Improving social policy and practice: knowledge matters

Action is needed beyond health care to improve life expectancy and health. Health for all is only possible through the provision of jobs, education, crime prevention, housing, and strong social-welfare systems. And health gains are the added benefit; improved social policies and services will first and foremost create better opportunities for the individual, and bring security and prosperity to the community. One of many illustrations is the dramatic difference in living conditions and health according to educational level, whether the outcome is maternal deaths in Bangladesh or diabetes-related deaths in the USA.

Social policy has always been important, but never more so than now: there is every reason to fear that the current recession will affect health negatively in a more profound manner than anything doctors can hope to prevent or repair. It is thus reassuring that social policy has moved up the agenda in many countries with renewed commitments to maintaining or increasing funding to health, education, and social welfare. A world in economic crisis is scrambling to retain and even improve its social structure. However, social change does not come easily and equity can be an elusive goal; societal structures are deeply rooted and behavioural change can be difficult to inspire.

The potential for doing more harm than good by intervening in peoples’ lives is also real. Exposing juvenile offenders to prison conditions and adult inmates who warn them of the consequences of continued criminal behaviour, for example, have intuitive appeal and are widely implemented. Whilst the initial findings from observational studies were positive, controlled studies revealed that juveniles in these programmes were more likely to reoffend, not less.

Thus evidence-informed action is needed in all areas of social policy. Good intentions, strong opinions, endless reorganisations, and millions of dollars are not enough to bring about a safe childhood, equal opportunities, good education, less crime, more jobs, social security, and dignified care of the elderly. For such evidence to be useful, however, it must answer important questions for policy and practice in a trustworthy and easily accessible way.

The Campbell Collaboration aims to establish a global library of relevant and reliable systematic reviews on effects of programmes and interventions in education, crime and justice, social welfare, and other social-policy domains such as development and disability. Such a library will inform decision making, reveal knowledge gaps, and create a stronger focus on what constitutes useful evidence among policy makers, funders, and researchers. This international network is picking up speed. It is based on cooperation among researchers from various backgrounds assisted by a small secretariat now hosted by the Norwegian Knowledge Centre for the Health Services. Work mainly takes place via five coordinating groups (social welfare, crime and justice, education, methods, users) and a jointly registered group with the Cochrane Collaboration (developmental, psychosocial, and learning problems). Key factors that contribute to the enthusiasm in this network are collaboration, explicit standards, methodological assistance, thorough peer-review, open-access publishing, and a lean, efficient, and reasonably funded organisational structure. Annual colloquiums provide a meeting place for policy makers, practitioners, and researchers.

Organising what is known on social and educational interventions is challenging for many reasons. Early child development, education, environment, employment, crime prevention, and social protection across the lifespan—wherever we look there is a need for improvements in services and policy. However, across the board there is a worrying lack of empirical research, too few experimental
trials, a lot of disagreement about the role of research and, compared with clinical medicine, less integration of research and practice. Knowledge as a resource for improvements in social policy and practice is grossly underused.

The challenge, therefore, is not only to gather what there is of evaluative research on education, child protection, crime prevention, and other fields, but also even more to bring about a shift in what social science, social scientists, practitioners, and policy makers bring to the table to inform decisions about what to do and what to refrain from doing. Research is an essential tool to steer improvement efforts where they are most needed, to evaluate what progress we make, and to develop new ideas on the basis of accumulative learning from failures and successes. Policy makers and researchers must address this particular challenge in a direct and practical way. Otherwise we will never learn if change was for better or for worse.

To improve the current state of affairs we first and foremost need to incorporate evaluative research into the processes for changing, adapting, improving, organising, or otherwise seeking quality in the services we provide. Hence applied research needs to be prioritised and to become relevant, valid, and part of how services are designed. We need, in short, to seriously start developing a learning society. For that to happen, several key actors need to respond.

Professions such as the police, teachers, social workers, and public health practitioners need to move science from the outside to the core of their mission, to become an organic part of how we all work. Scientists must answer questions that are crucial to how the professions and services function, and to their results. Those who undertake and organise research must implement better standards in evaluation and in training researchers in these methods. Social science speaks directly to how we can improve society; that is, through changing how people choose to behave and to relate to one another. It must also speak to how we can evaluate attempts to improve the world and thus become relevant, pertinent, and potent. Epidemiology, now lost in an endless trail of papers on questionable associations derived from observational studies, must become yet again a discipline that supports improvement in public health. Governments need to develop an experimental approach to social reform, and politicians, chief executive officers, and research councils must ask for and fund more rigorous evaluations as part of an integrated approach to continuous quality improvement.

As a result we should see many more primary studies of an empirical nature that address the many knowledge gaps and hopefully evaluate bold new initiatives. The Government of Mexico passed legislation in 2003 which required that impact evaluations be done for various public programmes, explicitly recognising the value of learning what works and why as a guide for future budget decisions. The present focus on comparative research in the USA as part of sweeping reforms also sets an important example.

To know what is known and not known, world libraries of summarised evidence must be built and maintained. The Cochrane and Campbell Collaborations are now established well-functioning production systems for high-quality systematic reviews. There is a need to concentrate on those two systems rather than building competing systems, smaller or larger. Any local knowledge broker, clearing house, or technology assessment office needs to ask themselves how they are, in addition to serving their own local context, contributing to this global build-up of knowledge.

The remarkable success of the Cochrane Collaboration can easily hide the fact that such organisations are vulnerable and in need of better support systems. We need more systematic reviewers, review quality needs to be improved, and updating needs to be addressed to ensure that reviews remain relevant for policy questions. Governments and other funders must support infrastructure, review groups, training, and dissemination. All of us need to participate in creating new and improved opportunities for direct dialogue between researchers, end users, and policy makers.

Knowledge matters. It informs decisions about individuals, services, and society if it is relevant, valid, synthesised, readable, delivered, and used wisely. We can develop a learning society based on a belief in the possibility of change, innovation, and an ethical obligation to investigate when the balance between good and harm is unknown. For this to happen we need to do pragmatic and valid research which aims to tackle important problems, to build up global libraries of systematic reviews of such attempts, to create user-friendly versions of guidance either on knowledge or knowledge gaps, and to engender support and engagement among researchers, policy makers, and practitioners.
I co-chair the Steering Group of the Campbell Collaboration.


