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Social Constructionism and Social Care: Theoretically Informed Review of the Literature on Evidence Informed Practice Within the Professionalisation of Social Care Professionals Who Work with Children in Ireland

Susan Flynn 

Department of Social Sciences, School of Business and Humanities, Institute of Technology, Sligo, Ireland

ABSTRACT

The professionalisation of social care practice in Ireland, after a period of dormancy, has experienced rapid advancement toward statutory regulation and reform. Yet, the limited literature available in Ireland on the subject matter, almost exclusively predates these changes. This paper presents a theoretically informed commentary on the literature related to Evidence-Informed Practice (EIP) and professionalisation of social care professionals who work with children in Ireland. A key proposition of this paper is that rather than being distinct and autonomous, EIP may be most constructively understood as an integrated feature of professionalisation in social care. This is illustrated within themes identified in the body of literature related to EIP. Overall, the literature review in this paper is explicitly subjective, rather than systematic, and declared as operating broadly from a Social Constructionist orientation. The implicit Social Constructionist approach declared from the outset, is later overtly applied through a theoretical framework derived from Burr ([2015]. *Social constructionism* (3rd ed.). London: Routledge) and Gergin ([1985]. The social constructionist movement in modern psychology. *The American Psychologist*, 40(3), 266–275), to inform discussion on EIP within professionalisation of social care professionals. The intention is, that discussion will generate learning for practitioners seeking to improve practice with children in the field, by addressing some of the significant challenges and practice concerns identified in the former review. It is proposed that, because of its nature as a historically and culturally unique moment in time, intensifying professionalisation of social care in Ireland provides a valuable opportunity for practitioners seeking to improve practice with children. This opportunity lies in the potential for practitioners to use the process of professionalisation as a platform to compel higher standards for social care in Ireland, including better standards of EIP, through such measures as lobbying and advocacy work.

KEYWORDS

Professionalisation; evidence-informed practice

Introduction

This paper presents an overview of the literature on professionalisation and Evidence-Informed Practice (EIP) in social care work with children in Ireland. Evidence-Based

Practice (EBP) as a counterpart concept to EIP is incorporated within this. To facilitate this overview, clear definitions will be provided for the pertinent concepts of professionalisation, EIP and EBP. Throughout this paper, it will be possible to trace one central and sustaining argument. More specifically, the argument is that as social care practice with children moves toward the position of a statutorily registered profession, alongside this, practitioners will be expected to work in more evidence-informed ways. In making this argument, the paper therefore examines processes of professionalisation, and drives towards EIP and EBP, in combination rather than separately.

In conducting this review, literature was sourced through manual searches of electronic databases and library archives predominantly. Within this, the purposive inclusion of some material that was not peer-reviewed sought to prevent the omission of “grey literature”. To avoid “file-drawer” problem (a phenomenon where material with negative results is not published and therefore omitted inappropriately) the author also conducted consultations with academic peers to ascertain if there were any non-published materials that met appropriate quality standards, that should also be included (Bryman, 2016). After searches, however, no such material was evident.

Within the review, a Social Constructionist lens is declared from the outset, and following a subjective commentary on the literature, is explicitly applied through a theoretical framework derived from Burr (2015) and Gergin (1985). This assists with achieving a less passive and more critical epistemological line within the discussion that follows. The purpose of the discussion is to generate learning for practitioners seeking to improve practice among social care professionals working with children by addressing some of the significant challenges and concerns identified in the review of the literature.

Rationale for the study

The review is timely and necessary for several reasons. Firstly, social care practice in Ireland is undergoing a major period of reform (Byrne, 2016; McSweeney, Smith, & Williams, 2016). This has included the establishment of the Social Care Workers Registration Board within CORU¹ in 2015; draft Code of Professional Conduct and Ethics for social care workers in 2016; Standards of Proficiency for Social Care Workers in 2017 (2017a); and Criteria for Education and Training Programmes in 2017 (2017b) (Power & Darcy, 2017). The cornerstone development of the Health and Social Care Professionals Act 2005, which included social care workers as a profession to undergo statutory registration by CORU, was centrally influential in provoking the changes (Byrne, 2016; Farrelly & O'Doherty, 2011; Joint Committee on Social Care Professionals, 2002; McSweeney et al., 2016; Power & Darcy, 2017; Williams & Lalor, 2001). To date the limited literature available in Ireland on social care practice almost exclusively predates these changes establishing a requirement for an updated review of knowledge. In addition to this, the Irish case of social care with children may further be of international interest as a site of inquiry into social care professions undergoing change. Accordingly, much of the concluding observations of this paper are generalisable beyond the Irish context.

Secondly, the paper seeks to conform to, and address the need for less generic literature on social care practice. Stevens, Liabo, and Roberts (2007) articulate how different countries construct different knowledge and research needs for social care practitioners, linked to such features as variance in population socio-demographics. Added to this are

altering knowledge requirements dependent upon which population group is practiced with (Stevens et al., 2007). This paper focuses on social care work that is undertaken with children. The focus on children is chosen due to the field's particularly developed policy and legislative context in Ireland that, in part, places an emphasis on the use of evidence (Department of Health and Children, 2004; HIQA, 2012). In adopting this focus, the intention is to provide a consistent population group throughout the paper in the instances where insights are related to practice settings. The purpose of this strategy is to prevent insights from being too broad in nature. Notwithstanding this, much of the focus of the paper will remain relevant to all forms of social care.

Considering further the greater specificity required in social care practice literature, the Irish context also contains a multiplicity of job titles regarded to varying degrees as constituting social care practice (Hutchinson, 2017; Power & Darcy, 2017; Williams & Lalor, 2001). Among these job titles include, "project worker, outreach worker, aftercare worker, family support worker, support worker, care worker, night shift supervisor, locum worker" and with regard to the specific focus on children in this paper, "community childcare worker" (Byrne, 2016, p. 14). This circumstance occurs in lieu of protection and refinement of the title which will be acquired through statutory registration (Byrne, 2016). To compound matters, much of the literature on increased promotion of EBP and EIP appeals to the cognate but different discipline of social work (Byrne, 2016; Christ et al., 2011; Gambrill, 2007; Gibbs, 2003; Gibbs & Gambrill, 2002; Gray, Joy, Plath, & Webb, 2013). In part, the circumstance derives from a potentially more developed discipline-specific knowledge base on EBP and EIP within social work. This is illustrated, for example, through the increased instance of subject-specific fora such as "Journal of Evidenced Based Social Work," that fall within specialist evidence-based journals emergent in health and social care since the 1990s (Moule & Hek, 2011). Despite commonalities, there is however a greater distinction between social work and social care as occupations in Ireland who work with children amongst other population groups (Lalor & Share, 2013; O'Connor & Murphy, 2006). Such distinction can lead to misconceptions when literature is covertly and prevalently applied from social work to social care (see Mosson, Hasson, Wallen, & Von Thiele Schwarz, 2017). Taking account of this and the overall lack of clarity characterising the field, this paper seeks to refine the subject matter of professionalisation and EIP to the specific case of social care practitioners who work with children in Ireland. In doing so it also makes a unique contribution to present knowledge on this matter.

Finally, existing literature indicates that there are serious and specific challenges pertaining to professionalisation and EIP for social care practitioners to overcome in their work with children. For example, inadequate training and education; practitioner awareness; fear and resistance; ambiguity about job roles and practitioner numbers; and related considerations such as the impact upon children and service users, public confidence and staff morale (Finnerty, 2012; Power & Darcy, 2017; Williams & Lalor, 2001). In this context, it is arguably conclusive that there are challenges and major changes afoot (Byrne, 2016; Finnerty, 2012; McSweeney et al., 2016; Power & Darcy, 2017). Therefore, I propose that an up-to-date synopsis of literature followed by the critical application of a social constructionist lens may assist practitioners to think through this major transition period. Here the central and sustaining argument, alluded to earlier, is that social care practitioners will be increasingly expected to work in more evidence-informed ways and that this will be related to, rather than distinct from, processes of professionalisation.

Review of EIP as an aspect of professionalisation for social care in Ireland

Evidence-informed practice versus evidence-based practice

As a starting point, “evidence” may be defined as “an argument or assertion backed by information” (Cairney, 2016, p. 3). From here, the definition of the concept of EBP, according to Aveyard and Sharp (2009, p. 4), is “practice that is supported by a clear, up-to-date rationale, taking into account the patient/client’s preferences and using your own judgement”. Originally, both EBP and EIP were drawn from medicine into social professions (Austin & Claassen, 2008; Farrelly, 2013; Gibbs & Gambrill, 2002; Mullen, Bledsoe, & Bellamy, 2008; Nevo & Slonim-Nevo, 2011). In this context, both concepts were often defined through inheritance as, “the conscientious, explicit, and judicious use of current best evidence in making decisions about the care of” patients, and later within social care, children and service users (Sackett, Rosenberg, Gray, Haynes, & Richardson, 1996, p. 2). To date, this definition regularly features in the literature for social professions including social care practice in Ireland with children (Farrelly, 2013; Gibbs & Gambrill, 2002). The role of evidence in social care is, however, both contestable and contested. As a starting point, terminology should be established, and as it stands the term Evidence-Informed Practice (EIP) has garnered preference above the formerly more prevalent reference to Evidence-Based Practice (EBP) in the broader literature. This reflects some overall decentralisation of the role of evidence as a source of knowledge for practice (Farrelly, 2013; Nevo & Slonim-Nevo, 2011). EIP as a concept now features regularly in Irish social care literature and policy on children’s services (Buckley & Whelan, 2009). In working with children, both concepts are centrally concerned with using evidence in making decisions in practice (Nevo & Slonim-Nevo, 2011).

Before moving to examine these concepts in more detail, it is useful to first consider the differences between the two approaches in work with children. There are a number of strengths to EIP that evidence-based ways of working do not have. Strengths of EIP include that practitioners can take account of evidence in making decisions within their practice with children and yet are not as constrained by evidence within those decisions, as would be the case with EBP. In this way, EIP allows flexibility for practitioners to account for other important factors, such as the child’s voice, and the limitations of using scientific evidence in complex social situations with children. Evidence therefore *informs* the decision made in practice but does not need to be the *basis* of making that decision (Nevo & Slonim-Nevo, 2011). Notwithstanding such benefits, EIP also has some potential weaknesses when compared to EBP. When decisions in social care work are only required to be informed by evidence, rather than based upon evidence, there is potentially more scope for the practitioner to impose their own agenda and bias, rather than making decisions based upon sound and reliable evidence within child care practice. In this way, EIP practice decisions may not always be as effective or justifiable as EBP decisions. Overall, it is clear that both approaches come with respective strengths and weaknesses. In this context, practitioners must carefully consider the particular context of their practice in selecting which approach to use (Aveyard & Sharp, 2009; Farrelly, 2013; Nevo & Slonim-Nevo, 2011). Moving forward, both terms of EBP and EIP will feature in accordance with their respective uptake in the material.

Across the literature it would seem that EIP often does not narrowly refer to scientific research findings but the application of ideologies and values, culture, literature, theory,

policy and guidance, practitioners skills and past experience, and service users input such as the voice of the child (Buckley & Whelan, 2009; Lewig, Arney, & Scott, 2006; Moule & Hek, 2011; Nevo & Slonim-Nevo, 2011; Walter, Nutley, Percy-Smith, McNeish, & Frost 2004; Research in Practice, 2006). Within this, some authors even consider there to be a need for research to take a minority position within these factors (Research in Practice, 2006). In addition, Austin and Claassen (2008, p. 2) assert that EBP incorporates, “the integration of the expertise of individual practitioners with the best available evidence within the context of values and expectations of clients.” The caveat for Glasby (2011), is that there may be several problems with refining the concept of EBP any further than this. Achieving exactness also poses the risk of adhering to only one epistemology and allocating status to certain types of knowledge above others. Within this intellectual ambience, numerous authors articulate the disputed and indistinct nature of the term “evidence” (Glasby, 2011; Moule & Hek, 2011; Walter et al., 2004; Research in Practice, 2006). Here practitioners “use of self”, expertise, the child’s voice and wishes, and professional discretion are central ordering principles within Irish Social Care Practice that inevitably, and to varying extents, influence the processes of EBP and EIP (Barratt & Cooke, 2001; CORU, 2017b; Kilkelly, 2017; Lalor & Share, 2013). In particular, the participation of children in decisions about their lives, including having their voices and opinions taken seriously, is of increasing importance in Ireland (Kilkelly, 2017).

Therefore, because EIP and EBP are concepts that were originally derived from medicine, there is a need to adapt the concepts for use in non-medical practice settings such as in social care practice with children (Farrelly, 2013). This is because taking evidenced-informed ways of working from medical settings, and applying them in social care practice settings, is an approach that is not without problems. According to Buckley and Whelan’s (2009, p. 10) review of Irish children’s services, increased utilisation of EBP in social care practice has, “led to some modifications in the way in which it is considered, and it has evolved to reflect the somewhat unscientific base from which social care practice operates” (Buckley & Whelan, 2009, p. 100).

EIP, EBP and social care with children

This supposedly “unscientific” or intuitive orientation of social care with children appears manifest in varied forms. Some Irish instructional texts on social care may offer limited exposure to issues of evidence and research, in favour of practice and reflective positionings (such as McCann, DeRoiste, & McHugh, 2009). Alternatively, authors may focus critically upon how evidence might be practically applied in social care practice and social care environments (Gray et al., 2013; Mullen, Shlonsky, Bledsoe, & Bellamy, 2005). EBP may be defined within the nature of the practical application of research methods (Aarons & Sommerfeld, 2012; Chamberlain et al., 2008). Alternatively, sources endorse the value for social care practitioners in aspiring to practice that is “research aware” or “research literate” in their work with children (Farrelly, 2013; Fisher, 2016; Moule & Hek, 2011, p. 2). Finally, some authors conceptualise EBP as though it were a process of decision-making (Austin & Claassen, 2008; Gray et al., 2013; Moule & Hek, 2011). To further explore the varied literature, three themes are focused upon in the following. These are (1) EIP as a feature of social care professionalisation in Ireland, (2) concerns and challenges to achieving EIP on the road to professionalisation, and (3) benefits of

EIP for professionalisation in children's social care in Ireland. The common thread that runs through all of these themes reflects the argument underpinning this paper. Namely, that social-care workers who work with children will be increasingly expected to work in more evidence-informed ways, and that this drive will be related to, rather than distinct from, processes of professionalisation.

EIP as a feature of social care professionalisation in Ireland

EIP in Ireland is compelled by and embedded within processes of professionalisation and regulation. To explore this further, this section will examine EIP as a feature of professionalisation. First, I will define the term "professionalisation". The concept of professionalisation features in a wide variety of literature such as from sociological and feminist perspectives (Griffin, Green, & Medhurst, 2005). It can be defined as the process by which an activity undergoes "legitimation as a profession" (Power & Darcy, 2017, p. 4). Acknowledging that the term "profession" is contested and that it is often not clear what separates a job from a profession, professionalisation ultimately entails social care work transforming into a "legitimate" profession (Griffin et al., 2005; Power & Darcy, 2017; Williams & Lalor, 2001). In the literature, this process seems to entail acquisition of legal protection of the professional title of "social care worker", the establishment of a statutory register for social care work, and the imposition of minimum standards of education, among other things (Byrne, 2016; Farrelly, 2013; Power & Darcy, 2017; Williams & Lalor, 2001). In order to work "professionally" in the context of children's services, Irish social care workers would have to achieve standards of proficiency established by CORU, and adhere to a professional code of conduct and ethics, or they could risk losing their entitlement to practice as a social care worker (Byrne, 2016). Social care workers will also need to understand the role of evidence in their work with children.

CORU Standards of Proficiency (2017b, p. 9) for Irish social care workers require that "principles" and "applications" of EIP and scientific inquiry are known by registrants. It elaborates that practitioners will "demonstrate skills in evidence-informed practice, including an understanding of competing theories, concepts and frameworks underpinning social care work and demonstrate an ability to apply the appropriate method in professional practice" (p. 9). In work with children, this might include theories of child development or understanding the implications of children's rights for practice (Kilkelly, 2017). Within this, ethical considerations may also interface with the use of EIP (Banks, 2004, 2007). The UK's Social Care Institute for Excellence, for example, makes prescriptions for the profession related to the need to conduct practice using evidence (Fisher, 2016). Furthermore, within CORU criterion for the education of social care practitioners in Ireland, it is concluded that "curriculum must be guided by evidence-informed professional knowledge" (2017a, p. 10). This would need to include more specialised knowledge on specific populations such as children (CORU, 2017a). It is perhaps clear, therefore, that both the education and practice of social care workers who work with children in Ireland must involve evidence-informed and evidence-based ways of working.

In the case example of practice with children, the Agenda for Children's Services and National Children's Strategy, for instance, promote an evidence-informed orientation (Minister for Children, 2007). Accordingly, Department of Health and Children policy states that practitioners should draw on evidence in their work, providing examples of

sources such as local statistical evidence (2004). Towards some final illustration, the Health Information and Quality Authority (HIQA) standards (2012) for children's services explicitly promote practice based upon "evidence." Paradoxically, however, despite drives to implement research evidence, existing evidence that verifies that social care policy and practice is expansively research based is lacking (Barnardo's, 2000). Rather, it is substantially evidenced that social care practice lacks application of research findings, including practice with children in particular (Barnados, 2000; Gambrill, 1999; Randall, Cowley, & Tomlinson, 2000; Sheldon & Chilvers, 2000; Stevens et al., 2007). Notwithstanding this, processes of registration and professionalisation will, however, directly impact on the education of professionals and their knowledge base (Griffin, Green, & Medhurst, 2005; O'Connor & Murphy, 2006). In terms of the most obvious and direct effect, in Ireland, only practitioners qualified to degree level, including completion of mandatory curriculum content on EIP, will now be able to practice using the title "Social Care Worker" (Byrne, 2016). Whilst Buckley and Whelan's assertion that work in social care children's services in Ireland "must be informed by sound evidence" (2009, p. 89) is perhaps now conclusive, in this milieu, Farrelly (2013, p. 151) confirms also the need to "unpack" the notion of EBP for Irish social care practitioners.

In this section, we have examined EIP as a feature of social care professionalisation in Ireland. Within this, an increasingly emergent theme has surrounded the nature of professionalisation, as entailing a requirement for practitioners to work in more evidence-informed ways. Here, it has also been illustrated that even beyond the case of professionalisation, evidence remains a requirement for practice, and yet, existing evidence to suggest that this requirement is being met, is ironically absent (Barnardo's, 2000). The relevance of this to professionalisation is central, as a shift toward increased evidence in practice can be considered both necessary and inevitable.

Concerns and challenges to achieving EIP on the road to professionalisation in social care practice with children in Ireland

The sustaining argument of this paper is that social care practitioners will be increasingly expected to work in more evidence-informed ways, and that rather than being a separate pressure, this constitutes an integrated feature of wider processes of professionalisation. There are many concerns and challenges surrounding EIP and EBP in Irish social care practice with children. Practitioners may lack research skills, or practical resources such as time (Barnardo's, 2000; Farrelly, 2013). Research funding can also be limited for social care enquiries (Marsh & Fisher, 2005). The culture of the profession including practitioner perspectives, or problems between it and the culture, skills and practices of the research community, may not sufficiently support research integration (Buckley & Whelan, 2009; Farrelly, 2013; Walter et al., 2004). Aarons and colleagues, for instance, establish that attitudes are an obstacle to EIP, within the development of their Evidence-Based Practice Attitude Scale (EBPAS) underpinned by research evidence to support the validity and reliability of the scale (Aarons, 2004, 2006; Aarons et al., 2010; Aarons, McDonald, Sheehan, & Walrath-Greene, 2007; Aarons & Sawitzky, 2006). Furthermore, positivist, quantitative, experimental design studies may not naturally translate into the complexity of social care practice with children, account for the individual needs of children, or practitioner skill sets (Farrelly, 2013; Moule & Hek, 2011; Staller, 2006).

Efforts to improve skill sets can be undermined by a lack of educational and professional standardisation in the industry. In Ireland, for instance, there are a multiplicity of job titles, used to varying degrees, in place of the designation of a social care practitioner in work with children (Hutchinson, 2017; Power & Darcy, 2017; Williams & Lalor, 2001). “Community childcare worker” (Byrne, 2016, p. 14), and “residential child care worker” are two such examples (Williams & Lalor, 2001). Allied professional literature, in this milieu, draws heavily on social work scholarship with associated benefits and challenges. Here, Buckley and Whelan (2009) identify Eileen Gambrill (2006) as an authority on EBP. As Gambrill (2006) explains, EBP utilises evidence rather than authority, “consensus, anecdotal experience or tradition” (p. 339) as its source of guiding information. Gibbs and Gambrill (2002, p. 452) describe describes the evidence-based professional as one who poses specific answerable questions, regarding decisions in their practice with children. The practitioner then seeks out evidence, applies it through action, and evaluates it (for instance, through questioning its validity). The process, as outlined here, would, however, appear to deploy specific skills, necessarily consolidated by a positive attitudinal orientation towards EIP in work with children, and as prior noted, this may be varyingly absent (Buckley & Whelan, 2009; Farrelly, 2013; Walter et al., 2004). In the broader literature, the process of EIP and EBP involves discerning what is the best evidence, whilst drawing on practice experience, and considering contextual factors (Buckley & Whelan, 2009; Mullen et al., 2008). Furthermore, this process can be broken down in simple and predictable steps. In many accounts, EBP in social care follows five steps. In sum, (1) one identifies a problem, (2) finds the best available evidence, (3) appraises the evidence for validity, (4) applies the evidence in the context of the child’s preferences, and finally, (5) evaluates (Moule & Hek, 2011, pp. 8–9; Nevo & Slonim-Nevo, 2011). Within this, the role of interpersonal dynamics of knowledge construction involving practitioners and children or service users in social care practice has been emphasised more by some authors than others (Barratt & Cooke, 2001; Davies, Nutley, & Walter, 2008; Nevo & Slonim-Nevo, 2011). These dynamics refer to, in varying degrees, aspects of evidence-informed work such as how much the process is influenced by the child, how much attention is given to the child’s voice, or how much power the individual practitioner has to conduct their work.

Yet despite the implicit and varied skills, dispositions and resources necessary to realise EIP in Irish social care with children; processes of professionalisation allied to accountability, compliance and increased regulation leave little doubt as to practitioner’s obligation to do so (McSweeney et al., 2016; Power & Darcy, 2017). Further, practitioners may feel a shift towards more professionalised practice is in their best interests. From an examination of research priorities for practitioners who work with children in social care in the UK, Stevens et al. (2007) demonstrate practitioner’s professed need for robust studies that address the effectiveness of interventions. The basis of the research, however, lay in the broad observation that in social care, as it stands, research is insufficiently relevant to practice (Stevens et al., 2007).

Benefits of EIP for professionalisation in children’s social care in Ireland

By now, perhaps a sense of EIP as an embedded feature of professionalisation, in the context of increased accountability and external regulation of social care with children

in Ireland, has been impressed (Byrne, 2016; McSweeney et al., 2016). In the following, the benefits of EIP for the professionalisation of children's social care in Ireland will be considered. The inseparable nature of EIP and EBP from discourses and practices of professionalisation of social care for children in Ireland is perhaps evident from the perceptible benefits of EIP and EBP. EBP approach in social care seeks to improve effectiveness and accountability through best-known evidence (Marsh & Fisher, 2005; Mosson et al., 2017; Nevo & Slonim-Nevo, 2011). This is sometimes framed as an ethical imperative (Mosson et al., 2017). EBP has also been purported to improve service delivery outcomes and improve practitioner and service user relationships (Marsh & Fisher, 2005; Mosson et al., 2017; Moule & Hek, 2011; Nevo & Slonim-Nevo, 2011). Marsh and Fisher (2005) add that safeguarding of service users; promotion of their life chances; challenges to assumptions about the social care profession and more informed service user and public opinions are direct benefits. Here it is clear that working in a more evidence-informed way also achieves many of the goals that processes of professionalisation are geared toward, such as improving the image and value of social care work, and improving children's lives. Furthermore, Farrelly (2013, p. 151) identifies Williams's (2000) work as relevant for Irish practitioners; namely, his account of the benefits of EBP for social care practitioners within a Seminar Paper delivered in Wales. Benefits outlined include more effective social care interventions; improved resource efficiency; improved analytical practice; raising of the status of social care professionals, and improved public confidence in social care (Farrelly, 2013, p. 151). Resources for practitioners are also available in order to achieve these benefits. Byrne (2009), for instance, describes social care practice in children's residential care as entailing a bio-psycho-social model. Differences between Irish social care and medical professions allied to such models, for Farrelly (2013), do not have to prevent practitioners from achieving the benefits of EIP and EBP. This is because of the establishment of the Campbell Collaboration that offers a necessary alternative to the medically synonymous Cochrane Collaboration. The latter facilitates evidence-based interventions in health, whilst the former focuses upon social, educational and behavioural domains including specific resources for work with children (Farrelly, 2013). With the support of the Campbell Collaboration, social care practitioners can maximise the benefits of using evidence to inform their work.

Practitioners should remain cautious, nonetheless, in seeking to maximise the benefits of EBP and EIP, due to the need to inform their work in other ways, as ultimately EBP and EIP are only one knowledge strategy for Irish practitioners. In the literature surrounding the Irish context, Pawson and colleagues' research commissioned by the Social Care Institute for Excellence (SCIE) from the UK is among the most notable contributions to mapping the knowledge base of social care practice against a set of generic standards (Pawson, Boaz, Grayson, Long, & Branes, 2003). This work is tested and progressed in Long, Grayson, and Boaz (2006) and integrated into Irish social care practice literature in Farrelly (2013). According to Pawson et al. (2003) sources of knowledge in social care may be divided into five generic categories, only one of which is research knowledge. Other sources pertain to knowledge gathered from children/service users; practice generated knowledge; knowledge arising from organisational contexts, and from the wider policy context. The policy context surrounding practice with children, incidentally, is also infiltrated by its own evidence-informed initiatives in Ireland (Mulkeen, 2016). Overall, it remains the case that EBP and EIP, despite clear benefits outlined in this

section, should not consider the only knowledge strategy for social care practitioners who work with children in Ireland.

Looking to the future: strategies for social care practice with children

The major period of reform underway in social care practice should be viewed as an opportunity to compel heightened standards of social care practice for children. With this in mind, throughout this paper, a central argument has been progressed. Here the case has been made that as social care practice with children moves toward the position of a statutorily registered profession, alongside this, practitioners will inevitably be expected to work in more evidence-informed ways. It is therefore most conducive to understanding to combine, rather than separate, processes of professionalisation and drives towards evidence-informed practice.

The proposition within the following is that a critical and explicit application of a social constructionist lens offers a specific theoretical orientation (Burr, 2015), that in epistemological terms, is aligned to processes of professionalisation of social care in Ireland. The argument is, that any professionalisation of a social occupation is by its very nature socially constructed, dynamic, malleable and politicised (Payne, 2014). In this context, the post-modernist basis of social constructionism seems particularly aligned with such complexity (Burr, 2015). This is not to dismiss practical features of professionalisation in Ireland which appear to satisfy clear modernist imperatives. These characteristics, perhaps conclusively, impose a quasi-modernist order through increased proceduralisation, standardisation, compliance, external regulation, accountability (Byrne, 2016; Gallagher & O'Toole, 1999; McSweeney et al., 2016; Power & Darcy, 2017) and most vividly, the usage of scientific inquiry within EIP and EBP to make sense of the social reality of children (Aveyard & Sharp, 2009; Minister for Children, 2007). Yet overarching these structuring and positivist influences, at a discursive, cultural and political level, postmodernist leanings of the social constructionist approach (Burr, 2015) appear more conducive to understanding the diverse interplay of stakeholder discourses that vie for leverage within professionalisation (Power & Darcy, 2017). The predominantly sociological position of social constructionist theory further fits with the macro-societal scale change processes professionalisation entails (Burr, 2015; Power & Darcy, 2017). Finally, the critical social focus of social constructionism (Burr, 2015) may help to avert any naivety in this analysis towards the complexity of social reality for Irish practitioners who must work with children in challenging, complicated, non-linear and at times contradictory practice milieu (Lalor & Share, 2013).

In making the claim that professionalisation of social care work in children's services, as a social occupation, is ultimately socially constructed, a number of potential arguments could be raised. One such argument, progressed in the following sections, is that practitioners should seek to increase their influence on this process. Notwithstanding the validity of such a proposition, there is also an obvious counter-argument that must be acknowledged. Workers also have freedom and agency within the system and this has important implications. Without external regulation, benchmarking and monitoring, the few practitioners who do practice poorly in their work with children, have more freedom to effect and shape the overall profession. In this way, external constraints imposed upon the profession can have positive implications even when constraining

practitioner agency. Social constructionism in the context of professionalisation of social care with children is not, therefore, a straight forward matter.

Whilst acknowledging these factors, a more conclusive definition of social constructionism, it appears, is not possible in the context of its expansive interpretations (Burr, 2015). According to Burr (2015, pp. 2–5), however, four defining assumptions of the theoretical orientation derived from Gergin (1985) offer some substitute for definition. In drawing to a close, these four assumptions provide a working conceptual framework when applied thematically to critically establish learning for practitioners seeking to improve practice in the field, by addressing some of the significant challenges and practice concerns formally identified in the review of literature. The framework is applied cumulatively, and as a result, the first thematic assumption referred to as “historical and cultural specificity”, lays a foundation and context for the later thematic assumptions and therefore is most developed. This builds toward the final thematic assumption, namely that practitioners must adopt a critical stance towards taken for granted knowledge, that concludes the overall analysis.

Historical and cultural specificity

From a Social Constructionist perspective, drives towards EIP and EBP as part of professionalisation of social care with children in Ireland derive from a specific historical and cultural context rather than having an essentialist basis. The vilification of social work as a profession in the media features in the Irish literature (Garrett & Gaughen, 2011; Stalk, 2010). This negative scrutiny has a direct effect on the profession such as attracting the best candidates, employee morale, and “alarming implications for practice” (Garrett & Gaughen, 2011; Stalk, 2010, p. 10). Henderson and Franklin (2007) conducted research in television representation of social care professions in the UK and found that social care workers and social workers are largely perceived by the public as synonymous. In Ireland, similar observations are made of social care as a cognate discipline to social work given the ambiguity of the role, detailed earlier (Lalor & Share, 2013; McSweeney, 2018). Indeed, practice concerns overlap greatly for both occupations. Related to this, in Ireland and the UK a process of public awakening to child abuse throughout the 1990s and 2000s with high profile cases in the media such as Kelly Fitzgerald, Victoria Climbié, Baby P and the Roscommon Case, and inquiry reports such as Commission to Inquire into Child Abuse Report (2009), re-landscaped child protection services in Ireland (Burns & McGregor, 2018; Ferguson, 2004; Howard, 2012; McGregor, 2014). Residential social care practice with children was also greatly impacted (Crimmens, 1998). The later re-transformation of Irish child protection and welfare services with the establishment of Tusla, Child and Family Agency, according to McGregor (2014, p. 771) has been accompanied by public discourse surrounding children’s rights, early intervention and participation in “a quest to purge the mistakes of the past.” In this specific historical and cultural context, advocacy, lobbying and awareness-raising at a broad level must retain, or perhaps intensify its importance for social care practitioners, academics and allies, seeking to promote constructive discourses in the best interests of the children that they support. More specifically, it is argued that the present transitory time of professionalisation presents a compelling opportunity to do so. As articulated in the CORU Standards of Proficiency (2017b, p. 10), practitioners must “recognise the role of

advocacy”. In this context, seeking to effect change in public perceptions and discourses may also attend to existing claims that challenges ahead for social care practice in Ireland will in part be a result of the failure of policy-makers to react to issues (McSweeney et al., 2016). With this in mind, the overall focus in this section has been on the notion of historical and cultural specificity. The defining implication of this is clear: in order to be best understood and predicted, professionalisation of social care with children in Ireland must be considered within its particular, and ultimately unique, cultural and historical context. Presently, this context includes increased drives toward EIP and EBP as professionalisation of social care practice with children in Ireland leads to increasing regulation of the work.

Knowledge is sustained by social processes

Underpinning the requirement for advocacy is the implicit byline that knowledge is sustained by social processes. This proposition constitutes a second defining assumption of social constructionism (Burr, 2015; Gergin, 1985). In Ireland, Power and Darcy (2017, p. 30) examine awareness amongst social care practitioners of registration and conclude that registration is often viewed through a “localised or parochial lens, within which social care workers are relatively powerless to input” regarding a process that is largely employer led. Yet, despite their omission from this “employer led process”, Power and Darcy (2017) find that the individualised nature of regulatory framework “places the onus squarely on the individual social care worker.” The intention here is not to provoke a sense of anxiety, but rather, practitioners who traditionally and worthily garner their resources and attention exclusively towards the children that they work with, need also to attune to peripheral social processes that, to varying extents, construct the vision and prototype for the new professionally regulated social care practice. Perhaps this is most important, because inevitably, professionalisation will have complex consequences for children in practice (Lalor & Share, 2013). Overall, the social constructionist notion that knowledge is sustained by social processes has been the focus of this section. The implications of this for professionalisation, highlighted already, includes that social processes can both impose experiences of powerlessness, and of accountability, upon practitioners. In the context of drives towards EIP and EBP within professionalisation of social care practice with children in Ireland, using evidence to support decision-making may be one way for practitioners to retain a sense of power in their practice.

Knowledge and social action go together

Notwithstanding Power and Darcy (2017) observations about the contradictory position of practitioners assuming accountability without power of input into professionalisation, a social constructionist perspective should also provoke new confidence in practitioners that, at the very least, the direction of professionalisation, or the role of EIP and EBP within this, is not inevitable. In this respect, Burr (2015) states that social processes (such as professionalisation) “can produce a variety of possible versions of events.” As it stands for the social professions, numerous authors articulate disconnection between all or some of the triad of evidence, policy and practice (Aarons & Sommerfeld, 2012; Eccles, Grimshaw, Walker, Johnston, & Pitts, 2005; Locock & Boaz, 2004). Additionally,

some authors identify a forced connection that denies their differing traditions (Glasby, 2011; Locock & Boaz, 2004). Against this backdrop, practitioners will likely encounter conditions of resistance in seeking to make change happen beyond the direct practice realm with children (to influence evidence or policy domains). Nevertheless, drawing on a social constructionist perspective, it is evident that ultimately change is possible and may, more specifically, be constructively affected by practitioners through social processes (such as advocacy). The overall implication of this for professionalisation is that ultimately, practitioners should feel encouraged to intervene into changes underway, as through lobbying, advocacy, or other social actions, progressive steps can be taken. In this context, increased pressure for EIP and EBP in social care practice with children is one change that practitioners may believe requires intervention.

Critical stance towards taken for granted knowledge

To make change happen, a final insight from social constructionism may aid practitioners to negotiate the complexity outlined in this review. Specifically, practitioners should seek to adopt a critical stance taken for granted knowledge (Burr, 2015; Gergin, 1985). Whilst within EBP, the hierarchy of social scientific knowledge situates meta-analysis and randomised control trials (RCT) at the top (Glasby, 2011), as noted there are many avenues for knowledge acquisition for social care practitioners such as that derived from the children they work with (Farrelly, 2013; Long et al., 2006; Pawson et al., 2003). Standardisation, formalisation and increased expectations around evidencing professional knowledge lie ahead of Irish practitioners undergoing professionalisation (CORU, 2017b). As it stands, however, a survey of professional learning practices of social care workers in Ireland found only 11% of participants had a professional development plan and knowledge acquisition was ad hoc (Irish Association of Social Care Workers, 2014). In a climate of change in the nature and form of social care practice with children in Ireland, a critical stance on taken for granted knowledge may aid practitioners in making evaluations about the validity and credibility of knowledge used to inform practice, as requirements for knowledge evolve due to professionalisation (Burr, 2015; Gergin, 1985). The implication, for practitioners, of taking a critical stance towards taken for granted knowledge is related to better preparedness and an enhanced capacity to question important changes underway.

Conclusion

Whilst professionalisation of social care practice in Ireland has long been anticipated, encompassing both periods of dormancy and spurts of change (see Gallagher & O'Toole, 1999), the most recent strides towards statutory regulation and reform are exceptional in their magnitude (Byrne, 2016; McSweeney et al., 2016). This has included publishing of a draft Code of Professional Conduct and Ethics for Social Care Workers in 2016, and Standards of Proficiency for Social Care Workers in 2017 (Power & Darcy, 2017). Application of a social constructionist framework derived from Burr (2015) and Gergin (1985), sought to progress the overview of the literature on professionalisation and EIP and EBP in this paper, towards generating learning for practitioners seeking to improve practice with children in the field. It did so with the intention of addressing

some of the significant challenges and practice concerns identified in the former review. Within this, the argument has been made that professionalisation, and EIP and EBP, are interrelated rather than separate influences on the nature of social care in Ireland. Furthermore, the impact of both upon Irish social care practice for children is predominantly socially constructed alongside competing stakeholder priorities. With this in mind, this paper has argued that by this very nature, and as a historically and culturally specific moment in time, the professionalisation of social care provides a valuable window of opportunity for practitioners seeking to make change happen. In this context, a social constructionist lens would imply that social processes such as advocacy, lobbying, and awareness-raising; alongside a critical stance on taken for granted knowledge, may aid practitioners in negotiating the complexities ahead (Burr, 2015; Gergin, 1985).

Note

1. CORU is the Health and Social Care Professionals Council in Ireland. CORU monitors and regulates a number of professions in Ireland such as social work (CORU, 2017b).

Notes on contributor

Dr Susan Flynn lectures full time in social sciences and social work, and has research interests in the effects of the economy on social work, and the contemporary nature of social work in Ireland

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ORCID

Susan Flynn  <http://orcid.org/0000-0002-2807-0866>

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