Developing advanced practitioners in mental health social work: pedagogical considerations**

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## **Abstract**

Advanced social work practitioners in mental health services daily face the challenges of working alongside the more powerful professions of psychiatry and psychology. Advanced post-qualifying programmes in mental health social work equip practitioners with the knowledge, skills and expertise to confidently work alongside both psychiatrists and clinical psychologists in multi-disciplinary teams. This includes training in empirical research methods, which are used to develop the evidence base for psychiatry and psychology, although social work practitioners find this particularly challenging. This paper explores the importance of research methods teaching in the development of advanced practitioners in mental health social work. Using learning theory to explore possible reasons why practitioners find it so difficult, it offers some solutions which may enhance the learning and teaching of research methodology to experienced social workers.

## **Keywords**

Post-qualifying education; evidence-based practice; advanced practice; mental health social work; research methods

## **Introduction**

Advanced practitioners in social work have been formally recognised for the first time in the UK by the College of Social Work in a new Professional Capabilities Framework (The College of Social Work, 2012). This provides the profession with an opportunity to develop a high cadre of practitioners who can provide professional leadership and engage more confidently with other professional groups. At the author's institution we have been providing advanced post-qualifying postgraduate education to mental health social workers for over 30 years which aims to increase their confidence and competence in working alongside clinical psychologists and psychiatrists in multi-disciplinary community mental health teams. However, the learning and teaching of research methods on this programme has been challenging for both students and lecturers. This paper will explore the importance of research methods teaching in the development of advanced practitioners in mental health social work. It will use learning theory to explore possible reasons why practitioners find it so difficult and offer some solutions which may enhance both its learning and teaching.

## **Professional knowledge**

Social work as a profession and academic discipline is in its youth in contrast to established health disciplines such as psychiatry and psychology. These disciplines play a leading role in defining practice within UK mental health services and have a direct impact on the work of mental health social workers. A defining characteristic of these disciplines, in contrast to social work, is that they appear more certain about what constitutes knowledge within their professions. In social work, however, there is

still debate about whether or not it could be termed a distinct discipline (Lovelock et al., 2004), because its boundaries are diffuse and it draws on a range of other disciplines such as sociology, social psychology, anthropology, social policy and law for its knowledge.

The practice of clinical psychology and psychiatry, which involves the prescription of psychotropic medication or the delivering of psychological therapies, for example, is defined by reference to empirical evidence of their effectiveness. This evidence base is disseminated to clinicians via National Institute for Health and Clinical Excellence guidelines (e.g. National Institute for Health and Clinical Excellence, 2009), which favours evidence in the form of systematic reviews of randomised controlled trials. Such scientific evidence empowers psychiatry within mental health services, although some psychiatrists argue that its power is not in proportion to the quality of research evidence about the effectiveness of its interventions (e.g. Bracken, 2012).

The paradigm of evidence-based medicine (Sackett et al., 1996) has been developed in order to support the integration of empirically-supported interventions into routine clinical care. However, it has not been accepted uncritically in psychiatry (Maier, 2006; Williams and Garner, 2002) and the reality of clinical practice means that clinicians do not always have the time to be up to date with the latest research (Wallace, 2011). Also, there are still debates about what constitutes 'evidence' in psychiatry (e.g. Gupta, 2010) as the evidential foundations of many pharmacological treatments for mental health problems are called into question (Moncrieff, 2008), for example. In spite of this, there is arguably a more defined source of knowledge derived from randomised controlled trials for psychiatrists and clinical psychologists than exists for mental health social workers.

Mental health social workers, in contrast, draw upon diverse sources of knowledge derived from a range of perspectives to become effective practitioners (Webber *et al*, 2010). Technical knowledge alone is insufficient for the complexity of social work practice, which frequently draws upon unconscious tacit knowledge which practitioners create themselves (Schon, 1987). However, working alongside clinical psychologists and psychiatrists, social workers find it difficult to articulate their knowledge in ways understood through the empirical world-view of their colleagues, leading to their marginalisation in mental health services (Nathan and Webber, 2010). Further, social work struggles to contribute to the evidence base for mental health practice as it suffers from a combination of structural, economic and academic constraints (McCrae *et al.*, 2005).

Through the lens of Foucault (1977), the discourse of evidence based practice and the use of empirical evidence empowers clinical psychologists and psychiatrists to the exclusion of other mental health practitioners such as social workers. ‘Enunciated modalities’ (Foucault, 1972) are formed which enhance the authority of psychiatrists (and to a lesser extent clinical psychologists), irrespective of the content of their discourse. This makes it difficult for social workers to question the validity of their knowledge, who are marginalised irrespective of the strength of their arguments.

The disempowerment of social workers in mental health services and the devaluing of their knowledge (except of mental health law) create a dilemma for designers of curricula of advanced post-qualifying programmes for social workers. How can these programmes empower practitioners and enable them to confidently engage with

psychiatrists and clinical psychologists, as well as maintain the respect of other practitioners within their own profession?

The postgraduate programme led by the author attempts to achieve this by exposing practitioners to multiple theoretical positions and epistemological traditions to develop their understanding and to help them articulate their practice more effectively to colleagues in their discipline and beyond. To support their critical engagement with the other mental health disciplines, the programme provides research training and the opportunity to contribute to the evidence base for social work (and mental health services) through original empirical research (Nathan, 2010).

### **Barriers to learning**

Training in empirical research methods and the process of evidence-based practice form a core component of this programme, but many practitioners find this to be the most challenging aspect of it. But they are not alone. It appears that social work students have struggled with learning research methods since they were first introduced into curricula in the US over 25 years ago (Epstein, 1987). However, US studies have also identified that social work students have diverse attitudes towards research courses. For example, almost a quarter of Secret et al.'s (2003) sample of social work students reported having little or no fear about learning research methods. In contrast, a recent audit of research teaching on UK social work qualifying programmes (MacIntyre and Paul, 2012) found that students encounter difficulties in learning (and lecturers in teaching) research methods effectively.

Entrants to social work programmes are more likely to have a background in the humanities rather than the sciences. This makes them less familiar with empirical research methods at the beginning of their social work training than those entering clinical psychology or psychiatry training programmes. For example, a US study of graduate social work and clinical psychology students found that the former reported more research anxiety and less interest in research than the latter (Green et al., 2001). When they are included in social work curricula in the UK, empirical research methods are taught alongside other methods, such as participatory research, reflecting the discipline's diverse epistemological paradigms (Shaw *et al.*, 2010). Therefore, teaching research methodology to social workers frequently takes them beyond their 'comfort zone'.

Bourdieu's use of the notions of 'habitus' and 'field' helps us to understand why social workers may find it difficult to learn empirical research methods. Bourdieu uses the notion of habitus as "that which one has acquired, but which has become durably incorporated in the body in the form of permanent dispositions" (Bourdieu, 1993: 86). Dispositions are public, observable preferences which individuals are free to make but they become habitus by becoming embodied, or internalised, in one's consciousness. Dispositions are public declarations of where one's allegiances lie and can be spatially mapped in society as a web of interrelated spaces, or social fields. There is a two-way relationship between habitus and field. The field only exists by people with similar dispositions imbuing it with meaning, but through participating in the field people are able to incorporate new knowledge into their habitus.

As social workers are not trained to routinely consider research evidence when making decisions in their daily practice (as in models of evidence-based practice), an



appreciation of research methodology is rarely part of their habitus. As the primary employer of statutory social workers in the UK, local authorities have become synonymous with the field of social work practice. However, they have some way to go to become 'learning organisations' (Maynard, 2010), which actively encourage and engage with the continuing professional development of their employees to develop the services they provide. This inhibits the ability of social work practitioners to routinely read, appraise and implement research in their practice (Morago, 2010; Pope *et al.*, 2011).

The discourse of evidence-based practice has itself deterred social workers from enhancing their understanding of research methods. It is perceived as being associated with medicine and not applicable to social work, although it appears to be equally problematic for some doctors (Straus and McAlister, 2000). A common critique is that the application of evidence-based practice to social work can potentially entrap practitioners within a mechanistic form of technical rationality (Webb, 2001). Critics argue that practitioners' judgement is circumscribed, their expertise is not required and service users' values are ignored (Webb, 2001). While counter-arguments suggest that this critique is a misunderstanding of the paradigm (Gibbs and Gambrill, 2002), it remains a prevalent perspective.

Social workers' understanding of empirical research methodology is crucial to the successful integration of research into practice (Mullen *et al.*, 2008). Proponents of evidence-based practice (or 'evidence-informed practice' as some social workers prefer (Nevo and Slonim-Nevo, 2011)) argue that practitioners require an ability to understand and appraise the quality of research in order to make a judgement about its usefulness for their practice (Gambrill, 1999; Mullen *et al.*, 2008; Sheldon and

Chilvers, 2000). This critically appraised research evidence is considered alongside the values of the person or people they are working with, the social worker's own expertise and the policies which guide their agency's practice, to enable them to make the best possible decisions about how to intervene in the situations they are confronted with (Webber, 2011).

A further potential barrier to the effective learning of research methods by experienced social workers is their tacit knowledge. Tacit knowledge lies just beneath the surface of professional practice and is often referred to as 'practice wisdom' in social work (Sheppard, 1995). Tacit knowledge is acquired through experience of practice, but it is not written down, seldom made explicit and people are often unaware that they have it (Polanyi, 1958). It accounts for the automatic way in which decisions are made, frequently represented as intuition in social work practice (Carew, 1987). Practitioners place a high value on their tacit knowledge (Martinez-Brawley and Zorita, 2007), though one study has found that it does not lead to improved outcomes for users of services (Enguádanos and Jamison, 2006). Practitioners may feel that their practice wisdom is being questioned if they are asked to consider research evidence to support their decision-making. This may create resistance and resentment towards learning more about research methodology.

### **Post-qualifying social work education in England**

Between 2007 and 2012 the post-qualifying framework in England progressively enhanced social work practice through accredited specialist, higher specialist and advanced programmes of study in higher education institutions (General Social Care Council, 2005). Programmes enabled practitioners to evidence their practice against

occupational standards and meet specialist requirements for working with different user groups. Post-qualifying programmes in mental health social work predominantly focused on training practitioners to undertake the Approved Mental Health Professional statutory functions under the Mental Health Act 1983. These programmes were often at higher specialist level and only a small proportion of practitioners went on to complete advanced level programmes (General Social Care Council, 2009), where they had the opportunity to undertake their own original research.

The author's post-qualifying advanced level mental health social work Masters programme provides an opportunity for experienced practitioners to train to become advanced practitioners. Each cohort comprises about 12-15 practitioners from all social work specialisms, including mental health, children and families, and adult services. Students comprise an eclectic mix of practitioners who typically have between three to ten years of post-qualifying experience. Some are attracted by the prospect of undertaking research; others are attracted by the programme's advanced practice teaching; but feedback suggests that the programme's synergy of social work research and practice supports the development of confident and competent practitioners. Although most come from the region the programme is located in, several travel from other parts of the UK to attend. Practitioners use one day a week study leave over two years to complete the programme on a part-time basis.

The first year is comprised of research methods and critical appraisal skills teaching and tutorial support to develop a research proposal. There is also an advanced practice module which engages students in reflections on their practice in the context of multiple theoretical and practice paradigms throughout the first year. The second year

is dedicated to students undertaking a piece of original practitioner research within their agency.

Since the closure of the General Social Care Council in 2012, post-qualifying training is endorsed by the College of Social Work and is provided by employers, training agencies and higher education institutions.

### **A model of advanced practice teaching**

The model of advanced practice teaching developed on the author's postgraduate programme attempts to surface tacit knowledge (Nathan, 2002, 2010). Social workers' professional practice at the start of advanced post-qualifying training is predicated on a 'knowing-in-action' and, often, a 'reflection-in-action' (Schon, 1987). 'Knowing-in-action' refers to a social worker's ability to respond spontaneously to the challenges they are faced with, such as skilfully talking down an angry service user or carer, for example. This refers to 'in the moment' skills which are implicit in their social work armoury. Further, 'reflection-in-action' is developed through first hand practice experience and is a form of professional artistry, which also enables a practitioner to think on their feet. Reflective practitioners are those who are able to reflect on, and articulate, their reflection-in-action making their tacit knowledge explicit (Schon, 1987).

The articulation of tacit knowledge is achieved by practitioners on our programme bringing audio recordings of their social work practice (with the consent of those involved) to a case consultation group. Facilitated by an experienced practitioner, members of the group support one another to identify and articulate the knowledge

which underpins their routine practice. This process is essential to developing evidence-based practice in social work, which favours explicit knowledge that is clearly articulated and shared between practitioners and with users of the service (Webber, 2011).

A reflective practitioner becomes an advanced practitioner when they can demonstrate an ability to create new forms of social work knowledge through reflecting on their own epistemology of practice and undertaking original practice-based research. In our experience advanced practitioners are capable of undertaking high-quality empirical research which makes a valuable contribution to the social work evidence base (e.g. Bookle and Webber, 2011; Dutt and Webber, 2010; Furminger and Webber, 2009; Kingsford and Webber, 2010; Slack and Webber, 2008). Therefore, an advanced practitioner is defined as someone “who has an explicit and articulated knowledge that is theory-driven and research based and who can create new forms of social work knowledge that inform and shape policies and practice” (Nathan, 2002: p. 77).

### **Utilising prior knowledge and transforming knowledge structures**

Concept mapping is another technique for surfacing tacit knowledge (Kinchin *et al.*, 2008a). It is a graphical tool whereby ideas are written in boxes and linked with arrows annotated with explanatory labels (Novak, 1998). Concept mapping methodologies permit students and educators to share knowledge structures and to make explicit any variances in their epistemological perspectives, which may act as barriers to both learning and teaching. This is particularly relevant for experienced social workers learning research methods who may favour their tacit knowledge over empirically derived knowledge from different research paradigms.

Understanding practitioners' prior knowledge structures about the role of research methodology in social work practice through concept mapping can assist educators to more effectively engage with their students' learning. Appreciating where practitioners are starting from in their learning journey helps educators to develop appropriate learning materials and experiences. Our previous research with experienced social workers suggests that the quality of their learning is influenced more by their prior knowledge of empirical research methods than by the teaching modality used to deliver it (Webber *et al.*, 2010). Although practitioners demonstrated an ability to learn about research methodology, we found that the structure of their knowledge largely stayed the same before and after the research methods module was delivered. In particular, we found that they struggled to integrate their knowledge of research methods into their social work practice.

Integrating new knowledge with what practitioners bring to the classroom may help to avoid students adopting surface learning strategies, which can result in 'non-learning' (Kinchin *et al.*, 2008b), and may assist practitioners to embed new learning into their practice more effectively. Ausubel's (1963) theory of assimilative learning is potentially useful in this context. This refers to a process where new information is related to a relevant existing aspect of a person's knowledge structure. It contrasts meaningful learning with rote learning. The latter could be equated with surface learning which would mean that research methods teaching could be, at best, memorised for an examination. In contrast, meaningful learning refers to an integration of research methods teaching into social work practice. Meaningful learning requires an articulation of prior knowledge, the development of meaningful

learning materials by the educator and the practitioner being motivated to learn and integrate their learning into their practice.

A successful integration of research methods teaching into social work practice should result in the development of research mindedness. However, this may require a transformation of knowledge structures. Through his theory of the pedagogic device, Bernstein (1990, 2001) modelled how change could be instigated in the ordering and disordering principles of the pedagogising of knowledge. He suggested that the pedagogic device provides rules for reformulating discourses and transforming knowledge. Firstly, distributive rules regulate power relationships between social groups by distributing different forms of knowledge. Recontextualising rules are derived from distributive rules and regulate the formation of specific pedagogic discourse. Through recontextualization a discourse is transformed into a pedagogic discourse. Finally, evaluative rules define what counts as valid curricula content and appropriate texts.

The production of new knowledge, which in this instance is empirical research of relevance to social work practice, mainly occurs in universities away from the location of practice. Authors of social work curricula recontextualise this knowledge for social work practice, thereby equipping students with the skills to appraise empirical research and integrate relevant findings into their social work practice. The reproduction of new knowledge acquired from research methods teaching can be represented by practitioners adopting empiricism as a practice paradigm.

Popper (1959) maintained that the mission of science is to disprove hypotheses. Translated to social work practice, this requires practitioners to be aware of evidence

that runs counter to the theoretical assumptions on which they are basing their decisions and actions (Munro, 2002). A study of social workers found that they tended to use confirmatory search strategies when finding information about cases, but when they were asked to justify their use of information they adopted less biased strategies and were more open to contradictory information (Osmo and Rosen, 2002). This suggests that practitioners can use deductive as well as inductive methods of acquiring information to inform their practice, illustrating how the pedagogic device can transform knowledge structures.

### **Towards a pedagogy of advanced practice**

Problem-based learning which challenges practitioners to consider their use of information in practice, in combination with didactic teaching, may be a more effective way to learn about research methods and integrate it into social work practice. A US study has found that this approach appears to promote the meaningful learning of research methodology (Parrish and Rubin, 2011). Modelling processes of evidence-based practice in the classroom – posing an answerable question; searching for and appraising evidence; integrating critical appraisal with professional expertise and service user's values; evaluating practice decisions – appears to effectively increase students' knowledge of, and engagement with, evidence based practice. Teaching the process of solving problems enables students to acquire the skills necessary to search for, appraise and apply research in practice (Gibbs and Gambrill, 2002). However, more research is needed to explore which approaches for the teaching of evidence-based practice best enable practitioners to develop research mindedness and integrate this new learning into their practice (Mullen *et al.*, 2008).



Reflecting back on Epstein's (1987) 'survival techniques' for the teaching of research methods, it is possible to argue that many are still relevant 25 years after they were first written: start where the practitioners are; let the practitioners set the pace; link assignments to practitioners' work; respect practitioners and their innate desire to learn; demystify research concepts but do not trash them; teach statistics from the standpoint of the practitioner; and defuse tension with humour. Whilst it is not possible to claim expertise in all of these pedagogic methods, we have found that when they are used they support students' learning both in the classroom and using online learning materials. Evaluations of research methods (Webber *et al.*, 2010) and research protocol modules (Webber and Currin Salter, 2011) have noted students' increased confidence in research methodology. Further, the research of Masters students published in peer-reviewed journals provides evidence of their capabilities as practitioner researchers (e.g. Bookle and Webber, 2011; Dutt and Webber, 2010; Furminger and Webber, 2009; Kingsford and Webber, 2010; Slack and Webber, 2008). However, there is still some way for us to be confident that practitioners are consistently able to transform their knowledge structures so that research findings play an important role in their day to day social work practice.

Good practitioner research suggests that the 'circle of resistance' (Orme and Powell, 2008) to developing research capacity can be broken in the context of advanced-level post-qualifying programmes. Anecdotal evidence from a local authority which sponsors two practitioners on the author's programme each year suggests that this may be the case: community mental health teams with graduates of the programme in leadership positions appear significantly more willing to engage in research projects than those with none. Further anecdotal evidence suggests that graduates of the programme become more confident in engaging with the dominant discourses of

clinical psychology and psychiatry. However, further evaluations are required to evidence this.

## **Conclusion**

We argue that mental health social workers need to critically engage with the professions of clinical psychology and psychiatry to develop as advanced practitioners and to help ensure the continuing presence of social work in UK mental health services. This requires learning about research methods and engaging with the discourse of evidence-based practice. We have drawn upon learning theory to explore possible reasons why this is so problematic for many practitioners and have made some tentative suggestions about how the learning and teaching experience could be improved. There is some early evidence that mental health social workers can become advanced reflective practitioners and make a meaningful contribution to the evidence base for mental health practice, but there is a long way to go to challenge the hegemony of the dominant professional groups in mental health services.

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