

Building a robust evidence base through research/practice collaboration

Lessons from Promising Practice Profiles

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Background

In 2004–08 the Social Policy Research Centre at the University of NSW and the Australian Institute of Family Studies (AIFS) were involved in the evaluation of the former Stronger Families and Communities Strategy. The strategy sought to improve outcomes for young children and families in disadvantaged communities.

One of the challenges in the field of service delivery to children and families in disadvantaged communities is the lack of a robust, geographically specific (i.e., Australian-based) evidence base regarding what works for improving outcomes for this sector of the population.

The evaluation of this national strategy was an important step in building this evidence base.

The concentration of disadvantage in a particular community (commonly referred to as “area-based disadvantage”) has the potential to be especially harmful to young children because it can negatively affect multiple spheres of their development (see Edwards & Bromfield, 2009; Homel & Burns, 1989; Leventhal & Brooks-Gunn, 2000; McCulloch & Joshi, 2001).

The development of an evidence base that demonstrates how to effectively alleviate these harmful effects on young children and families is critical to improving their health and wellbeing.

In addition to traditional evaluation methods, the consortium sought to develop a method that focused upon practice and answered the questions that large-scale quantitative studies cannot; that is, how and why an intervention works and what the implementation of the intervention looks like.

What is a Promising Practice Profile?

A Promising Practice Profile is a comprehensive description of a specific practice used by a service/agency delivering services to children and/or families that has been deemed, via a semi-blind validation process, to be “promising”.

In order to be deemed “promising” the profile author(s) needs to demonstrate that the practice is effective.

The profiles provide details of the key ingredients or critical elements that made that practice work.

Profiles are typically authored by someone directly involved in the implementation of that practice (e.g., a program manager) or someone who is closely involved with the evaluation of a program (e.g., an external evaluator).

The Communities and Families Clearinghouse Australia (CAFCA) at AIFS has coordinated five rounds of the Promising Practice Profile process since 2005. A total of 86 profiles were submitted during that period and 62 have been validated as being “promising”.

What is the Promising Practice Profile “method”?

The method consists of 5 key steps:

- establishment phase: the establishment of the reference group and the development of criteria to assess profiles;
- call for proposals;
- review of proposals and support from researchers where required to revise proposals;
- validation, conducted by a peer review panel; and
- publication.

To access CAFCA Promising Practice Profiles go to:
<www.aifs.gov.au/cafca/ppp/ppp.html>.

Aim

This poster outlines the key strengths and challenges of the Promising Practice Profile method. These strengths and challenges highlight some of the issues associated with the development of an evidence base that incorporates practice wisdom and research evidence.

Strengths

The method encouraged collaboration between research and practice cultures; for example:

- there was consultation and collaboration to develop a list of assessment criteria that was acceptable to both “cultures”;
- AIFS researchers assisted profile authors with literature searches and identifying evidence; and
- writing up the profile often involved intensive collaboration between AIFS and the profile author(s).

The method has the potential to contribute to the development of the research and evaluation skills of professionals within practice culture. This is beneficial because it can enhance:

- current service delivery (by encouraging reflexive practice); and
- the sustainability of a program (by developing the skills of practice professionals to speak the “language” of research for future funding submissions).

Challenges

The method can be time-consuming and labor-intensive for both practice and research staff because both need to undergo a process of “cultural adjustment”:

- profile authors (i.e., practice-based professionals) needed to adjust to research “culture” (e.g., using research evidence to justify practice; thinking and writing about practice rather than just “doing” it); and
- AIFS researchers needed to adjust to practice “culture” (e.g., understanding the realities of service provision).

Research staff assisting in the drafting process reported a sense of “role conflict”; that is, not knowing when to step in and amend a profile and when to step back and honour the unique voice of the practitioner.

Very few profiles were based upon evidence that compared participants to a control group and, in the eyes of some researchers, this would mean that their claims of effectiveness are invalid. The capacity of services to conduct control group trials was extremely limited.

Conclusions

The Promising Practice Profile process did not produce “gold standard” evidence of effectiveness. However, the benefits of the process have been:

In a field with a limited evidence base, these profiles provide a critical insight into “what works” when planning and delivering services to children and families in disadvantaged Australian communities.

Profile authors who work in a practice setting have developed their skills in conducting research and evaluation. This may contribute to the future development of the evidence base (i.e., through further evaluation and research findings).

The Promising Practice Profile database provides evidence that is relevant and useful to practitioners (e.g., describes how and why an intervention works and what it looks like) and thereby may contribute to improved practice among other service providers.

References

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