Burt had worked as a welder when he was younger, but alcoholism and related physical and mental health problems interfered with his career plans. By the time he was 60, Burt had spent many years on the streets. Fortunately, he obtained an apartment in 2008 through a housing program for homeless persons. Although the Boston Globe reporter who interviewed him reported that “the
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lure of booze and friends from the street was [still] strong,” Burt had finally made the transition back to a more settled life (Abel, 2008, p. A14).

It is a sad story with an all-too-uncommon happy—although uncertain—ending. Together with one other such story and comments by several service staff, the newspaper article provides a persuasive rationale for the new housing program. Does Burt’s story sound familiar? Such newspaper stories proliferate when the holiday season approaches, but what do they really tell us about homelessness? How typical is Burt’s story? Why do people live on the streets? What helps them to regain housing?

In the rest of this chapter, you will learn how the methods of social science research go beyond stories in the popular media to help us answer questions like these. By the chapter’s end, you should know what is “scientific” in social science and appreciate how the methods of science can help us understand the problems of society.

Reasoning About the Social World

The story of just one homeless person raises many questions. Take a few minutes to read each of the following questions and jot down your answers. Do not ruminate about the questions or worry about your responses. This is not a test; there are no “wrong” answers.

- Was Burt typical of the homeless population?
- What is it like being homeless?
- Why do people become homeless?
- What programs are effective in helping homeless people?

Do a few facts from the newspaper story give you enough information to answer these questions? Do you feel you need to know more about Burt, his friends, and the family he grew up in? Have you observed other homeless persons with whom you would compare Burt? What is the basis for your thoughts about the causes of homelessness? Have you worked in social service programs that provide some insight? How can you tell whether a program is effective? We began with just one person’s experiences, and already our investigation is spawning more and more questions.

We cannot avoid asking questions about the social world, which is a complex place, and trying to make sense of our position in it—something of great personal importance. In fact, the more you begin to think like a potential social work researcher, the more questions will come to mind. But why does each question have so many possible answers? Surely, our perspective plays a role. One person may see a homeless individual as a victim of circumstances, another person may see the homeless as the failure of our society to care for its members, while a third person may see the same individual as a shiftless bum. When confronted with a homeless individual, one observer may stop to listen, another may recall a news story on street crime, and another may be reminded of her grandfather. Their different orientations will result in different answers to the questions prompted by the same individual or event.
When the questions concern not just one person, but many people or general social processes, the number of possible questions and the difficulties in answering them multiply. For example, consider the question of why people become homeless. Responses to a 2006 survey of New York City residents, summarized in Exhibit 1.1, illustrate the diverse sentiments that people have (Arumi, Yarrow, Ott, & Rochkind, 2007). Compare these answers with the opinion you recorded earlier. Was your idea about the causes of homelessness one of the more popular ones?

![Exhibit 1.1 Popular Beliefs About Why People Become Homeless](image)

Source: Adapted from Arumi, Yarro, Ott, & Rochkind, 2007.

Answers to questions about the social world can vary given the particular details of what we observe or read about a situation. Would your answers be different if the newspaper article was about a family who had lost their home due to foreclosure or a single parent with two children? Responses of large-city mayors to the 2009 Hunger and Homelessness Survey (U.S. Conference of Mayors, 2010), summarized in Exhibit 1.2, demonstrate their differing opinions about what causes families to be homeless in comparison to individuals who are homeless.

Answers to questions about the social world also vary because what people have “seen” varies. The New York City survey (Arumi et al., 2007) reflects this. The elderly were more likely than younger people to see drug and alcohol abuse as a significant cause of homelessness. People of color were more likely than White people to
see the absence of good jobs as a key cause. Other studies have found that political perspectives and personal contact make a difference in how people perceive the causes of homelessness (Lee, Jones, & Lewis, 1990).

**Exhibit 1.2 Causes of Homelessness for Individuals and Families**

![Bar chart showing the top three causes of homelessness for individuals and families.]

Source: Adapted from U.S. Conference of Mayors, 2010.

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### Everyday Errors in Reasoning

People give different answers to questions about the social world for yet another reason: It is simply too easy to make errors in logic, particularly when we are analyzing the social world in which we are conscious participants. We can call some of these everyday errors because they occur so frequently in the nonscientific, unreflective discourse about the social world that we hear on a daily basis.

Our favorite example of everyday errors in reasoning comes from a letter to syndicated newspaper advice columnist Ann Landers. The letter was written by someone who had just moved with her two cats from the city to a house in the country. In the city, she had not let her cats outside and felt guilty about confining them.
When they arrived in the country, she threw her back door open. Her two cats cautiously went to the door and looked outside for a while, then returned to the living room and lay down. Her conclusion was that people shouldn’t feel guilty about keeping their cats indoors—even when cats have the chance, they don’t really want to play outside.

Do you see this person’s errors in reasoning?

- **Overgeneralization.** She observed only two cats, both of which previously were confined indoors.
- **Selective observation or inaccurate observation.** She observed the cats at the outside door only once.
- **Illogical reasoning.** She assumed that others feel guilty about keeping their cats indoors and that cats are motivated by emotions.
- **Resistance to change.** She was quick to conclude that she had no need to change her approach to the cats.
- **Adherence to authority.** She is looking to the “expert” for support for her conclusion.

You do not have to be a scientist or use sophisticated research techniques to avoid these errors in reasoning. If you recognize these errors for what they are and make a conscious effort to avoid them, you can improve your own reasoning. In the process, you will also be implementing the admonishments of your parents (or teacher or other adviser) to avoid stereotyping people, to avoid jumping to conclusions, and to look at the big picture. These are the same errors that the methods of social science research are designed to help us avoid.

**Overgeneralization**

**Overgeneralization** occurs when we conclude that what we have observed or what we know to be true for some cases is true for all cases. We are always drawing conclusions about people and social processes from our own interactions with them, but we sometimes forget that our experiences are limited. The social (and natural) world is, after all, a complex place. We have the ability (and inclination) to interact with just a small fraction of the individuals who inhabit the social world, especially in a limited span of time. If we had taken facts we learned about Burt, such as his alcohol abuse, and concluded that this problem is typical of homeless persons, we would have committed the error of overgeneralization.

**Selective or Inaccurate Observation**

We also have to avoid **selective observation**: choosing to look only at things that are in line with our preferences or beliefs. When we start out being inclined to criticize individuals or institutions, it is all too easy to notice their every failing. For example, if we are convinced in advance that all homeless persons are substance abusers, we can find many confirming instances. But what about homeless people like Debbie Allen, who ran away from a home she shared with an alcoholic father and psychotic mother; Charlotte Gentile, a teacher with a bachelor’s degree living with two daughters in a shelter after losing her job; and Faith Brinton, who walked out of her rented home with her two daughters to escape an alcoholic and physically abusive husband and ended up in a shelter after her husband stopped paying child support? If we acknowledge only the instances that confirm our predispositions, we are victims of our own selective observation. Exhibit 1.3 depicts the difference between overgeneralization and selective observation.
Research on cognitive functioning (how the brain works) helps to explain why our feelings so readily shape our perceptions (Seidman, 1997). An external stimulus can trigger an emotional response through the brain structure called the amygdala even before the thinking part of our brain, the neocortex, can process and make sense of the information (see Exhibit 1.4). This “emergency” response process means, according to some cognitive scientists, that “what something reminds us of can be far more important than what it ‘is’” (Goleman, 1995, pp. 294–295).

Our observations can also be inaccurate. If a woman says she is hungry and we think she said she is hunted, we have made an inaccurate observation. If we think five people are standing on a street corner when actually seven are, we have made an inaccurate observation. Or our observations can be incomplete. If we see Burt sitting alone and drinking from a beer bottle, we would be wrong to conclude that he does not have any friends or that he likes to drink alone.

Such errors often occur in casual conversation and in everyday observation of the world around us. In fact, our perceptions do not provide a direct window onto the world around us because what we think we have sensed is not necessarily what we have seen (or heard, smelled, felt, or tasted). Even when our senses are functioning fully, our minds have to interpret what we have sensed (Humphrey, 1992). The optical illusion in Exhibit 1.5, which can be viewed as either two faces or a vase, should help you realize that perceptions involve interpretations. Different observers may perceive the same situation differently because they interpret it differently.
Illogical Reasoning

When we prematurely jump to conclusions or argue on the basis of invalid assumptions, we are using illogical reasoning. For example, it is not reasonable to propose that homeless individuals do not want to work if evidence indicates that the reason many are unemployed is a shortage of jobs or the difficulty of finding jobs for those unemployed because of mental or physical disabilities. However, an unquestioned assumption that everyone who can work will work is also likely to be misplaced. Logic that seems impeccable to one person can seem twisted to another—the problem usually is reasoning from different assumptions, rather than just failing to “think straight.”

Resistance to Change

Resistance to change, the reluctance to change our ideas in light of new information, may occur for a couple of reasons:
**Ego-based commitments.** We all learn to greet with some skepticism the claims by leaders of companies, schools, agencies, and so on that people in their organizations are happy, that revenues are growing, and that services are being delivered in the best possible way. We know how tempting it is to make statements about the social world that conform to our own needs, rather than to the observable facts. It can also be difficult to admit that we were wrong once we have staked out a position on an issue. For instance, we may want our experiences while volunteering in a shelter for homeless people to confirm our political stance on homelessness and therefore resist changing our beliefs in response to new experiences.

**Excessive devotion to tradition.** Some degree of devotion to tradition is necessary for the predictable functioning of society. Social life can be richer and more meaningful if it is allowed to flow along the paths charted by those who have preceded us. But too much devotion to tradition can stifle adaptation to changing circumstances. When we distort our observations or alter our reasoning so that we can maintain beliefs that “were good enough for my grandfather, so they’re good enough for me,” we hinder our ability to accept new findings and develop new knowledge. In many agencies, those who want to reject an idea use those famous words: “But we’ve never done it that way.” The consequences can be deadly, as residents of Hamburg, Germany, might have realized in 1892 (Freedman, 1991). Until the last part of the 19th century, people believed that cholera, a potentially lethal disease, was caused by minute, inanimate, airborne poison particles (miasmas). In 1850, English researcher John Snow demonstrated that cholera was, in fact, spread by contaminated water. When a cholera epidemic hit Hamburg in 1892, the authorities did what tradition deemed appropriate: They dug up and carted away animal carcasses to prevent the generation of more miasmas. Despite their efforts, thousands died. New York City adopted a new approach based on Snow’s discovery, which included boiling drinking water and disinfecting sewage. As a result, the death rate in New York City dropped to a tenth of what the death rate had been in a previous epidemic.

**Adherence to Authority**

Sometimes it is difficult to change our ideas because someone in a position of authority has told us what is correct. **Adherence to authority** is given because we believe that the authority, the person making the claim, does have the knowledge. If we do not have the courage to evaluate critically the ideas of those in positions of authority, we will have little basis for complaint if they exercise their authority over us in ways we do not like. And if we do not allow new discoveries to call our beliefs into question, our understanding of the social world will remain limited. We once had a student in a social welfare history class who came back from Thanksgiving break saying, “You’re wrong [about the impact of structural issues on economic well-being]. My parents told me that anyone can get ahead if they want to.” In her eyes, her parents were right despite any evidence to the contrary. Students are right to question the “authority” of the professor if there is indeed no evidence to support the professor’s assertions.

Now take just a minute to reexamine the beliefs about homelessness that you recorded earlier. Did you grasp at a simple explanation even though reality is far more complex? Were your beliefs influenced by your own ego and feelings about your similarities to or differences from homeless persons? Are your beliefs perhaps based on stories you have heard about the “hobos” of an earlier era? Did you weigh carefully the opinions of political authorities or just accept or reject those opinions out of hand? Could knowledge of research methods help to improve your own understanding of the social world? Do you see some of the challenges faced by social science?
The scientific approach to answering questions about the social world is designed to greatly reduce these potential sources of error in everyday reasoning. Science relies on logical and systematic methods to answer questions, and it does so in a way that allows others to inspect and evaluate its methods. In this way, scientific research develops a body of knowledge that is continually refined as beliefs are rejected or confirmed on the basis of testing empirical evidence.

Social work research relies on these methods to investigate treatment effectiveness, social conditions, organizational behavior, and social welfare policy. While we may do this in our everyday lives, social scientists develop, refine, apply, and report their understanding of the social world more systematically, or “scientifically,” than the general public:

- Social science research methods can reduce the likelihood of overgeneralization by using systematic procedures for selecting individuals or groups to study that are representative of the individuals or groups to which we wish to generalize.
- To avoid illogical reasoning, social work researchers use explicit criteria for identifying causes and determining whether these criteria are met in a particular instance.
- Social science methods can reduce the risk of selective, inaccurate, or incomplete observation by requiring that we measure and sample phenomena systematically.
- Because they require that we base our beliefs on evidence that can be examined and critiqued by others, scientific methods lessen the tendency to develop answers about the social world from ego-based commitments, excessive devotion to tradition, and/or unquestioning respect for authority.

Social Work and the Social World

The methods of social science are an invaluable tool for social work researchers and practitioners at any level of practice. The nature of our social world is the starting point for the profession because much of what we do is in response to social, political, and economic conditions. Social work efforts, whether they are aimed at influencing or evaluating policy, working with communities, or engaging in programs to help individuals or groups, emerge in response to conditions in the social world. Our profession works with people from diverse backgrounds and promotes the social and economic participation of groups that lack access to full participation. Through systematic investigation, we begin to uncover the various dimensions of the social condition, the accuracy of our assumptions about what causes the social condition, the...
characteristics of people with a particular social status or social problem, and the effectiveness of our policies and programs to ameliorate the social problem.

Social policies are often designed based on assumptions about the causes of the problem. If we believe that homelessness is due to individual behavior or pathology—for example, that homeless individuals prefer separation from their friends and family, do not want to take advantage of economic opportunities, suffer from mental illness, or are alcohol and substance abusers—then policies will emerge that focus on treating these pathologies. However, if we believe that homelessness is due to structural problems—for example, the market’s inability to provide enough reasonably paying jobs or problems in producing enough low-income housing—then government policies will emerge that might subsidize wages or encourage developers to build lower-income housing. If we learn that the causes of homelessness are multidimensional, that there is a bit of reality to both perspectives, different government policies might emerge that both encourage housing alternatives and incorporate support services. Social work research aids us in the task of describing the characteristics of the homeless, their needs, and their prevalence, all of which can guide policy development and the distribution of resources.

The kinds of programs that human service agencies develop are also based on assumptions about the causes of a social problem (L. Martin & Kettner, 2010). If an agency assumes that homeless adults are alienated from society and suffer from emotional or substance abuse problems, then the agency might provide transitional housing with a variety of social services integrated into the program. In contrast, if the agency believes that homeless adults are simply in between jobs or new to a city and just need time to get started, then the agency might offer a short-term shelter. The tools of research allow social workers to examine the extent to which these assumptions are correct and to evaluate the effectiveness of these different programs.

Interventions in human service programs are related not only to assumptions about what causes the problem, but also to different beliefs about what is the appropriate treatment model. Two agencies might have the same set of assumptions about what causes a problem, but might use different practice models to treat the individual or group. The personal problems that Burt faced might have been addressed by using a social systems model of treatment or a cognitive model of treatment. The tools of research allow us to evaluate the effectiveness of different treatment models in different settings, with different problems, and with different subgroups of the population. For example, Russell Schutt’s (2011) recent book, *Homelessness, Housing, and Mental Illness*, reports the findings of an evaluation of the effectiveness of group or independent housing for homeless persons.

Finally, allow us to challenge perceptions and popular sentiment about those who are in need. Burt reflects common stereotypes about the homeless: They are male; they are substance abusers. Yet we now know, thanks to the work of many researchers, that increasing numbers of homeless people are women with children or people diagnosed with HIV; they have different kinds of needs than Burt, and they require different types of services and interventions in the kinds of housing options offered.

### Social Work Research and Evidence-Based Practice

Evidence-based practice (EBP) has emerged in the past several years as a popular model for social work practice. EBP, with its roots in medicine, is described by Eileen Gambrill (2006) as an evolving “philosophy and process designed to forward effective use of professional judgment in integrating information regarding each client’s unique characteristics, circumstances, preferences, and actions and external research findings” (p. 339). EBP’s emergence is, in part, a reaction to an overreliance on professional claims about the effectiveness of
social work practice. One of the failings of social work professional literature is “that it is rife with claims unaccompanied by evidence” (Gambrill, 2001, p. 167) and has based many of its claims on professional authority.

EBP suggests that practitioners should integrate the best current research evidence to achieve a particular outcome, client values, client circumstances, and clinical expertise to make decisions about what intervention to choose (Straus, Richardson, Glasziou, & Haynes, 2005). So empirical evidence is necessary, but not sufficient; rather, social workers should utilize an intervention that fits the client’s expectations and circumstances (Starin, 2006). What do each of these terms mean?

- **Best current research evidence.** Practitioners should use knowledge derived from research studies that provide evidence that has been obtained through systematic tests of its accuracy (Gambrill, 1999), that is, reliable and valid. Although there is debate about what kinds of research constitute “evidence,” you will learn that it includes “any systematically collected information relevant to practice” (Pollio, 2006, p. 225). Therefore, quantitative studies (e.g., randomized clinical trials), qualitative methods (e.g., case studies, focus groups), and practitioner-collected information (e.g., single-subject design) all provide evidence. Such studies provide information that can test, for example, the accuracy of assessment tools or the effectiveness of different interventions.

- **Client values.** Clients bring their own preferences, concerns, and expectations for service and treatment (Haynes, Devereaux, & Guyatt, 2002; Straus et al., 2005). Such preferences may impact the type of intervention used. Clients may prefer individual interventions as opposed to group interventions, or they may prefer in-home services or interventions rather than going to a congregate site or an agency for services. This is not limited to individual clients, but may include larger client systems. Community interventions require knowledge about what is acceptable in a particular community, just as organizational interventions require an understanding of what is acceptable given the culture of the organization.

- **Client circumstances.** You can imagine the variety of circumstances that bring clients to seek social services. Some clients may be facing a crisis, others a long-standing problem. They may be voluntary clients, or they may be court-ordered clients; they may live in rural areas, the suburbs, or urban communities. These are just some of the circumstances or situations that might be weighed in determining appropriate interventions.

- **Clinical expertise.** Clinical expertise involves using both past experiences with clients and clinical skills to assess and integrate the information learned from research studies, client values, and client circumstances (Haynes et al., 2002; Straus et al., 2005). A skilled social worker knows how to find the relevant research literature, evaluate its accuracy, and determine its usefulness to a particular client or client system (Gambrill, 2001). One key skill is having the knowledge to weigh and assess research findings to evaluate the evidence. A skilled social worker will have the communication skills needed to solicit client values and preferences, and, in turn, communicate to clients their options. A social worker should be able to provide different interventions (or refer to appropriate providers) given a client’s particular circumstances.

Another component of EBP is that social workers should provide clients with the information necessary to make decisions about services, including the effectiveness of the intervention, the client’s role in the intervention, expectations of the client, and length of the intervention (Starin, 2006). Clients should be informed about the evidence, or lack of evidence, supporting a particular intervention. If there is no empirical evidence, social workers should provide the theoretical justification for the choice of service. Clients should also be told about alternative interventions and their relative effectiveness. With all of this information, clients can make informed decisions.

Although this may sound daunting, these themes are consistent with ethical obligations expected of social work practitioners as described in the National Association of Social Workers (2008) Code of Ethics. Enabling clients to make informed decisions is consistent with obtaining informed consent (1.03[a]). The competence of
social workers is enhanced by keeping current with relevant knowledge (4.01[b]), making use of an empirically based practice (4.01[c]), and using evaluation and research evidence as part of professional practice (5.02[c]).

The challenge for social work researchers and social work practitioners is implementing evidence-based practice (Mullen, Bledsoe, & Bellamy, 2008; Proctor & Rosen, 2008). Thomas Prohaska and Caryn Etkin (2010) outline some of the challenges in translating research to implementation in programs:

1. Researchers tend to focus on the effectiveness of the intervention in producing a desired outcome, with less consideration given to whether the effectiveness of the intervention translates to different settings. As a result practitioners wonder whether the findings have applicability to their setting.

2. Researchers often have specific criteria to select their participants and may even have criteria to exclude potential participants. Practitioners may conclude that the study population is unlike the clients they serve and, therefore, the findings are not applicable to their clients.

3. Researchers tend to focus on clinical outcomes. Practitioners and agency stakeholders are interested in achieving success with clinical outcomes, but they also have other factors to consider, including cost in achieving clinical outcomes as well as relationship to agency mission. Further, outcomes important to clients may differ from outcomes achieved in research studies.

4. Researchers suggest that there be treatment fidelity, in other words, that the delivery of the program follow a specific course of action. Practitioners may lack the documentation and materials to adequately implement the program as designed.

The translation of research findings to their application for practice cuts across disciplines and is not unique to social work. The National Institute of Mental Health’s National Advisory Mental Health Council’s Workgroup on Services and Clinical Epidemiology Research noted:

Simply creating an inventory of evidence-based treatments will not result in their broad implementation in practice. In fact, it has been well documented that, for various reasons, health care delivery systems do not implement interventions that have been shown to be effective in a small number of settings and were published in journal articles. (U.S. Department of Health and Human Services, 2006, p. 7)

There are no easy answers to the implementation problem. We hope you are beginning to see the critical role that understanding the research process plays in providing services to client systems. You will need the skill to find relevant research literature and the ability to evaluate studies critically so that you can judge the findings and determine their usefulness to your practice and to your clients. Therefore, as you read this book, you will learn about research issues such as measurement, sampling, and research design; how to find research literature; and how to understand statistics. In each chapter, you will read about the implications of the specific topic for EBP.

Striving for Validity

A scientist seeks to develop an accurate understanding of empirical reality—the reality we encounter firsthand. When is knowledge valid? We have reached the goal of validity when our statements or conclusions about empirical reality are correct. You look out your window and observe that it is raining—a valid observation,
if your eyes and ears are to be trusted. You pick up the newspaper and read that the rates of violence may be climbing after several years of decline. You are less certain of the validity of this statement, based as it is on an interpretation of some trends in crime indicators obtained through some process that is not explained.

If validity sounds desirable to you, you are a good candidate for becoming a social scientist. A goal of social work research is not to come up with conclusions that people will like or to find answers that make our agencies look better or that suit our own personal preferences; rather, it is to figure out how and why the social world—some aspect of it, that is—operates as it does; how to conduct research that leads to valid interpretations of the social world; how to make useful conclusions about the impact of social policy; and how to formulate valid conclusions about the effects of social work practice with clients. Therefore, we are concerned with three aspects of validity: measurement validity, generalizability, and causal validity (also known as internal validity). We will learn that invalid measures, invalid generalizations, or invalid causal inferences result in invalid conclusions.

**Measurement Validity**

Measurement validity is our first concern in establishing the validity of research results because if we have not measured what we think we measured, we really do not know what we are talking about. Measurement validity is the focus of Chapter 4.

To see how important measurement validity is, let us look at the case of researchers who have found a high level of serious and persistent mental illness among homeless people based on interviews with samples of homeless people at one point in time. Mental illness has typically been measured by individuals’ responses to a series of questions that ask whether they are feeling depressed, anxious, paranoid, and so on. Homeless people more commonly say yes to these questions than do other people, even other extremely poor people who have homes.

For these responses to be considered indicators of mental illness, however, they must indicate relatively enduring states of mind. Critics of these studies note that the living conditions of homeless people are likely to make them feel depressed, anxious, and even paranoid. Feeling depressed may be a normal reaction to homelessness, not an indication of mental illness. Thus, the argument goes, typical survey questions may not provide valid measures of mental illness among the homeless. One careful research study suggests that this criticism is not correct, that homelessness is not in itself a cause of depression. Paul Koegel and M. Audrey Burnam (1992) found that the symptoms of depression most likely to result from the living conditions of some homeless people in Los Angeles, such as having trouble with sleeping or concentrating, were not particularly more common among those studied than among those with homes.

Some measures may not be accurate when applied to different subgroups of the population. Returning to the example of depression, some measures of depression have been criticized as inappropriate when used with older adults (Sharp & Lipsky, 2002), African Americans (Ayalon & Young, 2003; Zauszniewski, Picot, Debanne, Roberts, & Wykle, 2002), and women (Romans, Tyas, Cohen, & Silverstone, 2007; Sigmon et al., 2005). Because these measures may not be accurate, they may overestimate the prevalence of depression for each of these groups.

Suffice it to say at this point that we must be careful in designing our measures and in subsequently evaluating how well they have performed. We must be careful to ensure that the measures are comparable for women and men and for different age groups, ethnic groups, and other groups of the population; we cannot just assume that measures are valid or invalid.

**Generalizability**

The generalizability of a study is the extent to which it can be used to inform us about people, places, or events that were not studied. Generalizability is the focus of Chapter 5. Although most American cities have many
shelters for homeless people and some homeless people sleep on the streets to avoid shelters, many studies of “the homeless” are based on surveys of individuals found in just one shelter. When these studies are reported, the authors state that their results are based on homeless people in one shelter, but then they go on to talk about “the homeless this” and “the homeless that,” as if their study results represent all homeless people in the city or even in the nation.

People may be especially quick to make this mistake in discussing studies of homeless people because it is difficult to track down homeless people outside of shelters and because some shelter directors do not allow researchers to survey individuals at their shelters. If every homeless person were like every other one, generalizations based on observations of one homeless person would be valid. But, of course, that is not the case. In fact, homeless people who avoid shelters tend to be different from those who use shelters, and different types of shelters may attract different types of homeless people. We are on solid ground if we question the generalizability of statements about homeless people based on the results of a survey in just one shelter.

Generalizability has two aspects. **Sample generalizability** refers to the ability to generalize from a sample, or subset, of a larger population to that population. This is the most common meaning of generalizability. Sample generalizability is a key concern in survey research. A community organizer may study a sample of residents living in a particular neighborhood in order to do a needs assessment survey and then generalize the findings to all the residents of the neighborhood. The value of the findings is enhanced if what the community organizer learns is representative of all the residents and not just those residents who were surveyed.

**Cross-population generalizability** refers to the ability to generalize from findings about one group, population, or setting to other groups, populations, or settings (see Exhibit 1.6). In this book, we use the term **external validity** to refer only to cross-population generalizability, not to sample generalizability.

Cross-population generalizability occurs to the extent that the results of a study hold true for multiple populations; these populations may not all have been sampled, or they may be represented as subgroups within the sample studied. Consider the debate over whether social support reduces psychological distress among homeless people as it does among housed people. A study based on a sample of only homeless people could not, in itself, resolve this debate. But in a heterogeneous sample of both homeless and housed people, the effect of social support on distress among both groups could be tested.

Or consider this when you read about an intervention to help homeless individuals obtain and maintain a permanent residence. It is likely that such a study is done in a particular agency, serving homeless individuals with particular characteristics, living in a particular community. Ideally, you would like to be able to implement that intervention with the hope of the same success in your agency, working with your particular clients, in your particular community. You will have greater confidence in implementing the treatment if there is evidence of cross-population generalizability.

Generalizability is a key concern in research design. We rarely have the resources to study the entire population that is of interest to us, so we have to select cases to study that will allow our findings to be generalized to the population of interest. We can never be sure that our propositions will hold under all conditions, so we should be cautious in generalizing to populations that we did not actually sample.

**Causal Validity**

**Causal validity**, also known as **internal validity**, refers to the truthfulness of an assertion that A causes B. It is the focus of Chapter 6.
Most research seeks to determine what causes what, so social scientists frequently must be concerned with causal validity. For example, Russell Schutt (2011) asked whether independent apartments would be as effective as group homes for individuals who had been homeless and were diagnosed with serious mental illness. They could have compared people who had lived in one of these two types of housing, but it is quite likely that such individuals who ended up living in independent apartments would differ in important ways from those who were living in group homes. Instead, they designed an experiment in which individuals in need of housing were assigned randomly to either individual apartments or group homes (all the participants were assigned case managers). This procedure made it unlikely that people who were less sociable, more eager to
live independently, less ill, younger, and so on were disproportionately placed in the independent apartments. Therefore, differences in housing outcomes were more likely to be due to the differences in the types of housing rather than to differences in the types of people being housed. Participants in the group homes benefited more—in terms of housing retention and cognitive functioning, so Schutt and his coresearchers concluded that group homes were more effective than independent apartments for homeless persons who are seriously mentally ill (see Exhibit 1.7).

Establishing causal validity can be quite difficult. You will learn in subsequent chapters how experimental designs and statistics can help us evaluate causal propositions, but the solutions are neither easy nor perfect: We always have to consider critically the validity of causal statements that we hear or read.

**Social Work Research in a Diverse Society**

Social work research is conducted in an increasingly diverse society. In the past, diversity was primarily associated with race and ethnicity (National Association of Social Workers, 2001; Van den Berg & Crisp, 2004), but now includes “people of different genders, social classes, religious and spiritual beliefs, sexual orientation, ages, and physical and mental abilities” (National Association of Social Workers, 2001, p. 8). Although there is much that these groups share, there is also an increased awareness that there are distinct cultural, social, and historical experiences shaping and influencing group experiences. Just as social work practitioners are
expected to engage in culturally competent practice, they must recognize that cultural norms impact the research process, whether it is the willingness to participate in research activities, the meaning ascribed to abstract terms and constructs, the way data are collected, or the interpretation of the findings. The failure by researchers to adequately address the cultural context impacts in different ways the research process and, ultimately, the validity and generalizability of research findings.

Historically, women and ethnic minorities have been underrepresented in research studies and, more specifically, in clinical studies testing the impact of health and mental health interventions. The reluctance of different groups to participate in research may be due to different reasons, such as distrust of the motives of the researchers (Beals, Manson, Mitchell, Spicer, & AI-SUPERPFP Team, 2003; Sobeck, Chapleski, & Fisher, 2003), historical experiences, not understanding the research process, not seeing any benefit to participation (Beals et al., 2003), and misuse of findings to the detriment of their communities (Sobeck et al., 2003). Inadequate representation makes it more difficult to conclude, for example, that the results from a primarily White sample can be generalized to other ethnic groups.

Cultural differences given to the meaning of different concepts, particularly psychological concepts, can also impact the validity of the research. Social work researchers use a variety of measurement instruments, but often people of color, women, the poor, and other groups have not been adequately represented in the development or testing of these measurement instruments (S. Witkin, 2001). It is important to determine whether the concepts being measured have the same meaning and are manifested in the same way across different cultural groups. Measurement bias can result in misidentifying the prevalence of a condition and result in group differences that may not actually exist.

The quality of information obtained from surveys is in part dependent on the questions that are asked; there is an assumption that respondents share a common understanding of the meaning of the question and willingness or unwillingness to answer the question. Yet questions may have different meanings to different groups, may not be culturally appropriate, and even when translated into a different language may lack equivalent connotations (Pasick, Stewart, Bird, & D’Onofrio, 2001). For example, Rena Pasick and her colleagues found that the concept of routine checkup was unfamiliar to their sample of Chinese Americans, there was no similar concept in the Vietnamese language, and some Latina respondents did not understand the question nor could they offer alternative language. The researchers had to find other ways to ask the question to get the information they desired.

Data must be analyzed carefully. Often ethnic and racial minorities are compared to the majority population; in doing so, we may be treating these differences as deficits when in fact they reflect cultural differences. In comparison studies, it is important to control for the impact of socioeconomic status given disparities in economic well-being. How data are reported must respect confidentiality. Beals and her colleagues (2003) noted that American Indian and Alaska Native communities had experienced research efforts that resulted in negative stereotypes and publicity for their communities; ensuring confidentiality is not limited to the individual respondent but also to the community.

As you can see from this brief introduction, the norms that develop within population subgroups have an impact that cuts across the research process. As you read each chapter, you will learn both the kinds of questions that researchers ask and the strategies they use to ensure that their research is culturally competent.
Descriptive Research

Defining and describing social phenomena of interest is a part of almost any research investigation, but descriptive research is often the primary focus of the initial research about some issue. Descriptive research typically involves the gathering of facts. Some of the central questions asked in research on homelessness have been: Who is homeless? What are the needs of homeless people? How many people are homeless? Measurement (the topic of Chapter 4) and sampling (Chapter 5) are central concerns in descriptive research. Survey research (Chapter 9) is often used for descriptive purposes.

Example: Who Are the Homeless?

In 2005, Apt Associates and the University of Pennsylvania Center for Mental Health Policy and Services Research designed and implemented the *Annual Homeless Assessment Report* to address these questions (U.S. Department of Housing and Urban Development [HUD], 2007). The study was designed to provide a snapshot of homeless persons using a homeless residential service during a 3-month period in 2005. To do so, they drew a nationally representative sample of communities participating in Continuums of Care (CoC). Using a sampling frame of Community Development Block Grant (CDBG) jurisdictions, they included the 18 largest CDBGs. They then divided the remaining CDBGs into four geographic regions and subdivided the regions by size. Within each group, the researchers randomly selected 62 CDBGs. The data were retrieved from each setting’s Homeless Management Information System, which was used to store data on homeless individuals and families.

The design of the survey reinforces the importance of social scientific methods. Clear definitions were necessary, and the researchers had to carefully define many key concepts such as *continuums of care*, *homeless*, and *family*. The selection method had to ensure that the findings would be generalizable beyond the selected settings. Yet the characterizations of the homeless clients were limited to people living in communities with CoCs; these communities account for only 92% of the U.S. populations. And the findings could only be generalized to people found in residential assistance programs and not to other homeless individuals.

This study revealed the diversity among the homeless population. About 34% of homeless people were members of homeless families, 65% were men, 59% were non-White, 25% were disabled, and 23% were veterans. Some characteristics of homeless individuals differed from homeless families; for example, adult males were less likely to be part of homeless families than were adult females.

Exploratory Research

Exploratory research seeks to learn how people get along in the setting under question, what meanings they give to their actions, and what issues concern them. The goal is to learn “what is going on here” and to investigate social phenomena without expectations. This purpose is associated with the use of methods that capture large amounts of relatively unstructured information. Research like this frequently involves qualitative methods, which are the focus of Chapter 10.

Example: What Is It Like to Live in an Emergency Shelter?

Researchers investigating homelessness in the 1980s were encountering a phenomenon with which they had no direct experience. Thus, an early goal was to find out what it was like to be homeless and how homeless people made sense of their situation. Alice Johnson (1999) wanted to learn about the events that led women with children to seek emergency shelter and what it was like for them to live there. To answer these questions, Johnson conducted an exploratory study using the personal narratives of women who were ex-residents of an emergency shelter in Connecticut. She interviewed 25 women with children who, when they came to the
shelter, were not recipients of Aid to Families with Dependent Children. The interviews typically took place in the women's current residences and lasted between 1 and 2 hours.

One research focus was the women's perspective about entering and living in the emergency shelter. Alice Johnson (1999) found that reactions changed over time. Initially, the women reported feeling depressed or lonely:

I was very depressed. Especially when you have no family near you, no friends, or nobody. It's a very depressing feeling. I was depressed in the first week. I did a lot of crying. I was in my room a lot. (p. 50)

After this initial reaction to the shelter, the women developed new perceptions about their problems. The women reported that they started to see their own lives as being better in comparison with the lives of other women in the shelter. Many reported learning that they had to be strong to take responsibility for providing for their children.

I'm going to be honest. What helped me was my son. I would look on my son and I'd say, "I have to live for him." That's what picked me up. That's what told me to get going. For him. Find anything—whatever I can get. Go for it because of him. (A. Johnson, 1999, p. 52)

Other women found that the shelter provided respite from their problems and an opportunity to come to grips with their problems. Finally, the women saw this respite as an opportunity to begin planning for their future. Johnson found that the women ultimately saw the shelter as a positive experience. They saw living there as an opportunity to deal with their problems; the shelter was a place where they received emotional support and tangible help, learned how to navigate social services, and saved money. Living in the shelter afforded them the opportunity and time to restore stability to their family life.

Alice Johnson's (1999) study was carried out in one setting and with a select group of participants. This points to the issue of generalizability. Other exploratory studies of life in homeless shelters have described experiences that were less positive. For example, Sarah DeWard and Angela Moe (2010) were interested in learning how women with families adapted to conflicting shelter objectives, that is, enforcement of rules and regulations while at the same time creating an environment to build the residents’ independence and self-sufficiency. They interviewed 20 women and found that the women used three strategies—unquestioned submission to the institution, adaptation by reframing their identity or place within the hierarchy, and resistance—thereby retaining their identity and sense of themselves. They described their experiences as negative.

**Explanatory Research**

Many consider explanation the premier goal of any science. **Explanatory research** seeks to identify causes and effects of social phenomena and to predict how one phenomenon will change or vary in response to variation in some other phenomenon. Homelessness researchers adopted explanation as a goal when they began to ask such questions as: Why do people become homeless? Does the unemployment rate influence the frequency of homelessness? Explanatory research depends on our ability to rule out other explanations for our findings, to demonstrate a time order between two events, and to show that the two events are related to each other. Research methods used to identify causes and effects are the focus of Chapter 6.

**Example: Why Do People Become Homeless?**

Peter Rossi’s (1989) classic research on homelessness was designed to understand why people become homeless. His comparison of homeless people with other extremely poor Chicagoans allowed him to address this
explanatory research question: Why do people become homeless? Rossi surveyed a sample of homeless people in shelters and all those he and his assistants could find on the streets. The street sample was something of a challenge. Rossi consulted with local experts to identify which of Chicago’s 19,400 blocks were the most likely resting places of homeless people at night. Then he drew samples of blocks from each of the three resulting categories: blocks with a high, medium, and low probability of having homeless people at night. Finally, Rossi’s interviewers visited these blocks on several nights between 1 a.m. and 6 a.m. and briefly interviewed people who seemed to be homeless.

After extensive analysis of the data, Rossi (1989) developed a straightforward explanation of homelessness: Homeless people are extremely poor, and all extremely poor people are vulnerable to being displaced because of the high cost of housing in urban areas. Those who are most vulnerable to losing their homes are individuals with problems of substance abuse or mental illness, which leave them unable to contribute to their own support. Extremely poor individuals who have these characteristics and are priced out of cheap lodging by urban renewal and rising housing prices often end up living with relatives or friends. However, the financial and emotional burdens created by this arrangement eventually strain social ties to the breaking point, and a portion of these people therefore end up homeless.

Rossi (1989) made a series of recommendations to reduce homelessness based on his analysis of why people become homeless. Some examples are implementing aggressive outreach programs to extend welfare coverage to the many eligible poor people and families who do not now receive it, subsidizing housing for younger unattached people, stopping the release of chronically mentally ill people from hospitals until supportive living arrangements are arranged, and furnishing support to families who subsidize their destitute, unattached members.

**Evaluation Research**

**Evaluation research,** frequently referred to as **program evaluation** or **practice evaluation,** involves searching for practical knowledge in considering the implementation and effects of social policies and the impact of programs. Carol Weiss (1998) defines **evaluation** as “the systematic assessment of the operation and/or the outcomes of a program or policy, compared to a set of explicit or implicit standards, as a means of contributing to the improvement of the program or policy” (p. 4). Evaluation research uses research methods and processes for a variety of different tasks, such as describing the clients using a particular program, exploring and assessing the needs of different communities or population groups, evaluating the effectiveness of a particular program, monitoring the progress of clients, or monitoring the performance of staff. In general terms, evaluation research may be descriptive, exploratory, or explanatory. These same tools provide a standard by which we can also evaluate the evaluation.

Because evaluation research or program evaluation uses the same tools as other research, the two often become confused in the minds of readers and even researchers. The distinctions are important, particularly as they relate to the ethical conduct of research, which we discuss in Chapter 2, and, specifically, to institutional review processes to protect human subjects as required. The Centers for Disease Control and Prevention’s (2010) **Distinguishing Public Health Research and Public Health Nonresearch** provides a useful distinction between the two based on the intent of the activity. The intent of research is to develop or contribute to generalizable knowledge, with the beneficiaries of the research usually being society and perhaps the study participants. The intent of evaluation is to assess whether a program is achieving its objectives with a specific group as a means to monitor and improve the program; therefore, it is not research. The beneficiaries of the information are the program providers and/or the clients receiving the services. An evaluation becomes research when it is designed to test a new, previously untested, or modified intervention, or when the intent of the evaluation becomes an effort to generate generalizable knowledge.
Example: Should Housing or Treatment Come First?

The problem of homelessness spawned many new government programs and, with them, evaluation research to assess the impact of these programs. Should housing or treatment come first for homeless people with serious mental illness and, in particular, for those persons who use and/or abuse drugs and alcohol? Deborah Padgett, Leyla Gulcur, and Sam Tsemberis (2006) addressed this policy dilemma as part of a 4-year longitudinal study comparing housing-first and treatment-first programs. Participants were randomly assigned to one of the two groups: the housing-first model, in which the homeless are given immediate access to housing and offered an array of services, and abstinence is not a prerequisite, or the treatment-first model, in which housing is contingent on sobriety. People were randomly assigned to the two types of models so the researchers could be more confident that any differences found between the groups at the study's end had arisen after the subjects were assigned to the housing.

After 4 years, 75% of the housing-first clients were in a stable residence for the preceding 6 months, whereas only 50% of the treatment-first group had a stable residence. In addition, the researchers found that there were no statistically significant differences between the two groups on drug or alcohol use. The researchers concluded that the requirement for abstinence had little impact among mentally ill respondents whose primary concern was housing.

Quantitative and Qualitative Methods

Did you notice the difference between the types of data the studies used? The primary data collected in the study for HUD (2007) were counts about the homeless population, how many had families, their gender, race, and other characteristics. These data were numerical, so we say that this study used quantitative methods. Rossi’s (1989) survey and the Padgett et al. (2006) study also used quantitative methods; they reported their findings as percentages and other statistics that summarized homelessness. In contrast, Alice Johnson (1999) and DeWard and Moe (2010) used personal narratives—original text—to understand life in a homeless shelter; because they used actual text, and not counts or other quantities, we say that their works used qualitative methods.

The distinction between quantitative and qualitative methods involves more than just the type of data collected. Quantitative methods are most often used when the motives for research are explanation, description, or evaluation. Exploration is most often the motive for using qualitative methods, although researchers also use these methods for descriptive and evaluative purposes as well. The goals of quantitative and qualitative researchers may also differ. Whereas quantitative researchers generally accept the goal of developing an understanding that correctly reflects what is actually happening in the real world, some qualitative researchers instead emphasize the goal of developing an “authentic” understanding of a social process or social setting. An authentic understanding is one that reflects fairly the various perspectives of participants in that setting. We highlight several other differences between quantitative and qualitative methods in each of the book’s chapters.
Important as it is, we do not want to place too much emphasis on the distinction between quantitative and qualitative orientations or methods. Social work researchers often combine these methods to enhance their research. For example, Hicks-Coolick, Burnside-Eaton, and Peters (2003) used an interview guide with directors of six homeless shelters to understand the kinds of services needed by homeless children and then sent a mail survey to the directors of 600 shelters to augment their qualitative data. The use of both methods, called mixed methods, provided a clearer understanding of the reality of service delivery and needs.

Strengths and Limitations of Social Work Research

The studies we have highlighted in this chapter are only several of the dozens of large studies of homelessness done since 1980, but they illustrate some of the questions that social science research can address, several different methods that researchers can use, and ways that research can inform public policy.

Notice how each of the studies was designed to reduce the errors common in everyday reasoning:

- The clear definition of the population of interest in each study and the selection of a broad, representative sample of that population in two studies (HUD, 2007; Rossi, 1989) increased the researchers’ ability to draw conclusions without overgeneralizing findings to groups to which they did not apply.

- The use of surveys in which each respondent was asked the same set of questions (e.g., HUD, 2007; Padgett et al., 2006; Rossi, 1989) reduced the risk of selective or inaccurate observation, as did careful and regular note-taking by the field researchers (e.g., DeWard & Moe, 2010; Johnson, 1999).

- The risk of illogical reasoning was reduced by carefully describing each stage of the research, clearly presenting the findings, and carefully testing the basis for cause-and-effect conclusions (e.g., Padgett et al., 2006).

- Resistance to change was reduced by designing an innovative type of housing and making an explicit commitment to evaluate it fairly (e.g., Padgett et al., 2006).

Nevertheless, we would be less than honest if we implied that we enter the realm of beauty, truth, and light when we engage in social work research or when we base our opinions only on the best available social research. Research always has some limitations and some flaws (as does any human endeavor), and our findings are always subject to differing interpretations. Social work research permits us to see more, to observe with fewer distortions, and to describe more clearly to others the basis for our opinions, but it will not settle all arguments. Others will always have differing opinions, and some of those others will be social scientists and social workers who have conducted their own studies and drawn different conclusions. Are people encouraged to get off welfare by requirements that they get a job? Some research suggests that they are, other research finds no effect of work incentives, and one major study found positive but short-lived effects. More convincing answers must await better research, more thoughtful analysis, or wider agreement on the value of welfare and work.

But even in areas of research that are fraught with controversy, where social scientists differ in their interpretations of the evidence, the quest for new and more sophisticated research has value. What is most important for improving understanding of the social world is not the result of any particular study, but the accumulation of evidence from different studies of related issues. By designing new studies that focus on the
weak points or controversial conclusions of prior research, social scientists contribute to a body of findings that gradually expands our knowledge about the social world and resolves some of the disagreements about it.

Social work researchers will always disagree somewhat because of their differing research opportunities, methodological approaches, and policy preferences. For example, much social science research indicates that low levels of social support increase the risk of psychological depression. But are these answers incorrect in some circumstances? One study of homeless people suggested that social support was not associated with less depression, perhaps because of the extremely stressful circumstances homeless people face (La Gory, Ritchey, & Mullis, 1990). But then another study using a different indicator found social support to be as beneficial for homeless people as it is for others (Schutt, Meschede, & Rierdan, 1994). Additional studies using a variety of methods may resolve this discrepancy.

Whether you plan to conduct your own research projects, read others’ research reports, or just think about and act in the social world, knowing about research methods has many benefits. This knowledge will give you greater confidence in your own opinions, improve your ability to evaluate others’ opinions, and encourage you to refine your questions, answers, and methods of inquiry about the social world. Also, having the tools of research can guide you to improve the social programs in which you work, to provide better interventions with your clients, and to monitor their progress.

We hope this first chapter has given you an idea of what to expect in the rest of the book. Our aim is to introduce you to social work research methods by describing what social scientists have learned about the social world as well as how they learned it. The substance of social science inevitably is more interesting than its methods, but the methods also become more interesting when they are not taught as isolated techniques. We have focused attention on research on homelessness in this chapter; in subsequent chapters, we introduce research examples from other areas.

The theme of validity ties the book’s chapters together. You must learn to ask of each research technique how it helps us come to more valid conclusions. Each technique must be evaluated in terms of its ability to help us with measurement validity, generalizability, and causal validity. You must ask critical questions about each research project you examine: How valid are its conclusions? Are the findings relevant to my agency? To my clients? To my community?

Chapter 2 continues to build the foundation for our study of social work research by reviewing the types of problems that researchers study, the role of theory, the major steps in the research process, and other sources of information that may be used in social work research. In Chapter 3, we review generally accepted ethical and scientific guidelines for the conduction of research. Chapters 4, 5, and 6 focus on measurement, sampling, and research design issues that must be considered in any social work research project. In Chapter 4 we discuss the specific techniques used to maximize the validity of our measures. Chapter 5 introduces sampling and recruiting participants for research studies. Chapter 6 illustrates how research can be used to answer causal questions such as: Is cognitive-behavioral therapy effective in reducing depression?

Chapters 7, 8, 9, and 10 introduce the four most important methods of data collection. Group designs, including experimental studies, quasi-experimental studies, and nonexperimental studies, are the subjects of Chapter 7. These designs are often used for practice and policy evaluation. We turn to single-subject designs in
Chapter 8; these designs are particularly effective methods to monitor and evaluate individual client progress. Survey research is one of the most common methods of data collection, and we devote a lot of attention to the different types of surveys in Chapter 9. Chapter 10 shows how field research techniques can uncover aspects of the social world that we are likely to miss in experiments and surveys, as well as how we can gain a better understanding of the experiences of our clients. We continue our discussion of qualitative methods in Chapter 11, and we introduce you to methods to analyze qualitative data.

Chapters 12 and 13 focus on different methods to use these research designs. Chapter 12 introduces mixed methods that combine designs and meta-analysis, which is an analytic technique to analyze data presented in published studies. In Chapter 13, we describe evaluation research and its relationship to the four research designs.

Chapter 14 provides an overview of the statistics that are needed to analyze most social work research data. This chapter is not a substitute for an entire course in statistics, but it gives you a good idea of how to use statistics in reporting the results of studies that you conduct and in interpreting the results of research reported by others. Finally, Chapter 15 focuses on the contents of research reports and the process of developing them. We give special attention to how to formulate research proposals and how to critique or evaluate reports of research that we encounter.

Key Terms

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<tr>
<th>Adherence to authority</th>
<th>Ilogical reasoning</th>
<th>Qualitative methods</th>
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<tr>
<td>Causal validity</td>
<td>Inaccurate observation</td>
<td>Quantitative methods</td>
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<tr>
<td>Cross-population generalizability</td>
<td>Incomplete observation</td>
<td>Resistance to change</td>
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<tr>
<td>Descriptive research</td>
<td>Internal validity</td>
<td>Sample generalizability</td>
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<td>Evaluation research</td>
<td>Measurement validity</td>
<td>Science</td>
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<td>Explanatory research</td>
<td>Mixed methods</td>
<td>Selective observation</td>
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<td>Exploratory research</td>
<td>Overgeneralization</td>
<td>Social science</td>
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<td>External validity</td>
<td>Practice evaluation</td>
<td>Social scientific approach</td>
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<td>Generalizability</td>
<td>Program evaluation</td>
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Highlights

- Social work research cannot resolve value questions or provide permanent, universally accepted answers.
- Empirical data are obtained in social work investigations from either direct experience or the statements of other people.
- Four common errors in reasoning are overgeneralization, selective or inaccurate observation, illogical reasoning, and resistance to change. These errors result from the complexity of the social world, subjective processes that affect the reasoning of researchers and the people they study, researchers’ self-interest, and unquestioning acceptance of tradition or of those in positions of authority.
- Social science is the use of logical, systematic, documented methods to investigate individuals, societies, and social processes, as well as the knowledge produced by these investigations.
- Social science methods are used by social work researchers and practitioner-researchers to uncover the nature of a social
condition, to test the accuracy of assumptions about the causes of the social condition, to identify populations at risk, and to test and evaluate the effectiveness of interventions, programs, and policies designed to ameliorate the social condition.

- Social work research can be descriptive, exploratory, explanatory, or evaluative—or some combination of these.

- Valid knowledge is a central concern of scientific research. The three components of validity are measurement validity, generalizability (both from the sample to the population from which it was selected and from the sample to other populations), and causal (internal) validity.

- Quantitative and qualitative methods structure research in different ways and are differentially appropriate for diverse research situations.

Discussion Questions

1. Select a social issue that is of interest to you. Discuss your beliefs about this social issue, for example, its causes. What is the source of these beliefs? What type of policy, program, and intervention for helping resolve this social issue would be consistent with your beliefs?

2. Social work research using different methods can yield differing results about the same topic. How might experimental, survey, and qualitative methods lead to different results in research on the impact of welfare programs?

3. Discuss three advantages of qualitative methods and three advantages of quantitative methods. What motives for research do these two methodological approaches reflect?

Practice Exercises

1. Find a report of social work research in an article in a daily newspaper. What were the major findings? How much evidence is given about the measurement validity, generalizability, and causal validity of the findings? What additional design features might have helped to improve the study’s validity?

2. Read the abstracts (initial summaries) of each article in a recent issue of a major social work journal. (Ask your instructor for some good journal titles.) On the basis of the abstract only, classify each research project represented in the articles as primarily descriptive, exploratory, explanatory, or evaluative. Note any indications that the research focused on other types of research questions.

Web Exercise

1. Prepare a 5- to 10-minute class presentation on the U.S. Department of Housing and Urban Development report Homelessness: Programs and the People They Serve (www.huduser.org/portal/publications/homeless/homelessness/contents.html). Write up a brief outline for your presentation, including information on study design, questions asked, and major findings.

STUDENT STUDY SITE

To complete the web exercise, please access the study site at www.sagepub.com/engelprsw3e, where you will find the exercises with accompanying links. You’ll also find other useful study materials, such as self-quizzes and eFlashcards for each chapter, along with a group of carefully selected articles from research journals that illustrate the major concepts and techniques presented in the book.
Developing a Research Proposal

1. Will you develop a research proposal in this course? If so, you should begin to consider your alternatives.
2. What topic would you focus on if you could design a social work–related research project without any concern for costs or time? What are your reasons for studying this topic? Develop four questions that you might investigate about the topic you just selected. Each question should reflect a different research motive: description, exploration, explanation, and evaluation. Be specific.
3. Which question most interests you? Would you prefer to attempt to answer that question with quantitative or qualitative methods? Why?

A Question of Ethics

Throughout the book, we discuss the ethical challenges that arise in social work research. At the end of each chapter, we ask you to consider some questions about ethical issues related to that chapter’s focus. We introduce this critical topic formally in Chapter 3, but we begin here with some questions for you to ponder.

1. The chapter began with a brief description from a news article of a homeless person named Burt. We think stories like this can provide important information about the social problems that social workers confront. But what would you do if you were interviewing homeless persons and one talked of taking his own life out of despair? What if he was only thinking about it? Can you suggest some guidelines for researchers?

2. You read in this chapter that Deborah Padgett, Leyla Gulcur, and Sam Tsemberis (2006) found that their housing-first program enabled homeless persons to spend more time housed than those required first to undergo treatment for substance abuse. If you were these researchers, would you announce your findings in a press conference and encourage relevant agencies to eliminate abstinence requirements for homeless persons with substance abuse problems? When would you recommend that social work researchers urge adoption of new policies based on research findings? How strong do you think the evidence should be?