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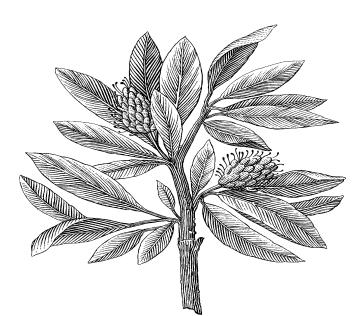
Bachelor thesis in pedagogy

Evidence-based practice for adolescents with substance abuse disorder

Challenges in the implementation of evidence-based practice

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Abstract

Linnéuniversitetet Institutionen för pedagogik Socialpedagogik med inriktning mot ungdoms-Och missbruksvård, uppsatsarbete 15 hp

Titel: Evidence-based practice for adolescents with substance abuse disorder Evidensbaserad praktik för ungdomar med missbruksproblem

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The aim of this scientific research is to investigate how social workers in social service agencies that are determined to work in line with the critical appraisal model make decisions on treatment methods for adolescents with substance abuse disorder. The research is also intended to investigate the challenges involved in the implementation of evidence-based practice (EBP). It is a qualitative study with semi structured interviews. The study results reveal that social workers in Sweden do provide evidence-based treatment methods for adolescents with substance abuse disorder but they do not go through scientific research before deciding on treatment methods for clients. The National Board of Health and Welfare National guidelines (Socialstyrelsens nationella riktlinjer) suggest evidence-based treatment methods for social work practitioners and all they need to do is to select treatment methods that match the needs of clients from a list of evidence-based treatment methods. The study also reveals that case officers make decisions on treatment methods for clients but therapists must not implement the treatment methods if they do not find it useful to clients. In addition, Swedish social workers to a greater extent are provided with resources that can lead to a successful implementation of EBP. Out of seven participants in the current study, only one participant mentioned lack of financial resources as an obstacle to the provision of evidence-based training to social workers in the institution where he works.

Keywords

Evidence-based, treatment methods, decision-making, social workers, adolescents

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1 Introduction

Evidence-based practice (EBP) has been defined as "the conscientious, explicit, and judicious use of the best available scientific evidence in professional decision making. More simply defined, it is the use of treatments for which there is sufficiently persuasive evidence to support their effectiveness in attaining the desired outcomes" (Roberts & Yeager 2006).

The use of EBP started in 1990 among medical doctors and the concept was later introduced in the field of social work in the United States and other European countries like the United Kingdom and Sweden. The main idea of EBP in the field of social work was to enable social workers to incorporate scientific research in their everyday practice with clients (Bergmark, Bergmark & Lundström 2011). The term "clients" in this research refers to the study sample "adolescents with substance abuse disorder". This is an evaluation study because the study is intended to assess the decision-making process of treatment methods for clients, that is if social workers do combine their professional knowledge with scientific research, clients value and preferences before making a decision on treatment methods. The study is also intended to assess the challenges involved in the implementation of evidence-based treatment methods.

In the early 21st century evidence-based practice (EBP) began gaining ground in most universities, mental health centers, schools, and family treatment centers. Evidence-based practice requires the professional to make use of scientific research, critically appraise the evidence found, take into consideration the client's values and preferences as well as the practitioner's professional experience and critical thinking before deciding on treatment methods or interventions. This study is intended to investigate how social workers who are determined to apply evidence-based treatment methods to clients make decisions on treatment methods. The study is also intended to investigate the challenges involved in the implementation of evidence-based treatment methods to clients. This

research area is particularly important because evidence-based practice is very vital in social work since it gives clients the opportunity to get trustworthy interventions that can affect their lives in a positive way. Evidence-based practice also helps to eliminate probability in the decision-making process of treatment methods for clients since practitioners rely mostly on empirical data in the decision-making process of treatment methods. Evidence-based practice also requires practitioners to evaluate the outcome of any given intervention. This brings us to two fundamental components of EBP. The first component deals with the decision-making process of treatment methods which emphasizes that all treatment methods offered to clients must be based on research. The second component deals with the evaluation of any given intervention or treatment method. Practitioners must be able to evaluate any given intervention to make sure that it is being carried out in the correct way and that the intended outcomes are achieved. EBP provides practitioners with best practice guidelines and treatment protocols that enable them to provide interventions that can result in a positive change in the lives of clients, families and groups in need of assistance (Roberts & Yeager 2006). The concept (EBP) is considered as an effort to reduce health care costs and at the same time improve health care outcomes. It helps to ensure good quality intervention while reducing treatment costs as well. Economic and administrative pressures have made EBP an important concept in contemporary clinical social work practice (Drisko & Grady 2015).

EBP is a very important concept in the decision-making process of treatment methods since it helps practitioners to provide good quality interventions to clients. According to Albert Roberts & Kenneth Yeager (2006) EBP was introduced in social work because practitioners were using treatment methods found to be harmful to clients. Haluk Soydan & Lawrence Palinkas (2014) also stated that EBP was introduced in social work because there were demands for improvements in the quality of interventions either in terms of better outcomes (e.g., reduction of symptoms, client financial independence, improved quality of life) or in terms of the way in which services are delivered to clients (e.g., reduction in cost, reduction in duration of successful treatment methods, etc.). This model helps to improve practitioners' knowledge since they are expected to effectively search, evaluate, and apply current best evidence. This increases the likelihood that good quality interventions will be offered to clients. Critical appraisal is the most dominant model in EBP in social work and the main idea of critical appraisal is the ability of social workers to be able to pay attention to clients' problems and to provide clients with quality interventions that can lead to a positive change (Björk 2019). The principles of EBP will be respected and attained if practitioners give priority to scientific research, avoid interventions that can cause damage to clients, respect clients autonomy and include them in the decision-making process.

Despite the numerous benefits associated with EBP there are still some challenges that hinder the success of EBP according to critics of the model. Critics of EBP claim that social work practitioners are often too busy and have very little or no time to search for relevant evidence on treatment methods. In addition, techniques on critical appraisal require some sort of training and skills that some practitioners do not have (Roberts & Yeager 2006). Roberts & Yeager (2006) contradicts this point by stating that after learning the basics, high-quality searches need not take more than a few minutes. Further, once information is gathered, practitioner knowledge is continually enhanced with respect to both client conditions and effective search techniques, making future searches even more efficient". But that notwithstanding, insufficient equipment and funding for good database access, including access to full text articles and a lack of evidence in some useful areas can be a big challenge to social workers (ibid 2006).

Soyan & Palinkas (2014) stated that organizations most likely to implement and sustain EBP must possess characteristics such as a formalized and centralized structure with a formal research infrastructure, possess a culture that gives priority to learning, innovation and change, good leaders who are committed to innovation or new methods like EBP and are willing to implement EBP, a

designated advocate for the EBP, and qualified practitioners who possess the required skills and training. Practitioners that can implement and sustain EBP must also possess good documentation skills, the ability to use new knowledge and support knowledge sharing.

2 Aim of study and research questions

The aim of this scientific research is to investigate how social workers in social service agencies that are determined to work in line with evidence-based practice make decisions on treatment methods for adolescents with substance use disorder. The study is also intended to investigate the challenges involved in the implementation of EBP by social workers.

Research questions

- 1. Who are those responsible for the decision-making process on treatment methods and how is it carried out?
- 2. What are the decisions based on and how are they arrived at?
- 3. What are the challenges involved in the implementation of EBP?

3 Background

This section describes the principles of EBP, some important concepts of the model as well as the steps involved in applying evidence-based practice treatment methods for clients.

3.1 Principles of Evidence-based practice

EBP is intended to help clients get interventions that can lead to positive effects thus avoiding harmful interventions and this model has three main principles; the principle of goodness maximization, principle of harm minimization, and the principle of self-determination. Practitioners must be able to implement and respect these principles to help clients achieve positive results from any given intervention. According to the goodness maximization principle, our efforts should be directed towards doing good to others. In other words, social workers should provide clients with treatment methods that will help solve the clients' problems and improve their quality of life. The harm minimization principle emphasizes that social workers must not act in a way that could harm or cause clients to suffer, even if the professional efforts had a good intention. As humans, we may sometimes act with an intention to truly help others, but the end results may be dangerous even if that was not the intention from the very beginning. The harm minimization principle calls for social workers to critically appraise a treatment method before providing it to clients. This will help prevent clients from any sort of danger. The principle of self-determination emphasizes that social workers must be able to take into consideration clients' wishes and preferences, credible science and the professional's knowledge and experience before deciding on treatment methods for clients (Bergmark, Bergmark & Lundström 2011). In a nutshell, the principles of social work practice can be expressed as follows: Do not harm! It is bad and unacceptable to cause harm to clients (Soyan & Palinkas 2014).

3.2 Steps in applying evidence-based practice in social work



In this study I will be focusing on how social workers provide interventions or treatment methods to adolescents with substance abuse disorder from an evidence-based practice perspective. The study will also pay special attention to the limitations of EBP. Evidence-based practice has four sources of knowledge namely, the client's situation and the circumstances in which the client finds his/herself, the client's experiences and wishes. We are all experts in our own lives and no human being can best know the needs and wishes of another person. This point emphasizes that the practitioner has to consider and respect the client's wishes before deciding on any given intervention. The client knows best what sort of intervention can help him/her. Another important source of knowledge is credible scientific research and the social worker's professional knowledge (Socialstyrelsen 2019).

According to Alexander Björk (2019) critical appraisal is the most dominant model in EBP in social work because it provides practitioners with well-established steps to follow before deciding on the best possible treatment methods for the clients. Björk (2019) states that the main idea of critical appraisal is the ability of social workers to be able to pay attention to the clients' problems. To achieve this, the practitioner must formulate a relevant question based on client needs and preferences. After the question formulation, the practitioner will now search for relevant evidence that can provide answers to the question. According to Soyan & Palinkas (2014) evidence can be obtained from academic journals, professional association meetings, conferences or workshops, internet, regular meeting with other professionals, regular staff meetings, local college, or university experts etc. The practitioner must critically appraise the relevant evidence obtained from earlier research and other important sources and integrate the evidence found with his or her professional experience and the client's values before deciding on the best possible interventions. Soyan & Palinkas (2014) states as well that research evidence can be evaluated through its outcomes, experts using the program, credibility of program developers, and if the research evidence has actually been tested. EBP requires clients to be involved in the decision-making process of treatment methods and social workers must evaluate the outcomes of any given intervention. (See also Bergmark et al 2011 for a similar discussion on critical appraisal)

Camilla Udo, Henrietta Forsman, Marcus Jensfelt & Maria Flink (2019) made mention of the three-circle model in EBP in social work. According to these researchers, the three-circle model is very vital in EBP and the model is composed of three main components namely (1) the client's state and circumstance, (2) the research evidence and patient's preferences and (3) the actions integrated with the professional's clinical expertise. The client's state and circumstances can also be described as the client's situation. Treatment methods or interventions should be decided upon by taking into consideration the state of the client. Practitioners have to critically assess if a client is in the right state of mind to undergo a certain treatment before providing the client with such an intervention. As concerns research evidence and patients' preferences, it is of paramount importance that social workers strictly assess the reliability of the research evidence used in order to prevent clients from receiving harmful interventions. Also, all treatment methods provided to clients have to be in line

with the clients' preferences. Clients are experts in their own lives and this is why their preferences have a very vital role in the decision-making process of treatment methods. Practitioners' professional knowledge is also one of the key components in EBP. Practitioners must be able to make use of their professional knowledge, alongside research evidence, clients' values and preferences before deciding on treatment methods for clients.

3.3 Participation and EBP

According to the National Board of Health and Welfare (2019), client participation has to do with the ability of the client to influence his/her life situation and the kind of interventions they receive. In an evidence-based practice, it is the client's situation and experience that is considered the starting point of any given intervention. The client must be involved in the decision-making process of any given intervention. Client involvement in treatment decisions is a prerequisite for EBP. This gives the client the possibility to take responsibility over his/her situation and can give suggestions on the treatment methods he/she thinks can work better. Client participation in the decision-making process of treatment methods can help strengthen their self-esteem since their knowledge and experiences are taken into consideration before implementing any treatment method. When people are involved in their own care their self-esteem is strengthened and this can increase their level of motivation, which can then lead to a positive change. Clients' participation in the decision-making process of treatment methods help them to gain a better level of control over their own life situation. Chapter 3 section 5 of Socialtjänstlagen (SFS 2001:453) also states that interventions given to clients must be decided and implemented together with the client.

3.4 EBP and interagency collaboration

According to the National Institute of Corrections (NIC) the use of EBP requires social workers to accept new ideas, practices and make use of interagency collaboration. Interagency collaboration simply means that social service agencies have to be able to collaborate with each other to be able to come up with better treatment methods. (Belenko, Johnson, Taxman, & Rieckmann 2016). Interagency collaboration or interprofessional collaboration (IPC) can also be defined as the process in which professionals from different institutions or groups work together and support each other to positively impact health care and the treatment methods clients receive. Interagency collaboration can be composed of clinical providers, supervisors, agency directors and program managers who work together to improve their knowledge on Evidence-based Treatment (EBT) and to sustain its use over time. When different agencies collaborate with each other they try to establish baseline knowledge about a particular evidence-based treatment. Professionals, when collaborating with each other, also try to improve on the quality of interventions clients receive, modify a new practice, as well as ongoing data collection. Interprofessional collaboration can lead to increased service access for clients, better treatment methods, and positive treatment outcomes (Hanson, Saunders, Peer, Ralston et al. 2018).

Interagency collaboration can be strengthened if the agencies or professionals involved in the collaboration process promote a shared vision and goals such as ensuring that children and adolescents who need interventions are identified and referred to appropriate service providers. Thus, the promotion of good collaboration among social service agencies will promote exchange of knowledge among practitioners, and this will lead to better improved treatment methods and outcomes for adolescents with substance abuse disorder. Interprofessional collaboration is very essential in EBP because it helps practitioners to work together to improve on the quality of

interventions clients receive, prevent client withdrawal from an ongoing treatment, help client's complete treatment, share information on specific treatment methods, and it also helps practitioners to overcome barriers to any given intervention (ibid 2018).

Although the NIC has encouraged social service agencies to adopt and implement EBP in Substance Use Disorder (SUD) treatment, a good number of social workers still do not work strictly on EBP unfortunately, even though they seem to have accepted the approach and consider it useful. A study was conducted among all community agencies that were supposed to apply EBP and according to the result of the study, only about 50 percent of the agencies routinely use Substance Use Disorder (SUD) assessment tools before making decisions on treatment methods (Belenko et al. 2016). As a result, it is very important to investigate the reasons as to why some social workers in community agencies find it difficult to routinely apply evidence-based treatment to clients even though they seem to have accepted the practice.

4 Previous Research

In this section, we will be looking at some important aspects of EBP discussed by other researchers and this will help to broaden our scope on EBP. This section will provide us with important information that we need to know about our research area. The information obtained from previous research in combination with our interview data will form the basis of our research results.

4.1 Practitioners and EBP

Studies have revealed that attitudes of social work practitioners towards EBP is an important element for the successful utilization and implementation of EBP (James, Lampe, Behnken & Schulz 2019). A study was conducted in Germany with the aim to investigate how social work practitioners utilize empirical knowledge based on the evidence-based practice model. The study revealed that social workers in Germany apply very limited scientific knowledge in their everyday practice with clients, but that they possess a very good reflective and interpretive capacity to better understand clients' situations. The study also revealed that most decisions in social work practice are seldom guided by empirical knowledge, but rather by life and practice experiences. Most decisions in social work are based on an exchange of ideas with colleagues, professional experience and life experience (James et al. 2019). Practitioners' attitudes towards EBP are positive only if the methods sound reasonable to the practitioners themselves and there is also the availability of good training to enable social workers to apply the methods correctly. The result of the study also indicated that social work practitioners believe that further education and exchange of knowledge with colleagues are the most popular sources of knowledge, rather than empirical knowledge. In other words, professional experience and exchange of knowledge with colleagues were considered the most relevant elements in the decision-making process of treatment methods. Theories and empirical knowledge play a very little role (ibid 2019).

Another study was conducted in the Netherlands and the aim was to assess social workers' orientation towards the EBP process. According to the results of the study, the National Association of Social Workers in its professional profile mentioned that there are very little opportunities in the Netherlands to use interventions with empirical evidence and this is simply because more is still to be done in the field of EBP (van der Zwet, Kolmer & Schalk 2016). The study also revealed that a younger generation of social workers are more oriented towards the EBP process than the older generation social workers, who were educated in the pre-EBP era. An explanation to this difference in orientation may be that younger social workers had courses in EBP as students and thereby having a better knowledge of the EBP process than older social workers (van der Zwet et al. 2016).

Participants in the study above were somehow familiar with the EBP process and possessed a positive attitude but their interest and engagement in the EBP process were quite low. But that notwithstanding, social workers who have had courses in EBP as practitioners were more familiar with EBP, had more positive attitudes about it, had more intentions to engage with the EBP process and were even more engaged with the EBP model. The study called for universities to take a more active role in promoting EBP by teaching students and social workers the basic principles of EBP process (ibid 2016).

Professionals' attitudes towards EBP are a determining factor as to whether the implementation of EBP will succeed or not (Kim 2019) Evidence-based practice can easily succeed if practitioners have positive attitudes towards the concept and vice versa. A study was also conducted in China with the aim to assess practitioners' attitudes towards the EBP process. The study results revealed that social workers in Hong Kong practice EBP at a very low rate. In addition, very little is discussed about EBP in social work which differs from other professions like nursing and medicine (Kim 2019). The study also revealed that social workers in Hong Kong are not interested in adopting EBP even when given the requirements to exercise the model. They are less willing to accept new interventions and have a negative view on research and academically developed interventions (ibid 2019).

A study was also conducted in Norway by Tor-Johan Ekeland, Randi Bergem & Vidar Myklebust (2018) and the purpose of the study was to investigate the perceptions and attitudes among Norwegian social workers towards EBP. The study revealed that the government of Norway has implemented several new models and programs for treatment that are considered evidence based such as Parent Management Training, Multisystemic Therapy, Aggression Replacement Training (ART), and Contingency Management. The aim of these policy initiatives was to increase guidance and regulation to help social workers provide trustworthy interventions to clients and to reduce the risk of harmful interventions (Ekeland et al. 2018). The study also indicated that Swedish social workers have a very positive view about EBP but their use of empirical knowledge is still low and this is simply because very few social workers in Sweden have a good knowledge of scientific research (Ekeland et al. 2018).

4.2 Factors relevant for the successful implementation of EBP

The PARIHS (Promoting Action on Research Implementation in Health Services) framework, currently known as IPARIHS (Implementing Promotion Action on Research in Health Services) is a very important model that is often used to guide intervention strategies by practitioners in order to have a successful implementation of evidence-based practice as suggested by Udo et al. (2019). This model tries to explain the interplay between professionals involved in implementing EBP regarding the intervention that needs to be implemented and the entire implementation process. The model indicates some important characteristics that have to be taken into consideration when applying EBP. These characteristics are as follows: the use of reliable evidence by practitioners, the practitioner's skills and knowledge, motivation in the entire process of change, good values and belief, power and authority. These characteristics are very important prerequisites for the successful implementation of evidence-based practice by social work practitioners. In addition, professionals' perspectives, actions and reactions towards EBP will determine the success or failure of EBP. The above characteristics, when correctly applied, will lead to the success of evidence-based practice in social work.

Another important concept in the IPARIHS framework is the kind of intervention or evidence to be implemented by practitioners. A good and trustworthy intervention must possess certain qualities or characteristics such as the source of the evidence, whether the evidence matches the given situation

or the need of the client and how usable the evidence is in real life. The third important concept that can lead to a successful implementation of EBP according to the IPARIHS framework is the context of the organization. The context of organization in this case refers to the formal, informal and senior management leadership and support. Other important factors include the organizational culture, its evaluation and feedback processes, the structure of the organization and its learning networks (ibid 2019).

Organizational logic or the logic of choice is also an important concept that can help facilitate a successful implementation of EBP in an agency or organization. Organizational logic has to do with the decision-making process within an agency or institution regarding treatment methods. The logic of choice regarding treatment methods emphasizes that an efficient treatment decision should be based on treatment alternatives that match clients' situation and taking into consideration the client's preferences. In addition to organizational context, a social worker cannot decide on treatment methods entirely on her own or independently. This is simply because the decision-making process on treatment methods has to conform to the laws and regulations that govern the decision-making process by social workers (Björk 2019).

Organizational factors such as organizational readiness towards EBP, support, culture, climate, and leaders who encourage EBP can lead to a successful implementation of EBP in an organization (James et al. 2019). EBP can be successfully implemented in an organization that has a culture that supports EBP and tries to engage researchers and practitioners in a dialogue about knowledge that is useful in practice. Practitioners in leadership positions are more open to the use of research-based practice methods (ibid 2019).

EBP can be successfully implemented in social work only if social workers believe the model is both important and feasible (van der Zwet et al. 2019). Social workers in the United States for example have had a positive view on the usefulness and importance of EBP for quite a long time. This optimism has led to the development of better teaching techniques to help enlighten social work students on the importance of EBP in the field of social work. It is also possible that higher self-efficacy in applying the EBP model will lead to a successful implementation of the EBP model. In other words, social workers who are very confident in their knowledge of the EBP process may be better equipped to apply the model in practice (ibid 2019).

In addition, to facilitate the development of EBP in social work several scholars have suggested that social work institutions should be more active in the promotion of EBP by teaching the EBP model to social work students (Ekeland et al. 2018). Previous research also suggests that organizational culture (organizational norms and expectations regarding the behavior of social workers and how tasks are carried out within the organization) and organizational climate (that is, social workers' perceptions of their work environment) may influence practitioners' attitudes towards EBP (Kim 2019). It is impossible for EBP to be successfully implemented if social workers do not believe in the relevance of the model in the field of social work (Ekeland et al. 2018). Also, integrating field and classroom EBP education will lead to a successful implementation of EBP since social work students will obtain both theoretical and practical knowledge on EBP. It is also of paramount importance to develop and test innovation teaching models that feasibly include field instructors, since this approach will help to familiarize social work students with models that can lead to a positive change in the field of social work (Holbrook, Tennille & Buck 2017).

4.3 Barriers to EBP

EBP in social work is currently facing a lot of barriers that are limiting a successful implementation of EBP in the field of social work. Lack of good evaluation capacity and organizational learning are

potential barriers to EBP in most agencies. Evaluation capacity in this case refers to the ability to critically assess whether a given empirical knowledge can effectively achieve an intended outcome when compared to an already existing knowledge used in the agency or organization. Organizational learning is an active pursuit of the flow of knowledge. In other words, it is the ability of an organization to explore new ideas, take risks, and also reflect on an existing practice within the organization or agency. Good evaluation capacity and organizational learning are prerequisites for a successful implementation of EBP (Despard 2016).

Lack of management and technical capacity is also a potential limitation for the implementation of EBP. Management and technical capacity are the infrastructure and systems needed by an agency to efficiently and effectively make use of its organizational resources. These might include factors like fiscal management (the planning, directing, and controlling of financial resources), human resources systems, adequate staffing equipment, facilities, and information technology that can reliably and efficiently offer practitioners with the services they need to carry out their duties effectively. Also, a lack of financial resources can make it difficult for some agencies to recruit, train, and retain well-qualified staff that can effectively implement and sustain EBP (Despard 2016). van der Zwet et al. (2016) also states that limited agency resources dedicated to EBP, insufficient time and access to research evidence are barriers to EBP in social work.

In addition, most leaders in agencies find it difficult to search relevant research or empirical knowledge due to lack of time and expertise to critically assess the relevance and quality of evidence. It is also not that easy to find relevant evidence by practitioners who have good knowledge in searching scientific evidence (ibid 2016). Ekeland et al. (2018) are also of the opinion that lack of research skills is a necessary barrier in the implementation of EBP in social work. According to some social workers, insufficient time and lack of access to scientific research are necessary barriers in the implementation of EBP in real life (van de Zwet et al. 2020). Lack of organizational support towards EBP as well as negative views about the utility of research are also barriers of EBP in social work (James et al. 2019).

In the study conducted by Ekeland et al. (2018) and with the aim to examine social workers' perspective on the EBP, the researchers ended up wondering whether EBP as a model has been observed in reality since there are still some obstacles in the implementation of EBP at the organizational and professional level. These obstacles may include knowledge and technology deficiency as well as a lack of supportive attitudes by social workers towards EBP (ibid 2018). Critics have described EBP as an ideological movement, that is a manner of thinking, myth, belief etc., that guides an individual, institution or a social movement (Ekeland et al. 2018). EBP has similarly been criticized as a model that does not take into consideration reason, but instead puts a lot of emphasis on rules produced by the guideline industries (researchers) and ignores the fact that social work is a very complex profession. Critics describe EBP as a governmental-management tool that does not adequately consider individual differences in culture (ibid 2018).

5 Scientific Theory

In this section, we will be focusing on symbolic interactionism and the theory of human motivation as our theoretical framework.

5.1 Symbolic interactionism

Symbolic interactionism is relevant for understanding human social situations, behavior, actions, communication, and society. The perspective also helps us to understand ourselves and others in a

better way. Interactionism is relevant to every human being since it focuses on investigating the reasons behind human actions, decisions, and the choices they make. In addition, all situations in human interaction can be described using this perspective. The basic purpose of symbolic interactionism as a scientific perspective is to better understand how humans think, the cause and choice of human actions and how a person defines a particular situation. The use of symbols by actors during the process of interaction plays a very important role in this theory since it helps individuals to understand each other in the process of communication. According to the symbolic interactionist view, human qualities are created through immediate situation, thinking, ongoing social interaction, ongoing communication, and ongoing interpretation of situations by that person. Symbolic interactionism as a perspective focuses on interaction and interaction in this case refers to social interaction between individuals in the society and the interaction with oneself. This perspective is also of the opinion that human beings define their environment rather than responding to it. Humans are active beings, and their actions are caused by social interaction as well as by how they define the situation in which they find themselves. Symbolic interactionism is a very vital theory that regards humans as active in the environment, interacting with others and with self, a dynamic being who defines current situations based on his/her own developed perspectives and from the perspectives learned from ongoing social interactions (Charon 2011).

Symbolic interactionism is a very useful and applicable theory in social pedagogical practices because the theory is an attempt to understand how people think and how thinking influences the actions of human beings. The aim of the current research is to investigate how social workers who are determined to apply evidence-based practice treatment methods to adolescents with substance abuse disorder make decisions on treatment methods for clients. The study is also intended to investigate the challenges involved in the implementation of evidence-based treatment methods. I decided to use symbolic interactionism and motivation theory as the theoretical framework of the current study because my interview data will be based on social workers' perceptions on evidence-based treatment methods and also the challenges involved in the implementation of evidence-based practice from the practitioners' perspective. This can be linked to symbolic interactionism. According to symbolic interactionism, the best way to understand a situation or concept is to carefully listen to the person who is in the situation. Participants of the current study have been providing evidence-based interventions or treatment methods for adolescents with substance abuse disorder and their professional knowledge will help me have a better understanding of my research area. Symbolic interactionism is indeed the theory that best suits my research area because the theory emphasizes that the best way to understand a situation is to listen and pay attention to the person who is in the situation and evidence-based practice calls for social work practitioners to take into consideration clients' values, knowledge and experiences before making a decision on treatment methods for clients. This is simply because a client best understands his/her situation and knows the kind of interventions that can eventually lead to a positive change in his or her life. The interviewees in the current study have been working with adolescents with substance abuse disorder for some years now. Qualitative interviews are my main sources of data collection in the current study and this gave me the opportunity to be closer to the study's participants. Being closer to the interviewees gave me the opportunity to understand my research area from the perspective of those who have a better knowledge of the research area. In addition, not all answers can be obtained through verbal communication. Signs and symbols are also very important sources of information in an interaction process. Symbolic interactionism emphasizes on the importance of signs, symbols and the understanding of human actions from the perspective of those who are in the situation. I was also able to understand and interpret some non-verbal communications in the course of the qualitative interviews in the current study with the help of symbolic interactionism. The theory of human motivation is also relevant in the current study. This is simply because it is an impossibility to undergo a positive change without motivation from both clients and practitioners. Symbolic interactionism calls for practitioners to find out the cause of a client's action through an interview or dialogue to understand why the client took on a certain identity over time, rather than condemning the client's action without a proper understanding of the actual cause of the problem from the client's perspective. Symbolic interactionism is also related to my research area because it focuses on the importance of understanding how a client defines a particular situation. A good understanding of a client's situation will lead to the provision of appropriate and trustworthy treatment methods which will eventually lead to a positive change in the life of the client. Also, Symbolic interactionists are of the opinion that human beings are not easily manipulated, altered or predictable. This implies that any successful social worker must be able to collaborate with clients to be able to understand why clients act or behave in a particular way. It is also very important for social workers to dialogue with clients without any exercise of power and to involve clients in all decision-making processes that affects their lives before any positive change in a client situation can be realized. This is because humans are active and thinking beings and they determine their own directions in the interaction process with others and themselves (Charon 2011).

In addition, symbolic interactionism is also useful in this research area because it is considered a foundation theory for understanding human behavior and environment. The theory acts as a guide on how professionals are supposed to investigate a client's situation, problem, and how the client defines his or her problem. Interactionism can help professionals working with substance abuse disorder have a better understanding of culturally different interpretations of similar social experiences, since the theory emphasizes the importance of the clients' definition of a situation. Understanding the reason as to why some adolescents misuse substances will prevent practitioners from being biased or having a negative judgment on substance abuse users. In simple terms, symbolic interactionism reminds social workers to avoid stigmatizing clients and to refrain from assigning negative labels. Condemnation and stigmatization of clients will jeopardize the relationship between professionals and clients, and the entire treatment process (Forte 2004).

Evidence-based treatment methods cannot succeed in the absence of good collaboration between practitioners and clients and symbolic interactionism is a theory that can help to achieve this goal since the theory encourages individuals to do things together through joint actions and it also emphasizes the importance of interaction. Interactionism puts emphasis on the importance of understanding a situation and action from the perspective of those who commit the action and are in the situation. Symbolic interaction as a theory helps practitioners working with clients with substance abuse disorder to dialogue in a better way with clients and try to understand the cause of a client's problem from the client's own perspective. This helps to reduce misunderstandings and conflicts between clients and professionals that may disrupt the entire treatment process. Interactionism also helps practitioners to better understand a client's personal identity and the client's current situation since the perspective focuses on the importance of understanding a person's situation based on the perspective of the person or based on how the person defines his or her situation (Forte 2004). Both clients and professionals can use symbols to communicate with each other and this is what makes symbolic interactionism a very important theory when working with humans, since human beings make use of symbols in their everyday lives. Symbolic communication between actors is very successful when both the communicator and the receiver have the same meaning of the symbols used in the communication process. This might be difficult to achieve sometimes due to misunderstandings that may arise in the interpretation of symbols (Charon 2011).

5.2 Motivation theory

Motivation theory can be described as an explanation of how human motivation works. Motivation is considered a driving force for human beings. Without motivation human beings cannot move forward. Motivation is explained by the drive to feel satisfied and the desire to achieve new goals. Psychologist Abraham Maslow (1908-1970) describes motivation theory through a hierarchy of needs pyramid. His theory is explained by the fact that human beings need to satisfy their most basic needs like food, oxygen, shelter, security etc., before they can feel motivated in life. Human beings must be able to satisfy their basic needs before they can get motivated and be able to take the next step towards a positive goal or change (Hedegaard Hein 2012)

Motivation theory plays an important role in evidence-based practice in social work because motivation is needed for almost all treatment methods for adolescents and adults with substance abuse disorder. Ryan & Deci (2017) highlights the importance of clients taking responsibility for change, which they described as a motivating requirement for treatment. They argue that this is not just a client's responsibility and that practitioners have a vital role to help clients feel motivated. Motivational Interview (IM) is a good example of motivational counseling, and it is based on motivation theory. IM is one of the most common motivational enhancement programs. Studies have also proven that clients who were ready for treatment had greater success in cognitive behavioral therapy than those who were not motivated. The use of a motivation-enhancing program such as IM can be effective in increasing clients' motivation and readiness for treatment, thereby reducing clients' dropouts during a treatment process. This clearly shows how motivation theory is relevant in our research area. Motivational Enhancement Therapy (MET) is also an important treatment method for clients with low motivation and readiness. MET usually commences with three to four meetings with the client and the therapist before the actual treatment method begins and the aim is to increase the clients' readiness for treatment (Ryan & Deci 2017).

Motivation variables such as effort, anxiety and curiosity play a significant role in the process of change because they affect the rate at which individuals feel motivated to acquire new skills and to change a negative lifestyle to a positive one (O'Neill & Drillings 1994). Psychologists, therapists, and other practitioners who work with clients to achieve a positive change need motivation to be able to achieve the desired goals. There is also evidence that motivation is an important element in almost all psychological and pedagogical interventions. Many clients do not show up for their first visit and some fail to complete treatment due to ambivalence or lack of motivation. Almost all actors in psychotherapy and behavior changing therapies have developed strategies to increase clients' motivation. Most behavior changing therapies usually consider motivation and readiness as a prerequisite for participation and exclude clients who show an ambivalence or are unready. This clearly shows the importance of motivation theory in EBP and in social work in general (Ryan & Deci 2017).

It is important that therapists show confidence and belief in clients' own abilities. Therapists must also be able to collaborate with clients in the decision-making process that concerns the lives of the clients. It is also necessary for therapists to create goals that feel realistic for the clients because motivation always increases when a client succeeds in an attempt. Also, good feedback, respect for the client's autonomy, self-determination, and empathy can increase the client's motivation for a positive change (ibid 2017).

6 Method

This section presents the study's methodological starting point. This is a qualitative research study with a particular emphasis on hermeneutic approach. This section also presents the study's quality

criteria, ethical requirements and consideration, a description of the study's preparation and implementation as well as how the interview data was processed and analyzed.

6.1 A hermeneutic starting point

Since I intend to have a deeper understanding on how social workers aiming to work according to the critical appraisal model make decisions on treatment methods for clients. I choose to carry out a qualitative research study with a particular emphasis on hermeneutics. This study aims to investigate if social work practitioners provide clients with evidence-based treatment methods. The study is also intended to investigate the decision-making process to understand the degree to which practitioners and clients are involved in the decision-making process of treatment methods for clients. A hermeneutic research approach will give me a better understanding of how social work practitioners collaborate with clients in the decision-making process of treatment methods. A hermeneutic research approach is an interpretive perspective that gives me the opportunity to understand my research area from the perspective of the interviewees involved in the current. This approach lays particular emphasis on understanding human behavior and actions from the perspective of those providing the information and the researcher needs to be empathetic to be able to understand the feelings and intentions of interviewees or the study group (Bryman 2018). With the help of the study's scientific questions, empirical data will be collected through qualitative interviews. These data will be processed and analyzed based on my understanding and interpretation of empirical data from the perspective of the interviewees. All participants in the current study are social workers who have been working with adolescents with substance abuse problems for a very long time and they have a very good knowledge in the decision-making process for clients with substance abuse disorder. Their participation in the study will provide me with a better understanding on the decision-making process of treatment methods for clients and also the role of clients in the decision-making process on the interventions they receive. According to the symbolic interactionists view, the best way to understand a situation is through conversations with the person who is in the situation (Charon 2011). I did not conduct interviews with clients with substance abuse problems (because of ethical reasons). Interviews were conducted with social workers who have good experience in working with clients with substance abuse problems. This gives me the opportunity to interpret and understand how intervention decisions are arrived at and the influence of clients and practitioners in decision-making from the perspectives of the practitioners who work with intervention decisions.

6.2 A qualitative research method

This is a qualitative study because my main sources of data collection were through qualitative interviews conducted with the participants in the current study and I was able to have direct contact with the interviewees. Conducting qualitative research gave me a better understanding of my research area since I got the opportunity to be closer to the study's participants. Conducting a face-to-face interview gave me the opportunity to understand the interviewees' perception on EBP. A qualitative research approach helps to widen my knowledge on my research area (Bryman 2018). Through qualitative interviews, I got a deeper and better understanding of EBP treatment methods and how the decision-making process looks before the provision of evidence-based interventions to clients. During the interview process, the interviewees got the opportunity to ask questions they think may be useful to the research area. They were made to understand that their contributions are of great importance. According to Kvale & Brinkmann (2014) it is very necessary to give interviewees the opportunity to ask questions to the researcher because it gives the interviewees good control of the situation during the interview process. In addition, the interaction between the interviewees and the interviewer tends to be livelier and looks like a normal daily conversation at the same time.

6.3 The study participants

The study sample was selected based on the study's targeted goal which is to investigate the decision-making process of treatment methods for adolescents with substance abuse problems. The study is also intended to investigate the challenges involved in the implementation of evidence-based treatment methods by social work practitioners. Bryman (2018) made mention of a goal-oriented selection which he describes as an act of selecting participants in a research study. Participants in the current study were selected based on their knowledge of my research area. Only social workers working with adolescents with substance abuse disorder were selected to participate in the study and these practitioners were all social workers working within the social service, out-patient care units, and homes for care and living (HVB hem). Seven interviewees participated in the current study. Six out of the seven interviewees are qualified social workers with a university degree in social work. Only one of the interviewees does not have a university degree but the participant has taken some university courses in the field of social work and has worked with adolescents with substance abuse disorder for about ten years. Participants in the current study are individuals who have good theoretical and practical knowledge of substance abuse disorder and evidence-based treatment methods. Their contributions in the current study are of paramount importance because their professional knowledge has impacted the current research positively. Without them, the current study could have been an impossibility. The study participants have a good experience working with adolescents with substance abuse disorder. Their inclusion in the current study was as a result of their professional knowledge in the research area and they provided me with relevant answers to my research questions.

6.4 Preparation and implementation

Substance abuse and treatment methods for clients is my greatest area of interest as an upcoming social pedagogue. In the future, I intend to work with clients with substance abuse problems and I think it is very necessary for me to have good knowledge of clients with substance abuse disorder and the best evidence-based interventions available to enable me to offer trustworthy treatment methods to the clients I will be working with in the future. This research area has provided me with better ways to approach clients and the study has also proven that no evidence-based treatment methods can yield positive results without good collaboration, alliance, and respect of client's autonomy in the decision-making process of issues that have to do with their lives.

To have a broader understanding of my research area, I did read nine peer reviewed scientific articles and five text books on EBP and treatment methods for clients with substance abuse disorder. The nine scientific articles used in the current study were obtained from Social Services Abstracts and Science Direct with the following search words: "evidence-based practice" and "substance use disorder" and also "evidence-based practice" and challenges. In order to limit the number of search results, I focused mainly on the latest peer reviewed scientific articles between 2015 to 2022.

After having read through scientific articles of my research area, I then wrote a missive (appendix 2) where I stated clearly the aim of the study and the ethical considerations that govern research writing. Some institutions working with adolescents with substance abuse problems such as homes for care and living (HVB hem) and outpatient care units were contacted. An email containing the missive was sent to about twelve different institutions working with adolescents with substance abuse disorder requesting if they could participate in the current study. Seven qualified social workers working with clients with substance abuse problems from 3 different municipalities and six different institutions were willing to participate in the current study. An interview guide was formulated (appendix1). The interview guide was composed of 19 open questions and these 19 questions were formulated based on my research questions to enable me to get a better

understanding of the participants' perception on EBP and the decision-making process of treatment methods for clients. The interview guide in the current study provided reliable answers to my research questions since the 19 questions were all aimed to provide relevant information to the research questions. The entire process of data collection was very challenging. It was a bit difficult for some interviewees to provide straightforward answers to some interview questions, making it difficult for me to gather relevant data in my research area. To solve this problem, I had to rephrase some of the questions to the interviewees. Seven interviews were conducted in the current study and each of the interviews lasted for about 40 to 45 minutes. The transcription process was also stressful because some interviewees provided extra information that was not very necessary to the research area. This led to additional hours in the entire transcription process. Each interview took about 4 to 5 hours to transcribe.

All the seven interviews conducted were semi-structured interviews which gave me the opportunity to ask follow up questions to the interviews in situations where I needed more elaborate answers. The interviews were conducted via zoom due to the covid-19 pandemic. Before the start of the interviews, the missive that contains the ethical aspects from the Swedish research council was read and approved by the interviewees and the interviewees also gave their approval for the interviews to be recorded for future transcription. The names, towns and institutions of the interviewees were omitted in the current study to keep their identity hidden.

6.5 Research ethics considerations

Scientific research is to be conducted in accordance with research ethics. According to the Swedish research council (Vetenskapsrådet 2017), researchers are not supposed to alter research results for personal values, research method and results have to be clearly stated, and all scientific research is to be conducted without any harm to the participants of the study. In addition, all previous research use in a research study has to be rightfully assessed without any bias whatsoever.

Bryman (2018) states four basic research ethical guidelines which researchers must follow through the research process. These ethical principles are as follows: The information requirement, consent requirement, confidentiality requirement, and the utilization requirement.

Information requirement means the researcher must inform interviewees about the study purpose and the interviewees must be made to understand that their participation is optional and they are free to withdraw at any time without stating any reason for doing so. The consent requirement means a study participant has the right to decide if they wish to participate or not. And in case the participant is a minor, his/her parents have to give their consent. Confidentiality requirement simply means all the information provided by participants in a study has to be confidential in such a way that an external person cannot read the research and identify the study participants. Lastly, the utilization requirement means all the information obtained from participants in a study has to be used for the research purpose and nothing else.

Research ethical guidelines have been carefully observed and respected in the current study. The four basic research ethical guidelines were attached in the missive I sent to the interviewees about a week before the actual date of the interviews. And before the start of any interview with the interviewees, the research ethical guidelines were read to the interviewees and they gave their concern to participate in the current study. The interviewees gave their names, towns, and also the institutions they work with but their information was not exposed in the results of the study. I did mention names in the current study but the names are not the interviewees real names. All the interviewe conducted in the current study were transcribed after having obtained permission from the interviewees. In addition, the study did not cause any harm to its participants.

6.6 Quality criteria

Bryman (2018) emphasizes the importance of reliability, credibility, transferability, validity, and dependability in scientific research. Scientific research has to be properly conducted and the research's values and beliefs should not influence the study results. All information provided by interviewees in a research study must be reported as stated and this makes the study reliable. Scientific research must be conducted in such a way that researchers investigating a particular research area must be able to have the same research results but this can be difficult to achieve in qualitative research since emphasis is based on words and interpretation of situations by individuals. It can be difficult for two people to reason or feel the same. Dependability in scientific research according to Bryman (2018) has to do with how trustworthy the results of a scientific research are. To achieve dependability in scientific research, the study must include all the processes involved in scientific research. Transferability in research study is how applicable a study's results are in other areas, environment or culture. Validity simply means the researcher has investigated what the study had to investigate.

The current study has been conducted following the rules governing scientific research. All the components in scientific research are included in the study and the study results have been processed and critically analyzed without bias or personal values. All interviews were carefully transcribed to make sure that the participants' responses remain the same but since this is qualitative research, the study can't have a high level of reliability since the results are based on the interviewees perception on EBP and people may have different perceptions of a particular concept, model or situations.

6.7 Processing and analysis of empirical data

Seven qualitative interviews were conducted in the current study. The empirical data were later processed, analyzed and placed under four main themes and sub-themes. Data analysis is the act of breaking down interview data into various sections, sentences or words and this makes it easier for the researcher to organize empirical data obtained from interviewees (Kvale & Brinkmann 2014). To ease the data analysis, I had a careful look in all sections in the transcribed interview and this helped me to sort out data that were useful to my research questions. The empirical data obtained from the interviews were marked with different color pens and each color represents a particular theme to facilitate data analysis. The interviewees' perception and understanding of my research questions form the basis of the study's results.

7 Result

This section presents a brief summary of the interviewees that have taken part in the current research. Data obtained from the interviewees have been grouped into the following themes: Practitioners' view on EBP, Decision-making process on treatment methods, Collaboration, and a successful implementation of EBP. These themes were chosen because both the research questions and the interview guide are centered on investigating social workers' view on evidence-based practice, how social work practitioners who have decided to apply evidence-based treatment methods make decisions on treatment methods. The research questions and interview guide are also intended to investigate how practitioners cooperate with clients in the entire treatment process and last but not the least the challenges involved in the implementation of evidence-based treatment methods for clients.

7.1 Presentation of interviewees

Bo works in a support and treatment unit (stöd och behandlingsenheten) for children, adolescents, and parents. Clients registered in this agency may have problems with drugs, crime, study difficulties and family problems. Bo is a trained social worker working with relationship issues, family, and interaction between parents and adolescents. He has worked in the current agency for about a year now but he has an overall 15 years working experience.

Eva is a trained social worker and a master's degree holder in social work. She has also studied substance abuse care, disability, and habitation at the university. Eva has worked within the social services for about 15 years and has also worked as a school counselor, and consultant for various projects. Eva is the manager at a home for care and living (HVB-hem), where clients are a target group of boys from 13-17 years. These are adolescents suffering from psychosocial problems, and other difficulties such as criminal lifestyle and substance abuse problems.

Sandra & Amanda work in an outpatient care unit for adolescents and adults with substance abuse disorder. Sandra and Amanda have a bachelor degree in social pedagogy in 2013 and 2018 respectively. They are both therapists and are mostly concerned with motivational interviews and they even offer help to clients at home. Sandra has nine years working experience and Amanda has been working as a therapist for about four years. Sandra and Amanda had a joint interview and they shared the same view on EBP.

Linus is a qualified social worker and he had also studied some other courses after he obtained his bachelor degree in social work. Linus is currently working in a private agency for adolescents and adults with substance abuse disorder and he has been working in the current agency for 12 years. His job description is to help relocate clients with substance abuse problems from their current city into a new city to receive treatment and hopefully start a new life in the new environment. The agency where Linus works can for example relocate a client from Göteborg and place the client in a family home in Eslöv. The idea is to disconnect clients from the environment where they have been involved in substance abuse.

Peter has a bachelor degree in social pedagogy in 2018. He later studied a 15 credits course in social law. He currently works in a home for care and living (HVB hem) for boys between the ages of 13-18 years as a therapist and he also works as a unit manager. Clients in this institution are boys suffering from psychosocial problems, substance abuse disorder, and criminal lifestyles. In other words, clients in this agency are boys with destructive behavior.

Lars works in a healthcare agency that offers home care and living (HVB hem) and support apartments (stödlägenheter) for adolescents with substance abuse disorder and psychosocial problems. Target group in this agency are boys between the ages of 13-18 years. Lars has a bachelor degree in social pedagogy and also a master's degree in pedagogy. He has been working in the current agency for about 4 years. Lars has also read social law and alongside some other courses.

Thomas currently works at a home for care and housing (HVB home) for boys between 13-18 who have problems with substance abuse or socially destructive behavior. He has been working in the current institution for seven years but he is not a trained social worker. Thomas has a good experience working with adolescents with substance abuse problems. He studied practical philosophy and religion studies at the university and has also had courses in Motivational interview (IM), Clarifying pedagogy, and Cognitive Behavior Therapy (CBT).

7.2 Practitioners' view on EBP

This section presents social workers' views or perspective on EBP. This gives us the opportunity to fully understand EBP in the field of social work.

7.2.1 EBP in social work agencies

Bo stated that EBP means using a treatment method for which there is empirical evidence that it will help clients. According to Bo, EBP is very essential in social work but very challenging. This is because it can be difficult sometimes to prove if a treatment method is good or bad. He also emphasized on the importance of good alliance in EBP.

In my opinion, EBP means following a method for which there is evidence or proof that it actually works. It could be stated that the method itself is important, but at the same time it is the alliance that builds trust in a treatment relationship. Good alliance has proven to be much more important. I think that evidence-based practice is very important. It is also one of the biggest challenges for the social services because it is very difficult to prove what is good or bad and so on. (Bo)

Linus further explained his opinion on evidence-based practice in the field of social work. According to him, EBP means that a treatment method should work for clients but he believes it is difficult to find a treatment method that works for clients. Linus is of the opinion that treatment methods should at least help some clients to undergo a positive change.

EBP means that a treatment method should work. There should be something that works. The problem with substance abuse care is that there is nothing that works. There are really no methods that work. I don't really know, but then maybe fifty percent can complete treatment or something like that. But I do not mean that we have no solution, one cannot say that. Evidence-based practice in my opinion is based on the idea that we have one or some clients who manage to undergo a positive change. (Linus)

Peter went further to explain what he thinks EBP is all about. According to Peter, EBP is when the practitioner has evidence-based treatment methods before the treatment process begins. These evidence-based treatment methods have to be combined with the practitioner's working experience and his ability to hold good conversations with clients. Documentation too plays an important role since it helps practitioners to easily evaluate whether an ongoing treatment method needs to be continued or discontinued. Peter stated also that practitioners must be able to match treatment methods so they meet the needs of clients

In my opinion, it is that you as a practitioner have evidence-based methods which you start from and which you apply to clients but the practitioner's working experience and his experience in therapeutic conversations with clients has a very big role to play in the lives of clients. Practitioners must be able to carefully document and be able to go back to this documentation to see if there is a development or not. (Peter)

Sandra and Amanda define evidence-based practice as an application of a treatment method that has empirical evidence. These interviewees stated that they select treatment methods for clients from a list of treatment methods that have empirical evidence from the National Board of Health and Welfare National Guidelines

If there is research on it, there is evidence. And we select treatment methods from those treatment methods that have empirical evidence provided to us by the National Board of Health and Welfare National guidelines. (Sandra & Amanda)

Lars also defines EBP as the application of many other available sources of knowledge, not just scientific knowledge. He believes that university institutions, newly graduated social workers and the National Board of Health and Welfare National guidelines can contribute positively to EBP treatment methods. In other words, EBP is a combination of different sources of knowledge put together with the aim to help clients in the best possible way.

EBP means following the research that exists in different ways. We also try to keep in touch with different universities. We have always received trainees from, for example, the IKM program (Social pedagogy program focused on youth and substance abuse care). We also accept trainees from the sociology program and from a few other different educations. I believe that people who have just finished their education may come in with new perspectives. This means that we are constantly getting a new inflow of knowledge. (Lars)

7.2.2 Research and social work practitioners

Linus stated that they try to follow current research to be able to know if a particular treatment method is helpful to clients. He also stated that good alliance between practitioners and clients is an important element in EBP. According to Linus, seventy percent of a successful treatment method is based on good alliance between therapists and clients. This is simply because there is absolutely no successful treatment method in the absence of a good relationship between clients and therapists. He further stated that even if a therapist has the best treatment method in the world, that will not create any positive impact at all if the therapist does not have an alliance with his/her clients. In addition, it is the responsibility of practitioners to establish good relationships with clients.

We try to follow what we get from research absolutely. We need to check if a particular treatment method actually works and we can do that by following current research. Thirty percent of a successful treatment method is based on how good the therapist is and seventy percent is based on good alliance between therapists and clients. So, it is very important that practitioners establish a good alliance with clients otherwise the EBP treatment methods they implement will not help clients. (Linus)

Bo expressed the importance of applying a treatment method a practitioner believes can help the client in a positive way even if the effectiveness of the method cannot be scientifically proven. He went further to explain that politicians usually say they apply EBP when they sometimes apply treatment methods that are not in line with scientific research if they believe the methods can lead to a positive change in the lives of clients. Bo also stated that there is a political debate that harsh punishment leads to a reduction in crime wave and adolescents tend to behave in a better way after they have undergone harsh punishment but according to scientific research, locking up adolescents with other criminals will definitely lead to negative effects.

In practice, a practitioner chooses a treatment method that he/she finds suitable for clients. And this is exactly how things look like in reality. It has become a political issue that harsh punishment leads to a reduction in crime wave. Research on the other hand shows that it is not at all good to be locked up with other serious criminals, especially not as a youth. This is because it usually does not lead to any positive result. (Bo)

Sandra and Amanda also explained that they don't read scientific research and books before applying a specific working style or treatment method to clients. They stated that they work according to the treatment methods they are trained in and they know that the treatment methods they offer to clients are evidence-based else they could not have been allowed to apply the methods to clients.

The treatment methods we are trained in and those we apply to clients are evidence-based. On the other hand, as I said, we do not sit down and carry out conversations with clients using manuals and books in the way that it may have been done. But now it is more that we select a treatment method that works for clients when we are at home with them. We even work with clients in their homes and there is probably research that this is what these clients need, otherwise we might not have had adopted this method of working with them. (Sandra & Amanda)

Lars stated also that they seldom apply research in their everyday practice with clients. He said that they believe their employees have the knowledge needed to help clients but they of course make use

of the National Board of Health and Welfare's reports. He further stated that practitioners have a professional knowledge which they believe in and they want to apply the knowledge in helping clients. Some practitioners regard research as a threat to their professional knowledge.

In practical work, I would not say that we connect any research in this way. We have competence requirements to work with us which is a two-year post-secondary education in a relevant area. We believe our employees have the required background and professional knowledge in the area. But what we do is try to follow the National Board of Health and Welfare's reports as much as possible. If there is a new report that concerns our treatment area, we usually involve the relevant parts of the research in our treatment methods. (Lars)

7.2.3 possibilities and challenges in the implementation of EBP

Six out of the seven interviewees in this study stated that they have very good possibilities to implement EBP treatment methods to their clients. Just one interviewee stated that lack of financial resources may sometimes limit them from offering training on evidence-based treatment methods to all their therapists. Peter stated that they have the competence to implement EBP but they sometimes have difficulties to implement the model due to lack of financial resources.

I think we are very good and can effectively implement EBP. We also think it is a good intervention for many young people. We have the prerequisites to implement EBP but we sometimes lack the financial resources needed. It is very costly to educate therapists on evidence-based treatment methods. I would maybe like all my staff to have Adolescent Community Reinforcement Approach (ACRA), but then due to financial constraint we may conclude that maybe just two of our therapists should obtain training on ACRA. So, lack of financial resources is usually a barrier to an effective implementation of EBP. (Peter)

Lars didn't see any challenges involved in implementing evidence-based practice in the institution where he works like most of the other interviewees. Lars stated clearly that they have the resources needed to successfully implement EBP and his institution is very willing to apply scientific research in their everyday practice.

I think we have the prerequisites to work evidence-based, and there is quite a lot of interest and drive to follow research and so on. We have tried to collaborate with the University and I know that they have evaluated us and we have received a lot of internship students. Yes, we have good possibilities for EBP I think. (Lars)

Some respondents stated that they don't have the opportunity to implement EBP treatment of their choice at the moment but they have had it before. An explanation to this is that they work according to the social service obligation (Socialtjänsten skyldighet) which gives them the responsibility to work with clients and help them in all areas where help is needed. If a client needs help with planning of daily activities for example, the practitioner must be able to focus intervention where intervention is needed.

We have the opportunity to apply EBP the way it's supposed to be applied. Right now, we are not allowed to work that way but we have the knowledge and we also have the material to be able to do that. Our tasks look completely different right now. The reason for this is that based on the Social Services Act, we have an obligation to work with clients exactly the way we work now, which is to help clients in all the areas where help is needed. (Sandra & Amanda)

Linus explained that it is usually someone in the management board that has the possibility to propose treatment methods. So, they don't go through scientific research to investigate if a particular treatment method is evidence-based or not. In addition, they on the other hand cannot

propose treatment methods to clients but they have the right not to apply a proposed treatment method if they consider it not useful for clients.

Usually when we get a treatment method or someone we work with, it is not usually the staff as far as I know who look up if a treatment method is evidence-based. It is someone in the management who makes decisions on treatment methods. So, my colleagues and I don't sit down and do research on whether a particular treatment method is evidence-based or not. Someone in the management team usually presents treatment methods to us and they of course always explain the effectiveness of any chosen treatment method. It is up to us as practitioners to decide if we are going to apply the treatment method. (Linus)

Linus went further to explain that the institution that he works in has the capacity to implement evidence-based treatment methods.

We have the opportunities, we have time, and we can educate ourselves, so absolutely. (Linus)

7.2.4 Impact of evidence-based practice

The interviewees in the current study gave different answers as concerns the impact of EBP. Some stated that EBP does not influence their working approach in any way. They stated clearly that they are free to carry out an investigation on clients and are free to decide on the treatment methods they think could be of help to clients. These groups of interviewees don't think EBP affects their working style in any way while some interviewees stated that EBP has a positive impact in the process of change and has indeed affected their way of working with clients positively.

When I go into a case, I usually feel free to decide how I want to work with it. But if we realize that my method is very evidence-based and I believe in it, I follow it. So, I think I have the freedom to work the way I want. As a therapist, I make my assessment to see the treatment method that best matches a client's situation. But I can say that in a way I do research with families, I do research along the way to try to see what I must work with in some way. I think my research is based on the investigation that must be done. The investigation is intended to find out the cause of a client's problem. It is important to talk about the investigation with clients and how the practitioner plans to go about it. (Bo)

Peter also said that EBP does not affect the way he works in any way. He stated that practitioners' professional knowledge is also linked to research. In other words, Peter believes empirical knowledge reflects their working techniques. He attaches so much importance to professional knowledge and believes that professional knowledge has its base in empirical knowledge.

Practitioners' experience already incorporates research. Our method of working is not very much affected by EBP. It has also been researched that everyone needs love, care, good relationships and that one feels good when being approached in a good way. We show love, care, and respect to our clients, but I would not say that we are particularly affected by evidence-based practice. (Peter)

Eva went further to state that EBP has had a lot of impact in their working approach. She said that their employees have had training on EBP treatment methods and they also follow current research to keep themselves updated.

The staff is trained in several methods and we always follow the research and methodology that exists but it's about meeting the young person and not meeting the method. In all the years I have worked with methods, I have never followed a method to the end but you have to take the pieces that work. (Eva)

7.3 Decision-making process on treatment methods

In this section, I will be looking into the decision-making process on treatment methods. This section will help us understand how decisions on treatment methods are arrived at and the actors involved.

7.3.1 Practitioners and decision-making on treatment methods

Bo stated that a case officer makes decisions on treatment methods for clients and presents the treatment decision to therapists but therapists must not apply the proposed treatment methods to clients if they think the method does not match the needs of clients. Therapists have the right to suggest treatment methods if it is for the best interest of clients. So, therapists' ability to influence the choice of treatment method is quite high.

A case officer can of course decide on treatment methods for clients. Then it's up to me when I go into a case to decide if I am going to use the treatment method proposed by the case officer. If I realize that the proposed treatment method does not match with the client's needs, I have the possibility to offer a different treatment method to the client. (Bo)

Sandra and Amanda share a similar view to Bo. They also stated that all treatment methods are decided upon by the client's case officer but when they get to know the client, they may realize that there is a better treatment option for the client. And they have the right to change treatment methods in such a situation after having a conversation with the case officer, their boss and also the client on the treatment method they think best suits the client's situation and ability.

The choice of treatment method is always something that the case officer can come and say to us therapists. But when we meet the client and get to know him/her, we may realize another better treatment option for the client. (Sandra & Amanda, these two ladies had a joint interview)

Linus also stated that he has the ability to influence the implementation of a particular treatment method to clients if he is interested in the treatment method.

If I find a treatment method interesting, I can tell my boss that I would like to get training on the treatment method. I think I can influence a treatment method through my interest. (Linus)

Lars also said therapists have an influence in the decision-making process of trustworthy treatment methods for clients but they must be able to give good arguments on how useful the treatment methods are for clients. But their ultimate goal is to provide clients with evidence-based treatment methods suggested by the National Board of Health and Welfare's recommendation.

We have an influence in the decision-making process of treatment methods for clients but we try to work as much as possible according to the National Board of Health and Welfare's recommendations. We usually get an okay to offer a treatment method to clients if we can justify the effectiveness of the method. (Lars)

7.3.2 The role of clients in the decision-making process

Sandra and Amanda also said that clients have the right to tell the social secretary the kind of support they would like to have. When this has been granted by the social secretary, both therapists and clients will now sit and draft an action plan for clients. This is how clients participate in the decision-making process.

Our clients can explain to the social secretary on the kind of intervention or support they need. When this has been done, we now make an action plan together with the client and this depends on what the client thinks he/she needs. This is how clients get involved in the decision-making process. (Sandra & Amanda)

Bo stated also that a client has the right to reject an action plan if he/she thinks the plan is not realistic. He said therapists must be able to amend an action plan in order to meet a client's wish and the whole idea is to involve clients in the decision-making process on issues that have to do with their lives. Bo also stated that it is very important for clients to understand the content of an action plan.

In our documentation system, we must also write an action on how the treatment process is going to be carried out and the goals we are expected to achieve. This action plan will be presented to the clients and even their parents. This is to ensure that the action plan looks okay for the clients. It is also very important for the clients to recognize and understand the context of the action plan and a client can reject an unrealistic action plan. The plan must be amended in such a situation. (Bo)

Linus also explained that clients have an important role in the decision-making process on treatment methods. A case officer comes up with a case plan, containing what he/she thinks can help to improve a client's situation and they sit together with the client and make a plan on how the goals will be achieved. According to Linus, clients have the right to give proposals on how they think the treatment plan can best be achieved and this gives clients a very big role in the decision-making process on treatment methods.

A case officer from the social service makes a care plan on what he/she thinks is needed to help a particular client. We now need to make an action plan together with the client on how to meet the client's needs. (Linus)

7.4 Collaboration

This section presents how practitioners collaborate and exchange ideas with other professionals to be able to help clients achieve their goals. The section also presents how practitioners collaborate with their fellow colleagues in order to help clients.

7.4.1 Collaboration between practitioners and other actors

Linus said they collaborate with other experts from the health center, the social insurance office, employment agencies, social services, prison care, Laro clinics, psychiatric and so on. They collaborate with those actors that clients need help with to help them achieve their goals in the process of change but they also try to limit the rate of collaboration. This is simply because they believe too many experts may sometimes disrupt a treatment process.

These young clients need all the support. We collaborate with those actors that clients need help with but we try to avoid too much collaboration. There is an expression that says too many experts is also not too good. (Linus)

Sandra and Amanda also stated that they help clients in all aspects of life and that they collaborate with quite a good number of external actors like the health care unit, psychiatry, social service, employment service and also the insurance office to be able to help clients in the best possible way.

As I said, we work with all parts of the person's life. So, we have a lot of contact with the healthcare unit and experts from other institutions to be able to provide clients with good interventions. (Sandra & Amanda)

Bo said they collaborate with schools, police, the social service agency, and also with parents who have diagnoses and have difficulties in performing their parental role.

A lot of collaboration with schools, social services and the police from time to time. As I said before, parents who have diagnoses and are weak in their parenting role also collaborate with the treatment unit and the care supportive housing and so on. (Bo)

7.4.2 Collaboration between colleagues

All the participants in the current study stated that they have a very good collaboration with their colleagues in the decision-making process on treatment methods as well as the entire treatment process. They collaborate and support each other in order to help clients in the best possible way. They always work as a team. Adolescents receiving treatment always have a mentor and a therapist. The mentor and the therapist collaborate with each other on a continuous basis.

Practitioners work very closely and talk about which treatment method they should use. They use each other's strengths, collegial guidance you might say. They take help from each other. (Eva)

Thomas also stated that there is a very tight collaboration between practitioners. He said practitioners collaborate with each other to make decisions on appropriate treatment methods and to provide clients with better quality interventions. Also, a therapist who for example does not have a good knowledge on a particular treatment method can collaborate with a therapist who has a good knowledge on the treatment method.

Yes, it is clear that there is collaboration. We divide the clients into mentorship and then it may be that I have a client who needs a treatment method such as ACRA. I now need to collaborate with the colleague who is trained in Accra to be able to plan the intervention or treatment method. (Thomas)

7.5 A successful implementation of EBP in social work

This section presents some important factors that can facilitate a successful implementation of EBP in social work as suggested by the participants in the current study.

7.5.1 Factors relevant for a successful implementation of EBP

The respondents in this study stated a good number of factors which they think can help to accelerate the implementation and success of EBP. Bo emphasized that EBP can be successfully implemented if politicians understand the importance of EBP and are willing to invest in it. He also said that management officials must be interested in EBP if it should succeed. According to Bo, if an institution has highly trained staff though it is quite costly from the beginning, the cost of training staff will be covered in the long run because the practitioners will be very efficient in their various functions. He also said it is very important for practitioners to try to find out about how other practitioners who succeed in BEP do perform their work as all these will eventually lead to a successful implementation of evidence-based practice.

One must have understanding politicians who understand the situation and are willing to invest because I think it can be costly. You need to have a management of officials who are interested in EBP. But if an institution has highly trained staff who are good at something that makes it possible to avoid placing adolescents in institutional care, it will cover the cost of training staff in the long run. (Bo)

Sandra and Amanda said it is very important for practitioners to obtain training in EBP. They believe that it is impossible to succeed in EBP treatment methods without proper education.

It is to have training in evidence-based treatment methods, if you do not have it, you cannot succeed in implementing it either. (Sandra & Amanda)

Linus also spoke on the importance of a good alliance between therapists and clients. He said therapists must know how to apply a given treatment method and must be able to apply the method throughout the entire treatment process. He also stated that it is very important for therapists to believe in the treatment methods they offer to clients.

I think the therapist must believe in the method and must have a good alliance with the client. Of course, you must know the method. I also think that one needs to do and complete the treatment method that has been decided upon. If we now say that we do Community Replacement Approach (CRA), then I must do CRA all the way. so, I do the whole program. But I must believe in it first, I must have a good alliance and then I do the whole program. If I have a good alliance and I believe in it, then the client will also believe in it. (Linus)

Peter emphasized on the importance of good relationships and mutual respect between social workers and clients. According to Peter, practitioners must have a good relationship and mutual respect with clients to be able to succeed with evidence-based practice

First and foremost, one must have a good relationship with clients/ adolescents, or what you now choose to call it. (Peter)

Lars also stated that investment in education will lead to a success in EBP but he thinks too structured treatment processes may also pose a problem to social workers.

But what I think needs to be done is to invest more in education, which is obviously on the way. But then I also think that there may be a problem with everything being evidence-based and too structured. (Lars)

7.6 Summary of Results

This section presents a summary of the results found in the current study. The results summary will be presented based on the themes that have been used in the presentation of results; *Practitioners'* view on EBP, decision-making process on treatment methods, collaboration, challenges and a successful implementation of EBP. According to the participants of the current study, an evidence-based treatment method implies using a treatment method of which there is scientific evidence that it will result in a positive change in the lives of clients. EBP requires practitioners to go through scientific research before making a decision on treatment methods for clients but based on the result of the current study, social work practitioners do not go through scientific research before making a decision on treatment methods for clients. Swedish social workers select evidence-based treatment methods from the National Board of Health and Welfare National guidelines. The study results also indicate that evidence-based treatment methods cannot lead to a positive change in the lives of clients in the absence of good alliance, respect and collaboration between clients and practitioners. Evidence-based treatment methods according to participants of the current study contribute just about 30% of a successful change in the lives of clients while 70% depends on good alliance, collaboration, and relationship between social workers and clients.

When it comes to the decision-making process of treatment methods for clients, therapists are not responsible to make decisions on treatment methods. A case officer decides on treatment methods for clients but therapists must not implement the proposed treatment methods if they find it unhelpful. A therapist can propose treatment methods for clients but he or she must be able to justify the effectiveness of the proposed methods before the methods can be approved. As concerns collaboration, participants in the current study stated that they collaborate with their colleagues, police, schools, the Swedish insurance agency,

employment agency, prison service, psychiatry clinics, and Laro clinics in order to help clients in the best possible way. They also stated that they collaborate with clients in all decisions that have to do with clients. The study participants stated that they always go through action plans with clients and clients have the right to reject an action plan if they find it unrealistic and the action plan must be amended in such a situation.

As regards the successful implementation of EBP, participants in the current study stated that EBP can be successfully implemented if politicians or those in positions of power believe in the concept and are willing to invest in it. In addition, good training on evidence-based treatment methods, good alliance between practitioners and clients will eventually lead to a successful implementation of evidence-based practice in the field of social work. As concerns challenges of EBP, almost all the study participants stated that they have the financial resources needed to provide clients with evidence-based treatment methods. There was just one participant who stated that financial constraint is a necessary barrier to evidence-based practice in the institution he currently works. This might sound strange because according to previous research, EBP in social work is facing some challenges such as lack of resources, lack knowledge of evidence-based practice treatment methods, insufficient scientific research etc.

7.6.1 Practitioners' view on EBP

Most of the interviewees in this study explained that EBP is when a practitioner uses a treatment method that he/she believes it's going to affect the client's life in a positive way and there must be of course scientific evidence that the method is going to work. Some interviewees emphasize the importance of good collaboration between clients and social workers for a successful implementation of EBP. Practitioners also consider EBP as a treatment method that has been decided upon by the National Board of Health and Welfare to social work agencies but the agencies have to consider the treatment methods useful as well before applying it to clients. Some respondents try to keep in touch with different universities and always receive trainees from the social pedagogy department and the department of social work. Some respondents stated that the idea behind this is to keep in touch with people and institutions that can provide a positive contribution for a successful implementation of EBP.

Almost all the interviewees in this study explained that they don't really go through scientific research before deciding on treatment methods for clients. The interviewees in this study stated that they select evidence-based treatment methods from the National Board of Health and Welfare National guidelines but they must be convinced that the treatment methods will be of help to clients. In other words, social work practitioners have already established evidence-based treatment methods suggested by the National Board of Health and Welfare. And all they need to do is to select a treatment method that they think will be useful to clients. Interviewees in this study strongly believe that the establishment of good alliance with clients is the ultimate because no evidence-based treatment will work without a good collaboration between practitioners and clients. The interviewees also explained that they do have the possibility to suggest a treatment method if the method can create a positive impact in the lives of clients but they must be able to provide good arguments on the effectiveness of the proposed treatment method. Some interviewees expressed the importance of applying a treatment method they believe can help clients in a positive way even if the effectiveness of the method cannot be scientifically proven.

Some respondents stated that they have the possibility to apply EBP treatment methods if they wish and this is because it is a matter of free will and the responsibility of the practitioner to follow current development and direct interventions where interventions are needed. Others stated that they

have the possibility to educate themselves and implement EBP treatments while some stated that lack of financial resources is a hindrance to the implementation of EBP. This is simply because some evidence-based practice treatment methods are very costly.

7.6.2 Decision-making process on treatment methods

Most of the interviewees explained that it is usually the responsibility of the case officer to decide on treatment methods but therapists have the right to intervene and change the proposed treatment method if they think it does not match the client's situation. Others stated that they have the right to suggest treatment methods for clients. If therapists provide good arguments about the effectiveness of the suggested treatment methods, the methods will be implemented. So, practitioners have a role to play in the decision-making process on treatment methods.

The respondents in this research also stated that they have a duty to involve clients in the decision-making process on issues that have to do with clients' lives. Therapists draft an action plan on the intervention and goals they think can be helpful to clients' process of change. This action plan is later presented to clients and their families and a client has the right to reject a goal that he or she finds unrealistic. Therapists have the right to make some necessary adjustments to suit the client's request in such a situation. In addition, clients have the right to suggest interventions and practitioners always try to find out from clients about how they wish to have their treatment methods carried out.

7.6.3 Collaboration

Most of the respondents in this study stated that they have a very close collaboration with the polis, schools, social service, leisure manager, health care centers, the Swedish Social Insurance Agency, the employment agency, the prison service, Laro clinics, psychiatry clinics, and the financial aid agency.

Participants in the current study stated also that they have a very good collaboration with their colleagues in the decision-making process on treatment methods as well as the entire treatment process. They collaborate and support each other in order to help clients in the best possible way. They always work as a team.

7.6.4 A successful implementation and challenges of EBP

The respondents in this study stated that EBP can be successfully implemented if politicians understand the importance of EBP and are willing to invest in it and management officials must be interested in EBP if it should succeed. Respondents also said it is very important for practitioners to obtain training in EBP. They believe that it is impossible to succeed in EBP treatment methods without proper education.

Some participants in this study spoke on the importance of good alliance between therapists and clients. Some stated that it is important for therapists to know how to apply a given treatment method and must be able to apply the method throughout the entire treatment process. A participant in this study stated that they collaborate with universities and accept internship students from social pedagogy and social work departments. Good relationships, mutual respect between social workers and clients, and also investment in education are important components for the success of EBP as stated by some interviewees.

7.7 Theoretical Analysis

This section analyzes the results of the current study with the help of symbolic interactionism and the theory of human motivation. Respondents in the current study explained the entire treatment process from the decision-making process of treatment method to the actual implementation of treatment methods to clients. Their responses will be analyzed with the help of symbolic interactionism and motivation theory.

The participants in this study stated that a case officer makes decisions on treatment methods for clients but when they get to meet the clients, they may change the proposed treatment methods if they think the treatment method is not very helpful to the clients. This implies that even though therapists are not responsible in the decision-making process of treatment methods for clients, they still have a strong influence on the treatment methods clients receive. And this research result can be connected to symbolic interactionism. According to the interactionist view, human qualities are created through thinking, ongoing social interaction, and ongoing interpretation of situations (Charon 2011). Humans are also thinking beings and this means people need to be well convinced before engaging in any action. In addition, respondents in the current study stated also that they go through action plans together with clients and a client has the right to reject an action plan if he or she finds it unrealistic. Therapists on the other hand must be able to amend an action plan if a client wishes that. The aim is to make clients feel motivated and ready to undergo a treatment process. This also signifies respect for clients' autonomy and the ability to influence decisions that concern their lives. This result can be connected to both symbolic interactionism and motivation theory. According to symbolic interactionism, humans are thinking beings and can determine their own actions. This implies that humans cannot be easily manipulated, forced to behave or act in a particular way if they cannot see the necessity or effectiveness of the action. This result also has a strong connection to motivation theory. Practitioners are willing to change an action plan according to clients' wishes and the aim is to increase clients' motivation. According to the theory of human motivation, clients who are ready for treatment have a greater opportunity to succeed in a treatment process than clients who are psychologically and physically unprepared or unready. Motivation theory emphasizes the importance of clients' readiness before engaging in a treatment process. Participants in the current study try as much as possible to make clients feel ready and motivated before engaging in a treatment process and they do this by giving clients the opportunity to change an action plan if they don't feel comfortable with the plan.

The results of the current study also reveal that practitioners can propose treatment methods for clients but they must be able to motivate the effectiveness of the methods to their unit managers before the treatment methods can be approved. This indicates that therapists can influence the decision-making process of treatment methods for clients. This result can be connected to motivation theory since it shows the importance of motivation in the decision-making process of treatment methods for clients. According to the theory of human motivation, human motivation increases if an individual succeeds in an attempt or there is evidence that one will succeed in an attempt.

The interviewees also reported that they collaborate with the social service agency, schools, police, healthcare units, the labor office, and the insurance company to be able to help clients in the best possible way. This is called social interaction between actors in society. Social interaction is a key component of symbolic interaction since interactionism encourages actors to do things together through joint actions and this signifies the importance of group action or group work. When actors work together as a group, they combine their knowledge and support each other and this leads to the provision of better interventions to clients.

As mentioned earlier, the interviewees in the current study sit together with clients to make an action plan and a client has the right to reject a goal which he/she finds unrealistic. The interviewees described this as the involvement of clients in the decision-making process on issues

that have to do with their lives. This indicates good communication and collaboration between therapists and clients and it is again connected to both symbolic interactionism and motivation theory. According to the interactionist view, practitioners must be able to collaborate with clients and involve them in any action that concerns their lives. This is because human qualities or behavior are created through ongoing communication and interpretation of situations. (Charon 2011). This means that if social workers show respect for clients, communicate and collaborate with clients in a way that makes them feel valued despite the difficult situation they find themselves in, clients will develop a positive view towards social work practitioners and also the entire treatment process hence increasing the possibility of a successful change. Motivation theory also emphasizes the importance of client's involvement in the decision-making process and that therapists must be able to set realistic goals for clients. An explanation to this is that motivation always increases when one succeeds in an attempt. In addition, one feels motivated to engage in an activity if he/she feels respected and involved in the process.

The establishment of a good alliance with clients is another important element stated by the respondents in the current study. The respondents stated that they try to establish good alliances with clients. A respondent even stated that treatment methods contribute just about 30% of a successful treatment process and 70% is based on alliance and good communication with clients. Alliance and good communication can be connected to symbolic interactionism and motivation theory. Both symbolic interaction and motivation theory emphasize on good alliance and communication between practitioners and clients since these two aspects can help to reduce conflicts and misunderstandings between therapists and clients which may disrupt an ongoing treatment process or may even discourage clients to commence treatment.

A study participant stated that clients usually show signs of not wanting to engage in formal conversations with therapists on some important issues without any verbal expression. What the therapist usually does in such a situation is to take a walk with the client or try to engage in an activity with the client. The interviewee said he usually brings important conversation in the course of taking a walk with the client but in an informal manner. The above explanation is connected to symbolic interactionism because according to this perspective, both clients and practitioners can use signs or symbols to communicate with each other and this makes symbolic interactionism very useful when working with human beings (Charon 2011).

Some participants in the current study said they always ask clients about how they wish to have their treatment process carried out. This is a way of showing respect to clients and making them understand that they are in control of their lives. This can be connected to motivation theory. Clients are motivated when they are treated with respect and are still in control of their lives even when the going is tough. Respect for clients' wishes can also be connected to symbolic interaction. Symbolic interactionism emphasizes that practitioners must be able to listen to a client who is in a situation since the client is the one who best understands his/her situation and knows what is needed to remedy the situation.

Analytically, EBP in the current study has its base on three important sources of knowledge. According to Alexander Björk (2019) social work practitioners must have the ability to combine these three sources of knowledge namely; practitioners' professional knowledge, research evidence, clients' knowledge and preferences before making a decision on treatment methods for clients. This approach will help practitioners in social work provide trustworthy interventions to clients. Evidence-based practice also requires social workers to collaborate with other professionals. An advantage to this is that practitioners will be able to combine their professional knowledge with their fellow colleagues and this will enable them to provide better interventions to clients.

The results of the current study reveal that social workers in Sweden do collaborate with other actors like the police, schools, hospital, the labor office, insurance company and a host of many other actors. As concerns collaboration, I can rightfully say social workers in Sweden do fulfill that requirement and collaboration plays a vital role in EBP. Regarding clients' value and preferences, Swedish social workers do take into consideration clients' value and preferences. Clients can request for an adjustment of an action plan if they find it unrealistic. So, clients value and preferences regarding decision-making of treatment methods is respected by Swedish social workers and this source of knowledge is also a prerequisite of EBP in social work.

The current study also reveals that Swedish social workers on an individual basis do not make use of scientific research before providing interventions to clients and their professional knowledge does not have an integral role in the decision-making process of treatment methods for clients. This is a potential problem because scientific research and practitioners' knowledge are fundamental sources of knowledge in EBP since EBP requires practitioners to combine these two sources of knowledge with client's value and preferences before making a decision on treatment methods for clients. The National Board of Health and Welfare National guidelines provide evidence-based treatment methods for social work practitioners in Sweden but this unfortunately is not in line with the principles of social work which lays particular emphasis on practitioners' professional knowledge, their ability to search credible scientific research and combine the evidence found with clients' value and preferences before making a decision on treatment methods for clients. EBP in social work is not supposed to be carried out using such an approach based on the principles of EBP. A respondent in the current study stated that they do not go through scientific research before making a decision on treatment methods for clients. The explanation he gave was that they believe their employees (social workers) have acquired enough knowledge in school which implies that they can safely provide good interventions to clients. This was indeed an unexpected result because it goes against the rule of EBP since EBP requires practitioners to combine their professional knowledge with empirical knowledge before making a decision on treatment methods for clients.

8 Discussion

This section presents a discussion of the study's results, its methodology, and also its preparation and implementation.

8.1 Results discussion

This section connects previous research and the results of the current study to be able to understand how EBP functions in theory and also in practice.

8.1.1 EBP and decision-making process

Participants in the current study stated that they do not sit and go through scientific research before deciding on treatment methods for clients. In addition, treatment therapists are not the main persons responsible for the decision-making of treatment methods for clients. The interviewees stated that all treatment methods are proposed by the National Board of Health and Welfare National guidelines and what they do is select a treatment method they think may be helpful to clients and a case officer is the main person responsible for the decision making on treatment methods for clients. The interviewees stated also that they are not obliged to implement treatment methods suggested by a case officer if they realized the treatment cannot yield a positive result for a given client. In such a situation, a therapist has the right to suggest another treatment method he thinks is more suitable for the client but he must be able to provide a good argument on the effectiveness of his/her suggested treatment method. The interviewees also stated that they can suggest a treatment

method but they must be able to provide good arguments on its effectiveness before the treatment can be implemented. This approach is a bit different from the critical appraisal model. According to the critical appraisal model, the therapist has to formulate an answerable question about the client's situation. Then, he/she needs to go through scientific research to search for empirical knowledge that can provide answers to the question. The therapist also needs to critically appraise the evidence found, take into consideration clients' values and preferences and also his professional knowledge before deciding on treatment methods for clients (Björk 2019; Robert & Yeager 2006). Bergmark et al. (2011) also share a similar view on the decision-making process. The authors stated that social workers must be able to take into consideration clients' wishes and preferences, empirical knowledge, and professional knowledge before deciding on treatment methods for clients. Based on the results of this study, I think Swedish therapists do apply EBP treatment methods for clients with substance abuse disorder even though their approach looks a bit different from the critical appraisal model. The National Board of Health and Welfare National guidelines has provided therapists with a variety of EBP treatment methods to choose from. I think the idea behind this is to make sure that therapists provide clients with empirically validated treatment methods and this helps to reduce probability in the decision-making process of treatment methods for clients. Norway is also similar to Sweden when it comes to the provision of evidence-based treatment methods for clients. The government of Norway has also provided several new programs and models for treatments considered evidence-based. Some examples of evidence-based treatment methods suggested by the Norwegian government are: Parents Management Training, Multi systemic Therapy, Aggression Replacement Training (ART) etc. The aim of these policy initiatives was to increase guidance and regulation to help social workers evidence-based interventions to clients (Ekeland et al. 2018). James et al. (2019) shares a contrary view in the decision-making process of treatment methods. According to these researchers, most decisions in social work are based on professional experience and an exchange of ideas with colleagues. In addition, practitioners' attitudes towards EBP can be positive if a method sounds reasonable to practitioners and they have access to good training to effectively apply the method to clients.

Participants in this study also stated that clients have the right to reject an action plan if they think the treatment goals are not realistic and therapists have the duty to change the action plan to meet up with clients' expectations. This signifies that clients are involved in the decision-making process on issues that have to do with their lives and therapists take into consideration client's values and preferences. Camilla Udo, Henrietta Forsman, Marcus Jensfelt & Maria Flink (2019) also stated that all treatment methods or interventions should take into consideration clients' state of being. In other words, practitioners or therapists have to assess if a client is in the right state to undergo a given intervention. The researchers also stated that clients' preferences play an important role in the decision-making process of treatment methods. This is simply because clients are experts in their own lives and they best know what can help them.

In addition, clients' involvement in treatment decisions is a fundamental aspect of EBP. This is because clients' participation in treatment decisions gives them the possibility to take control over their situation and it can also help to strengthen clients' self-esteem since their knowledge and experience are taken into consideration (ibid 2019). Socialtjänstlagen (SFS 2001:453) also emphasizes that all interventions provided to clients must be decided upon and implemented together with the client.

8.1.2 Collaboration

The participants in this study stated that they collaborate with the social security agency, police, school, the prison service, Laro clinics, psychiatric clinics, health care centers etc. to be able to help clients in the best possible ways. Hanson et al. (2018) also stated that interprofessional collaboration helps to bring professionals from different institutions together and they support each

other to create a positive impact in the healthcare and treatment methods for clients. The above researchers stated also that when professionals collaborate with each other, they try to improve on intervention qualities and even modify their ways of working. Collaboration between actors can lead to a lot of positive impacts on clients such as increased service access for clients, better treatment methods and positive treatment outcomes for clients (ibid 2018). Belenko et al. (2016) is also of the opinion that collaboration between professionals will help to achieve better treatment methods.

The interviewees stated also that they have a very tight collaboration with their colleagues and they try to help each other in the entire treatment process. James et al. (2019) shares a similar view. The researchers stated that professional experience and exchange of knowledge with colleagues are considered the most important element in the decision-making process of treatment methods while theories and empirical knowledge play a very little role.

8.1.3 Challenges and a successful implementation of EBP

Almost all of the interviewees in this study did not see any challenges in the implementation of evidence-based treatment methods for adolescents with substance abuse problems in the institutions where they work. This is somewhat contradictory to other results from previous studies. According to previous research, EBP is facing some challenges such as lack of resources, lack of knowledge of evidence-based treatment methods, insufficient research on relevant areas in social work, lack of knowledge to evaluate trustworthy research and so on. In the current study, six out of seven interviewees stated that they have a very good possibility to obtain training in evidence-based treatment methods, good access to empirical knowledge. One of the interviewees even stated that they have good collaboration with universities and their working approach has even been evaluated. Only one respondent stated that lack of financial resources can sometimes be a challenge in the implementation of EBP treatment methods for clients. According to the respondent, lack of financial resources may make his institution limit the number of therapists who can obtain training on evidence-based treatment methods, van de Zwet et al. (2016) also share a similar view. These researchers stated that limited agency resources allocated to EBP, lack of time and good access to empirical knowledge are a necessary challenge to EBP in social work. They also stated that most management staff in agencies find it difficult to search empirical knowledge due to lack of time and knowledge to critically assess the relevance and reliability of the evidence found. This is not usually the case in Sweden based on the result of the current study. In other words, Swedish social workers are not faced with problems such as lack of time and knowledge to critically assess the reliability of the evidence. This is simply because the National Board of Health and Welfare National guidelines has provided social work practitioners with good suggestions of evidence-based treatment methods for clients and all they need to do is to select a treatment method from a list of evidence-based treatment methods based on client's situation and preferences. They really don't put in time to go through scientific research to be able to make decisions on treatment methods according to the results of the current study.

James et al. (2019) also stated that lack of organizational support towards EBP as well as a negative view about the use of research are necessary challenges of EBP in social work. This is contrary to the result of the current research. The study participants stated that they have all the support and possibilities to implement EBP except one of the interviewees who stated that lack of financial resources is sometimes a challenge to EBP. The study participants stated also that they agree with the idea of EBP and they believe that the model is very helpful to their clients. Ekeland et al. (2018) also stated that knowledge and technology deficiency as well as a lack of a supportive attitude by social workers towards EBP are all challenges to EBP but this is not in line with the study results. Respondents in this study stated that they have the capacity to successfully implement EBP. They

said they have access to good empirical knowledge; a good database system and they also follow current reports in the society to keep themselves updated with new knowledge.

Participants in this study stated that EBP can be successfully implemented in social work if politicians understand the importance of EBP and are willing to invest in it. They stated also that management officials must be interested in EBP if the model should succeed. The results of the current study have revealed that the Swedish government is very interested and is willing to invest in EBP treatment methods. It must have cost the Swedish government a lot in its engagement in research. The respondents in this study stated that the National Board of Health and Welfare National guidelines provide them with a list of evidence-based treatment methods to choose from. This is a clear indication that the Swedish government is in support of EBP and has invested a lot to make it successful. Udo et al. (2019) also stated that EBP can be successfully implemented if interventions match clients' needs and situations, and institutions must have a management culture that supports EBP. All the respondents in this study stated that they have a duty to make sure that all treatment methods match the needs and preferences of clients.

The respondents in this study stated that good alliance and mutual respect between therapists and clients are prerequisites for a successful implementation of EBP. They also said good collaboration between practitioners and clients, collaboration between practitioners and universities, and also education on EBP treatment methods can lead to a successful implementation of EBP. Ekeland et al. (2018) also stated that social work institutions should be more active in the promotion of EBP by teaching the EBP model to social work students and this is exactly what the social work institution in Linnaeus university is actually doing. I have had a course in EBP treatment methods all thanks to the social work institution in my current university. Socialtjänstlagen (SFS 2001:453) emphasizes that all interventions offered to clients must be decided and implemented together with the client with the aim to promote alliance, collaboration and respect of clients' autonomy.

8.2 Method Discussion

Since the current study is intended to investigate how social workers who are determined to work in line with the critical appraisal model (EBP) make decisions on treatment methods for adolescents with substance abuse disorder, I decided to conduct a study with semi structured interviews. I had direct contact with the interviewees throughout the data collection process. This gave me the opportunity to listen, understand and critically analyze the interviewees' perception of my research area. It was not easy to find participants who were willing to participate in the current study. Emails were sent to about seventeen institutions working with adolescents with substance abuse disorder and only seven were willing to participate in the study. The entire transcription process lasted for about 28 hours since it's important to listen carefully in order not to alter the interviewees' responses and perception on the study area. The qualitative interviews were conducted via zoom with follow up questions in situations where I needed more elaborate answers. Qualitative research approach gave me the opportunity to understand how social workers working with substance abuse problems perceive, understand and interpret my research area. Participants in the current study are well trained with good working experience. Their knowledge and experience have contributed to the reliability of the current study. In addition, I have carefully presented all the steps involved in qualitative research and according to Bryman (2018) this aspect is a prerequisite for research reliability. Also, the interview guide was well constructed and it provided me with the answers needed to validate the current study. The empirical data obtained from the interviews were analyzed using symbolic interactionism and the theory of human motivation.

Due to time constraints, I was unable to do an interview validation with the study participants. According to Bryman (2018), an interview validation helps to increase the credibility of a research study. Interview validation simply means to share the results of a primary data analysis with the

interviewees in order to receive their evaluation on the data analysis. This helps to increase the study's credibility because the interviewees have the possibility to leave comments where they think they have been misunderstood by the researcher. But that notwithstanding, the interviewees have requested a copy of the current research and I am going to send it to them but this can't be described as an interview validation since they will have access to the current study only after the final submission.

The transferability of the current study is a bit low, that is, how applicable the results of the study are in other areas, environment and culture. An explanation to this is the fact that EBP is perceived differently in various countries and cultures. According to the results of the current study, EBP is more promoted in Sweden, America and in other northern countries in Europe. This implies that the results of the current study are more applicable to the above-mentioned counties than in other parts of the world.

All the scientific articles used in this study are peer reviewed and emphasis was laid on the most recent articles. This has helped to increase the study's reliability and credibility even though qualitative research always has low credibility and reliability since it focuses mostly on words and perceptions of people and no two persons are bound to understand and perceive situations the same.

9 Conclusions and implications

This section presents the conclusions of the current study and also the study's pedagogical implications.

9.1 Conclusions of the current study

The aim of this scientific research is to investigate how social service agents or social workers that are determined to work in line with the critical appraisal model (evidence-based practice) make decisions on treatment methods for adolescents with substance abuse disorder. The study is also intended to investigate the challenges involved in the implementation of evidence-based practice by social workers.

The interviewees (social workers) in the current study stated that case officers are responsible for the decision-making process on treatment methods for adolescents with substance abuse problems. They said even though case officers make decisions on treatment methods, practitioners are not obliged to implement the treatment methods to clients if they are not convinced that the treatment methods can lead to a positive change in the lives of clients. This implies that practitioners working with adolescents with substance abuse disorder can influence the decision-making process on treatment methods for clients. The study results also reveal that social workers don't go through scientific research to determine the reliability of a particular treatment method. Participants in the current study stated that the National Board of Health and Welfare National guidelines suggest evidence-based treatment methods for social work practitioners and what they need to do is to select suitable treatment methods for clients. The interviewees also stated that practitioners working with substance abuse problems have the possibility to suggest treatment methods for clients but they must be able to provide good arguments on the effectiveness of the treatment methods. A potential conclusion of the current study is that Sweden promotes evidence-based practice in social work. To ensure that clients get the right treatment methods, The National Board of Health and Welfare National guidelines has provided social work practitioners with a variety of evidence-based treatment methods and all they need to do is to select treatment methods that match the needs of clients.

The interviewees also reveal that evidence-based treatment methods are not prerequisites for clients' positive change. They said good alliance, collaboration, trust, and respect for client's autonomy constitute about 70 percent for a treatment method to succeed. They stated that evidence-based treatment methods contribute just about 30 percent of a successful change in the lives of clients. This implies that there is virtually no successful evidence-based treatment method in the absence of good alliance, collaboration, trust, and mutual respect between social work practitioners and clients.

As concerns the challenges involved in the implementation of evidence-based practice by social work practitioners, six interviewees out of seven stated that they have all the resources needed to successfully implement and sustain evidence-based treatment methods for clients. Just one interviewee stated that lack of financial resources is a potential barrier to efficiently offer evidence-based training to practitioners in the institution where he works. Based on the research results, one can rightfully conclude that social workers in Sweden have little or no barrier to successfully implement and sustain evidence-based practice

9.2 Social pedagogical implications

The study results reveal that evidence-based treatments can cause a positive impact in the lives of clients but evidence-based treatment methods are not the only components that can make clients experience a positive change. The study results reveal that good alliance, collaboration, trust, and mutual respect between practitioners and clients are the basic components that can lead to a positive impact in the lives of clients with substance abuse disorder.

This study is particularly important in the field of social work in general and for future social pedagogues in particular since the study provides better techniques and approaches on how social workers can successfully work with clients and achieve treatment goals. The current study reveals that evidence-based treatment methods are good for clients but they cannot successfully change a client's life situation if practitioners have poor working approaches like lack of respect for clients' autonomy, poor alliance, lack of trust, and poor collaboration. This study is particularly important for everyone working with people in very difficult life situations since it focuses on both the importance of evidence-based treatment methods and how-to best approach clients.

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2. 11 Appendices

11.1 Appendix 1

Missive

Hej!

Jag heter Agnes Akimbami, jag studerar på Linnéuniversitetet i Växjö och läser sista terminen på programmet Socialpedagogik med inriktning ungdoms- och missbruksvård 180 hp. Jag kontaktar er angående den C-uppsats jag kommer skriva under våren med syfte att utforska hur professionella inom missbruksvård går tillväga med att tillämpa evidensbaserade behandlingsmetoder för ungdomar med missbruksproblem samt anledningar till varför det ibland kan vara svårt för professionella att använda evidensbaserad behandlingsmetoder. För att besvara dessa frågor planerar jag att genomföra intervjuer med personer som arbetar med ungdomar med missbruksproblem. Jag vill gärna ta reda på om ni skulle vilja delta i en intervju gällande evidensbaserade behandlingsmetoder. Jag tycker att det skulle vara mycket intressant att ta del av just era kunskaper och erfarenheter.

Om ni väljer att medverka, bör ni ha information om Vetenskapsrådets etiska aspekter:

- Ni är berättigade till att få information kring undersökningen och dess syfte. .
- Att medverka i undersökningen är frivilligt och ni har rätt att bestämma över ert deltagande och kan avsluta ert deltagande när ni vill.
- Era uppgifter hanteras konfidentiellt, vilket innebär att namn, verksamhet och stad inte kommer vara allmänt tillgänglig information i studien.
- Informationen ni lämnar under intervjun kommer enbart användas för denna undersökning och all data som insamlats kommer raderas efter att uppsatsen examineras och godkänts.

Under genomförandet av C-uppsatsen har jag handledning av en lärare från Linnéuniversitetet som arbetar på Institutionen för pedagogik och lärande. Om ni har frågor om undersökningen får ni gärna kontakta mig, jag bifogar kontaktuppgifter nedan, annars kommer jag att kontakta er på telefon under vecka 5 för att stämma av om ni vill medverka i undersökningen.

Med vänlig hälsning

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Tel nr: 0470-708373

1.

11.2 Appendix 2

Intervjuguide (semi structured interview)

- 1. Kan du berätta lite om verksamheten?
- 2. Vad har du för utbildning och hur länge har du arbetat som behandlare?
- 3. Vilka behandlingsmetoder används inom din verksamhet?
- 4. Vad innebär det enligt dig att arbeta evidensbaserat?
- 5. Hur applicerar ni evidensbaserade behandlingsmetoder i behandlingsarbetet?
- 6. Hur mycket kan du som behandlare påverka val av behandlingsmetoder och vilka har ansvar för val av behandlingsmetoder? Vad grundar sig besluten på?
- 7. Hur ser samarbetet ut mellan personalen inom verksamheten gällande val av behandlingsmetoder?
- 8. Hur upplever du att möjligheterna är för dig att arbeta evidensbaserat inom din verksamhet? Med möjligheter menar vi tillgång till databaser och alla resurser som behövs för att kunna arbeta evidensbaserat.
- 9. Hur påverkas arbetssättet av evidensbaserat arbete enligt dig?
- 10. tycker du att ni har de förutsättningarna som behövs för att implementera evidensbaserade behandlingsmetoder?
- 11. Hur ser processen ut när ni får ett nytt ärende gällande en specifik insats för klienten?
- 12. Anser du att det finns några hinder eller svårigheter vid val av insatser eller behandlingsmetoder?
- 13. Vad anser du är viktigt att tänka på eller ta hänsyn till vid val av behandlingsinsatser?
- 14. Skulle du kunna förklara hur ungdomarna involveras i sin vårdplanering?
- 15. Hur följer ni upp en specifik insats och återkopplar behandlingsarbetet?

- 16. Principen med evidensbaserat praktiskt arbete utgår ifrån forskning, behandlares erfarenheter och klientens perspektiv. Hur skulle du beskriva att detta ser ut i din verksamhet?
- 17. Hur ser samarbetet ut mellan verksamheten och andra aktörer inom förändringsarbetet? (Med förändringsarbete menar vi arbete med ungdomar/vuxna som vill genomföra en positiv förändring med hjälp av behandlare)
- 18. Hur använder och kopplar ni forskning i det praktiska arbetet som behandlare?
- 19. Vad tror du behöver göras för att kunna lyckas med EBP inom social arbete?
 - Har du någon fråga till mig, eller någonting du vill tillägga?
 - Skulle det vara okej att kontaktar dig igen om jag skulle behöva komplettera någon fråga?

Aim of study and research questions

The aim of this scientific research is to investigate how social service agents or social workers that are determined to work in line with the critical appraisal model (evidence-based practice) make decisions on treatment methods for adolescents with substance use disorder. The study is also intended to investigate the challenges involved in the implementation of evidence-based practice by social workers.

Research questions

- Who are those responsible for the decision-making process as regards treatment methods and how is it carried out?
- What are the decisions based on and how are they arrived at?
- What are the challenges involved in the implementation and sustainment of EBP?