

ORIGINAL ARTICLE

Evidence-based practice in Indian social work profession: reflections from the clinic and community setting practitioners

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Background	The snowball changes in social work practice have regulated new changes in the intervention process through the EBP approach. The execution of the EBP model enhanced social work intervention outputs, motivation, and satisfaction in practitioners and researchers working together. Worldwide, EBP is applied by Social Work practitioners in different fields and studies for appropriate solutions to the social problem with fuller new changes and enhanced results.
Aim	The aim of the study was to explore the working experience of Indian Social Work Practitioners with respect to EBP.
Patients and Methods	This paper is based on the first-hand experience of practitioners practicing in different areas and specializations of social work. With the support of a literature review, the questions with the support of COPEs framework were applied while conversating with practitioners to take the research discourse into end results.
Results	From field and clinic observations of various social work practitioners in India, a narrated dialogue about the influence of EBP in social work practice was observed and recorded.
Conclusions	The practitioners put forth their concerns about the obstacles and challenges of the execution of EBP in daily social work practice.
Keywords	COPEs Questions, EBP, Narrations, Practitioner experiences. Egyptian Journal of Psychiatry 2023, 44:169–175

INTRODUCTION

Evidence-based practice (EBP) is the scientifically diligent, well-judged, and judicious use of current most appropriate empirical evidence in concordance with clinical expertise, patient choices, and treatment values to disseminate healthcare decisions (Titler, 2008). Best evidence encompasses observed evidence from randomized controlled trials (RCTs), evidence from other empirical methods including descriptive and qualitative research findings, as well as the use of facts from case reports, scientific bulletins, and expert judgments (McKibbin, 1998). EBP became popular well across many healthcare and multidisciplinary fields. One of its primary characteristics is its dependence on objective and hard scientific evidence to increase public health well-being (APA Presidential Task Force on Evidence-Based

Practice, 2006). EBP was an important advancement in the helping professions, which included public health, social work, psychology, nursing, and medicine (Briggs and Rzepnicki, 2004). It promotes the belief that healthcare professionals may assist their clients in achieving their therapeutic goals. It encourages the idea that healthcare practitioners may help patients reach their treatment goals. EBP promotes effective psychiatric social work practice and advances public psychosocial well-being through scientifically supported evidence of psychosocial assessment, case formulation approaches, therapeutic-based principles, and interventions (McNeece and Thyer, 2004). The execution and propagation of EBP in professional establishments for improving the quality and outcomes of services to adolescents, youth, and

families is an important concern. Universal promotion of EBP facilitated enhancing of quality care in clinics and community world client service institutes. Substantial use of evidence-based resources increased the application of EBPs in community mental health settings (Aarons *et al.*, 2012). EBP is vehemently recognized across the mental health domains and had improved healthcare services designed to provide mental health support and psychosocial well-being of youth and families engaged in stressful health and community sector services by the process of utilizing the most reliable innovative practices (Aarons *et al.*, 2011). Social work practice was concerned with underutilized innovative ideas, and underprocessed scientifically tested clinic and community practices and their effective intervention; the working practice, clinic, and community issues are changing rapidly (Aarons *et al.*, 2011; Pease, 2020). The recent advancements since the last decade expanded various ranges of promising and diligent proven practices. The clinic-based and community-based social work professionals with a practice-focused approach consider, put into action, and deploy interventions that showed the ability to enhance client's and families' mental health well-being. There were high expectations for the research and service profession groups' ability to work together effectively in order to get over the challenges of translating scientific objectives into effects on public health (Aarons *et al.*, 2011; Pease, 2020). EBP is supposed to assist decision-makers in the social work profession in obtaining worthwhile outcomes for their clients. In EBP, as opposed to authority-based approaches, information about the psychosocial conditions and clinic characteristics of the clients, such as their preferences and values, is sought along with details about the most recent research pertinent to a given client's needs, and clinical expertise is used to integrate knowledge, uncertainty, and ignorance are all shared by experts and clients (Spensberger *et al.*, 2020).

METHODOLOGY

Client-Oriented Practical Evidence Search (COPES) questions were having significant relevance to clinic and community work practice. COPES questions were considered from three general domains (Shlonsky and Gibbs, 2004; Gibbs *et al.*, 2007). First, there were questions from the daily clinic and community practice, experienced by practitioners, that pertinently relate to the client's well-being ('client' here is any individual in a group or in a community). The questions are concerned with the issues that are specifically centered on the client's and their caregiver's well-being whose lives are affected by the client. Second, COPES questions denote practical significance in many different ways. They have practical importance, those issues that surface frequently in everyday practice, if they concern the treatment goal of the patient, and if they concern with the end result in the effective use of scientific answers. Eventually third, COPES questions

were important enough to gather an online evidence search (Shlonsky and Gibbs, 2004; Gibbs *et al.*, 2007).

According to an analysis of the quantity and sources of research in the social work field, there are surprisingly few studies about evidence-based social work that have been published in India overall. The rise in scientific research facts demonstrates that academics are starting to pay attention to evidence-based social work because social workers are in dire need of knowledge that could support their practice and practical decision-making. This study is the first to comprehensively examine the background, present context, and current issues of evidence-based social work in India before outlining appropriate development strategies.

COPES framework was applied while taking the research discourse into end results. The objective of this study was to explore and examine the narration obtained from discourses with practitioners of social work while implementing the COPES design in clinical and community mental health settings in nexus with EBP and client treatments. At the initial stage, the study tried to contact more than 30 respondents; however, 12 respondents showed full support and interest in sharing the ideas and relevant information to the study. The study explored improving comprehension and use of the current research evidence to advance social work development and inform intervention strategies through the narrative basis of professional social workers' viewpoints.

Retrospective discourse of evidence-based practice

EBP, which originated in medicine as a reaction to the increasing body of knowledge needed to use clinical judgment, is today recognized as a means of rationalizing professional practice throughout the disciplines of health and social services (Couturier *et al.*, 2022). Studies have chronicled that David Sackett and colleagues are commended and given credit for developing the term EBP in the early 1990s (Claridge and Fabian, 2005).

In 1972, Archie Cochrane emphasized the role of randomized controlled studies as the foundation for the development of clinical evidences for improved healthcare services. The term 'evidence-based medicine' was introduced by Guyatt *et al.*, (1992) to succinctly describe the justifications for conducting scientific and clinically pertinent research. The clinical research data were used to empirically identify the symptoms of specific medical illnesses. The EBP was formalized effectively and welcomed by a variety of professions, but it also faced criticism as it was believed it was overly reliant on research (Kim, 2022).

EBP, which is based on the idea that social work should be a research-based profession, has been integrated into social work since the 1990s. Recent research, however, indicates that social workers have trouble connecting theory with practice (Finne *et al.*, 2022).

How do you express the need for use of scientific methods for evaluating the social work practice?

'Prior to the development of EBP in social work profession, many social work practitioners expressed the need for practitioners to use scientific methods for evaluating the practice, while keeping present social situations connected with the fresh innovations of research. This development is steering the social work practice to improved results in communities across social problems.' Social development (SD) specialized social worker 1.

What shall you see to make a difference in mental health patients enhanced quality of life and Psychosocial well-being?

'This endeavor (EBP) is devoted to progressively work in the spheres of mental health practice, psychology, and humanity, yearning to make a difference and willing to do so; and to the service consumers who eventually get benefits towards enhanced quality of life and Psychosocial well-being.' Psychiatric social worker (PSW) 2.

How was the EBP advanced in India in clinic and community settings?

'The history of EBP provides a wealth of justifications for discussing its need at the present times of the client's clinic and community conditions. The lack of resources in the past for social work practice in India may have left practitioners unbalanced and on a perverse path. Individual observations and splicing the ethical aim were the tools available in healthcare practice. Mental health social workers intervene in issues at mental health and community forums with the knowledge of EBP for the welfare of children, youth, and families, on the similar goal of client and research evidence judgments.' Public health social worker 3.

What are the attitudes of social workers towards EBP in Indian settings?

'Even though EBP is becoming increasingly important, Indian social workers have been slower to adopt it, in part because they frequently hold unfavorable views about it. The nongovernmental organisation social workers who work with children and young people, are female, less experienced, and had more positive attitudes toward EBP. Recent initiatives to convince Indian social workers to adopt EBP will be successful if they target those with less favorable perceptions.' NGO-based social worker 4.

To include client testimonials and subjective voices as a kind of practical evidence, the current EBP must be reformulated. To achieve this, it is proposed that the personal experience narrative be one potential qualitative unit of analysis for describing the actual effects of evaluation and intervention. These narratives seem to be perfectly suited to the task of communicating empirical

results due to their emphasis on the ramifications of the human experience (Kovarsky, 2008) (Fig. 1).

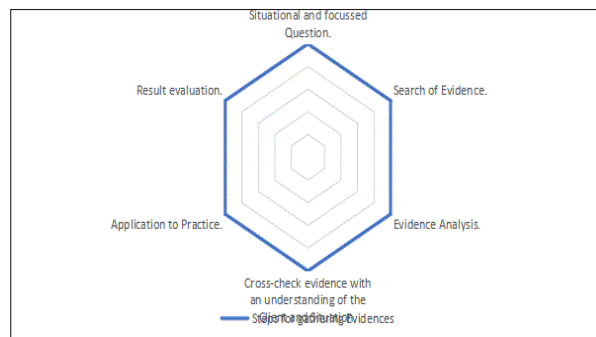


Figure 1: Various steps to generate evidence in social work practice.

Situational and focused question

The main benefits of using EBP question prompts, and the way the question is phrased illustrate the likelihood of finding evidence that directly relates to the patient's needs. It makes it easier for professionals to find the information and resources they require. EBP-specific queries increase problem-solving techniques and raise practitioner and client satisfaction with therapy (Norcross et al., 2008).

What makes it accessible for evidence to contribute to clinical intervention for the client?

'The most important EBP skill for finding the greatest accessible research evidence is asking a question that is clear, concise, and easy to answer. The attributed characteristics of the client, practitioner, and environment setting play a crucial part in developing clinical interventions while finding the solutions to research questions. The difficulties posed by client choices and cultural background may occasionally delay clinic intervention.' Community development specialised social worker 5.

A search of evidence

The decisions made by the client and the practitioner, the literature, the internet, and the accessible evidence are all strongly related to the search process. The experimental subset of the EBP in social work is utilizing the body of knowledge that is currently available regarding judgment and decision-making. The EBP and rational choice approaches to social work decision-making are demonstrated (Van de Luitgaarden, 2009).

What strengthens the EBP process in social work practice?

'This strengthens the ability of social work practice to respond to research questions with the EBP search process and offer the most trustworthy solutions to social problems.'

The approaches of meta-analysis and systematic reviews are helpful in shaping this step.' Social worker from SD specialization 6.

Finding and assembling the results of all research carried out in a certain field of study is the goal of a meta-analytic review, which is mainly focused on quantitative reviews. In meta-analyses, the intervention and practice-oriented findings are more influenced by the study effect sizes. As a final point, it is suggested to adopt an effect size of at least 0.80 as a benchmark for distinguishing between what is likely to be supported by evidence and what is not. This number is also unique in the meta-analytic literature (Lipsey and Wilson, 1993). Effect sizes of less than 0.80 are never deemed useless for meta-analysis. However, a meta-analysis with that significant impact size might not, however, be accessible. While systematic reviews can be used to find evidence in qualitative investigations, traditional or narrative reviews of the literature have a more stringent scope for carrying out all components of the reviews. As a result of these assessments, numerous studies that evaluated their methodologies and yield important conclusions about the effectiveness of evidence obtained logically are included.

Evidence analysis

Utilizing knowledge of research design and methodology, evidences are analyzed. It commits to learning about variations in experimental and quasiexperimental designs, ranging to uncontrolled case studies, that might make inferences regarding effectiveness. This helps people comprehend whether or not the research's statistics were adequate (Rubin, 2007).

'In experimental activities, the use of randomization and RCT does help to establish the validity of the findings. It is quite advantageous to provide mental health patients with the proper care while keeping best practices in mind.' PSW 7.

Cross-check evidence with a familiarity of the client and situation

Applying research findings to the client problem and scenario at hand is a more fascinating and difficult endeavor. The evidence varies according to socioeconomic status, familial circumstances, and distinctions in racial and cultural groups. What should be done to make it more client-appropriate? Practitioners should go into great detail when applying research findings to a particular case, especially when considering client circumstances and practitioner traits. These viewpoints should take into account the client's conceptualization of the situation as well as any relevant evidence or literature (Stillwell *et al.*, 2010).

'In this notion, EBP is crucial for determining the client's clinical issue and social situation. This makes it

simpler to choose the best method of obtaining evidence for that specific problem and situation.' PSW 8.

Practical application

A professional's decisions are based on the indicated supporting documentation. This is assessed based on the understanding and practical application of the evidence (Drisko and Grady, 2019).

'It is obvious that the most pertinent, approachable, and practice-relevant research may offer consumers, their families, and the community a reasonable, practical, and reliable service.' Social worker from family and child welfare specialisation 9.

RESULTS

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Clinic circumstances of evidence-based practice

EBP in clinical settings aims at improving the client's psychosocial well-being and effectiveness of social work practice. Nevertheless, social work uses its clinic expertise and shows much concern to the client's present needs, situations, available resources, evidences, and treatment preferences (Petr, 2009) (Fig. 2).

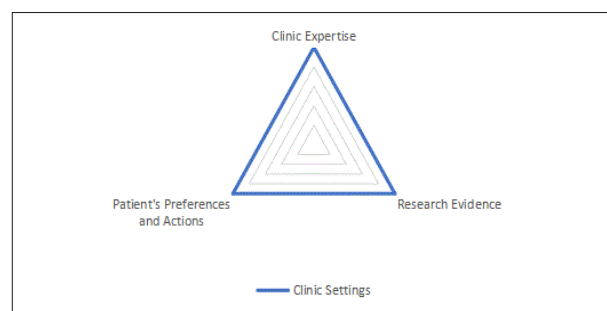


Figure 2: Evidence-based practice in clinical settings (Haynes *et al.*, 2002).

What dimensions a clinical social work practitioner shall keep in consideration?

'Social workers at clinics, for instance, engage with the parents of young patients receiving mental healthcare. This is accomplished by conducting database searches on pertinent terms related to parental involvement with adolescents receiving mental health services, such as care provisions, adolescent's mental health, family-centered

care, family involvement, parent management training, parent support, and family empowerment.’ Social Worker from Child and Adolescent (CA) specialisation 11.

Community circumstances

Evidence-based studies were observed lacking at community settings (McLeroy *et al.*, 2003). The challenges of conducting evidence-based research and doing scientific evaluations could bring potential barriers to community researchers in synthesizing the evidence. However, a social work intervention at the community level is a crucial domain that distinguishes this profession from others. Therefore, community practice fosters the ability of social workers to develop evidence and invest greater efforts and time in building change and well-being. Moreover, community interventions are always hypothesized to seek a solution to community problems. In fact, it is obliged to community social worker practitioners, as per the code of ethics, to make in-depth assessments and evaluations to develop the best available evidence (Ohmer, 2008).

How will community social work practitioners be ready to provide social well-being services?

‘For instance, a community intervention programme for drug abusers focuses on reducing the typical risks associated with addiction. Community programmes and residential psychosocial interventions with the aid of families, neighborhood stakeholders, and indigenous institutions offer ample possibility for creating empirical evidence to address drug addicts.’ Social worker from community development specialisation 12.

Barriers evidence-based practice social workers confront in practice

In the research and practicing spheres, the use of scientific research evidence faces many barriers in implementation. Examples could be uneven access to research, practitioner resistance, and constraints on providers’ time (Gibbs and Gambrill, 2002). Studies have found that most social workers inconsistently use research to inform their practice. The challenges of translating research into practice have created differences between researchers and practitioners over the definition of evidence, implementation of evidence into ‘best practices’ and development of empirically based practice guidelines (Mullen *et al.*, 2005). With the advancement of time, some of the working institutions, like mental health institutes, started endorsing the EBP for translating research into practice. Moreover, it could reduce the gap between EBPs and treatments. Not only this, EBP puts in place RCTs to validate the efficacy of research evidences and interventions. For clinic and community social work practitioners, the factors such as poverty and socioeconomic status, language barriers, and other environmental factors bring hurdles to carrying out the

EBP. The potential impact of prejudice, discrimination, and casteism develop differences in clients. These differences sometimes prove harmful to practitioners in presenting the EBP. Mistrust of a practitioner at the community level over helping behavior comes across the cultural factor. The other nonspecific issues might be age, sex, education, and caste, which could affect the interventions, and acceptability of treatment. EBP emphasizes the need to accept people’s cultural and socioeconomic situations, and respect and recognize their choices and decisions for strong assessment, planning, intervention, and research approaches (Gibbs, 2003).

What shall be the possible ability of social workers to overcome the barriers in practice?

‘The social worker’s skills and abilities, practical knowledge, and specialised research evidence may help them overcome institutional, cultural, and personal barriers that exacerbate clients’ difficulties in enterprises and organisations.’ Social worker from human resource specialisation 13 (Table 1).

Table 1: Components of evidence-based practice:

Serial number	Various elements, required for the practice and proper implementation of EBP
1	Evidence-based practice shall be supported, encouraged, and promoted in every way possible by the institutional working culture, rules, procedures, and processes
2	Local, regional, and national authorities shall be given comparable chances and rewards to increase their attention on EBP
3	To provide more precise and more categorical results for assessment, intervention, and practice, the outcomes from the utility of EBP at the clinic and community levels will be assessed based on the basis of the scientific research
4	To produce more scientific findings, and to gauge the integrity of the evidence produced by existing evidence-based research and evaluation studies, systematic reviews must be emphasized and put into practice
5	It is necessary to produce and distribute practice guidelines, manuals, and toolkits through user-friendly channels
6	The institution must set up a systematic process for receiving prompt feedback regarding the results of applied evidences
7	Social workers who have been trained and knowledgeable about the approach shall be available and equipped to implement it in institutions and other organizations

Roberts and Yeager (2006) studied these components to overcome the barriers to evidence-based practice. EBP, evidence-based practice.

How are the EBP components expected to be useful right now at present times?

‘When well-designed and well-built research components are used, social work therapies that are supported by EBP may result in findings that are more conclusive. It also asserts that encouraging the use and

implementation of evidence from research is the best approach for social workers and other practitioners to uphold their ethical and behavioral obligations. As a result, social workers are in some respects better at basing their intervention choices on data from practice-based research and information produced by science.’ Social Worker from SD specialisation 14.

Implications for social work

More and more social workers are interested in learning about techniques that have been supported by science. Several resources support practitioners’ information needs and link research to practice. There shall be a list of publications that can aid practitioners and researchers. It is essential to have a solid EBP foundation in social work research as identifying EBP involves assessing the body of currently conducted practice-relevant research (Ball and Skrzypek, 2020) (Table 2).

Table 2: Suggestions emanated from EBP for Social Work Practice:

Serial number	Several implications of EBP in India
1	Evaluation of a single intervention research study
2	Surveillance data
3	Systematic evaluations of several intervention studies
4	Reviews of expert opinions or narratives
5	EBP shall respond sensitively and appropriately to the preferences of patients/clients
6	Critical to the preparation of future health service
7	More research is needed to describe the knowledge and practice of EBP instruction among graduate teachers who are not involved in clinical practice
8	Shall provide EBP to the corpus of knowledge regarding the application of evidence-based practices at all levels, including knowledge of policy, program priorities, clinician practice, consumer adherence, and family support system
9	To enrich the knowledge presented in the literature, the interviews shall elicit the opinions of knowledgeable researchers offered in the field of EBP
10	Shall include narratives, as many of the difficulties addressed in the literature were reflected in the experts’ statements, and they also provided additional details about their efforts to identify the best solutions to overcome obstacles to adopting and disseminating EBP
11	Social work has been impacted by recent advancements in practice, which also suggests the potential for combining practice and research to strengthen the scientific foundations of social work intervention. The most trending practice framework is evidence-based practice. Evidence-based practice has scientific advantages that might persuade social workers to adopt it, but its use in actual practice is constrained and shall be considered

EBP, evidence-based practice.

CONCLUSION

EBP promotes a yardstick approach in social work practice amalgamated from research evidence and practice judgments for effective clinic and community interventions. EBP, therefore, helps in catalyzing and stimulating the laborious, well-judged, and precise utilization of the best available scientific evidence in professional decision-making. Practitioners working in arenas of fieldwork projects, casework, group work, community organization, block placement, NGOs, and clinical practices are just a few of the many diverse forms that EBP had chosen the practical experiences. It emphasized the need to carefully evaluate practice strategies, raise the standard for practice in India, and prepare for fresh problems as they present themselves. This tried to bring the gap between EBP and practice into close contact and to enhance social work education with an emphasis on social work practice by contrasting the structure, issues, and challenges that social work practice confronts in India.

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