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# Advancing Social Care Through Evidence: A Position Statement from the International Network for Social Intervention Assessment (INSIA)

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## Abstract

The International Network for Social Intervention Assessment (INSIA) is a partnership of organizations that produce, support, and use evidence synthesis in social care. It emerges as a pivotal entity that supports evidence-informed social care decision-making. The paper argues for the importance of the production and use of trustworthy evidence synthesis in social care to inform and guide policy and practice. We articulate INSIA's position in the global field of social intervention assessment, list the vision and aims of INSIA as a network for promoting and enabling the production and use of evidence synthesis in social care, and issue a call to action, inviting other organizations to join this work.

## Keywords

evidence synthesis, social care, social intervention assessment, decision-making, network, policy

Many of the major challenges of today are social, including for example poverty, discrimination, violence, unemployment, and mental illness (Filipenco, 2024). The World Economic Forum's *Global Risks Report 2024* lists lack of economic opportunity, involuntary migration, conflict, and societal polarization among the top 10 most critical challenges faced by people in every region of the world (World Economic Forum, 2024).

These social challenges negatively affect individuals and communities, with a strong connection between social needs and health (Aujla et al., 2023; Kreuter et al., 2021). This has prompted prominent calls to better integrate social care within healthcare systems (National Academies of Sciences, Engineering, and Medicine, et al., 2019) and related services, such as education (Berlin et al., 2011; OECD, 2015; U.S. Department of Education, 2021). Social care, while varying across national health and care systems, is provided by a varied cadre of providers offering multiple forms of care, social welfare services, and other practical assistance for people of any age who need extra support for social and psychosocial conditions (Kelly et al., 2020). Like public health, social care inherently operates at the intersection of other services (Aujla et al., 2023). The field is distinguished by its commitment to social justice values (Shaw, 2007), and recognition of the complex, contextual nature of social interventions (Wallace et al., 2004). Notably, the social care context is highly variable—over time and between locations—and many social care interventions comprise packages of interacting components that target different groups and a variety of outcomes, and are provided by different professionals across diverse organizational settings (Sanderson, 2002).

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For practitioners and policymakers addressing major social challenges, understanding the feasibility, effectiveness, and acceptability of social policies and interventions is crucial. This concern dates back to at least the 1950s with early field experiments examining social work outcomes. As research methodologies improved, literature reviews emerged, drawing together results from multiple social interventions (Mullen & Shuluk, 2011; Sanderson, 2002), including systematic reviews and other evidence synthesis examining economic outcomes of social services for vulnerable groups (Steketee et al., 2017). With increasing expenditure on public services (Eurostat, 2024), there is growing demand for trustworthy data about the nature of social problems and policy impacts (Sanderson, 2002). Social practitioners increasingly rely on such evidence to guide social policy and practice development (Crisp, 2015; Davis et al., 2014; Mullen, 2014), in particular social intervention assessments (SIA).

SIA is a multidisciplinary process that uses explicit methods to determine the value of social interventions. The process is transparent, systematic, and formal, applying state-of-the-art methods to consider the best available evidence. The purpose is to inform decision-making in order to promote equitable, efficient, and high-quality social welfare. The dimensions of value for a social intervention may be assessed by examining the intended and unintended consequences of using an intervention compared to existing alternatives. These dimensions often include effectiveness, unintentional harm, costs and economic implications, ethical, social, cultural and legal issues, organizational and environmental aspects, as well as wider implications for the clients, relatives, caregivers, and the population (adaptation of O'Rourke et al., 2020). The Social Care Institute for Excellence (SCIE) captures the fundamentals of SIA with its guiding principle for evidence synthesis when stating that it is about revealing "what is in the best interest of the people whom we seek to help" (Forbes & Griffiths, 2002). In social care, this can be understood as optimizing outcomes for people while respecting their unique circumstances and preferences, advancing equity and social wellbeing by addressing unmet needs and ensuring universal service accessibility, and utilizing resources efficiently and sustainably; additionally, social interventions should be organizationally feasible, culturally acceptable, and aligned with broader societal goals.

Of particular concern for SIA, compared to health technology assessments (HTA), is dedication to social equity and recognition of the complex, contextual nature of social interventions. SIA are particularly valuable for informing policy decisions, and the increase in the number of profound and systematically executed intervention assessments in recent decades across disciplines reflects the aspiration to achieve evidence-informed policy and practice (Davis et al., 2014; Kelly et al., 2020). Opportunely, in the last few decades, a number of different organizations, collaborations, and networks have been established to advance the production and use of evidence synthesis and practice guidelines in a number of different fields, such as:

- Cochrane: global organization that promotes and delivers evidence synthesis on effectiveness of healthcare interventions.
- The Campbell Collaboration: global organization that promotes and delivers evidence synthesis for economic and social policy decisions.
- Collaboration for Environmental Evidence: global organization that promotes and delivers evidence synthesis on environmental management and sustainability.
- Guidelines International Network: global network that supports evidence-based healthcare guideline development and implementation.
- Health Technology Assessments international: global collaboration of HTA professionals that focuses on healthcare interventions and health systems.
- International Network of Agencies for Health Technology Assessment: network of HTA agencies that support health system decision-making.
- JBI: global organization that promotes and supports evidence-based decisions related to health and health service delivery.
- Systematic Review Center for Laboratory Experimentation: global network that works to advance methodology of systematic reviews of animal studies.
- International initiative for impact evaluation: global organization that focuses on advancing the use of evidence to improve people's lives in low- and middle-income countries.

Several of these associations focus on HTA, but they also respond to the varying demands of the SIA users, who have distinct perspectives—such as values, priorities, and ideological or theoretical assumptions—and methodological approaches, including approaches to SIA. Yet, a notable gap is a network of organizations dedicated to advancing SIA. By exchanging expertise and standardizing methodological approaches, such a network can enable better evidence-informed practices and policy decisions in social care. The International Network for Social Intervention Assessment (INSIA: www.insia.network) emerges as a pivotal entity that supports evidence-informed social care decision-making. INSIA distinguishes itself within the evidence synthesis ecosystem through its emphasis on *social* interventions, methodological adaptation, and commitment to translating empirical knowledge into real-world policy implementation.

This position paper articulates the network's position in advancing SIA, and its vision and aims to clarify the principles that underpin our work and inform others conducting SIA, and decision-makers so that they can better understand the contributions and value of INSIA. For example, it may inform policy makers, governmental agencies, nonprofit organizations, and other stakeholders of the network and how membership can help support their priorities.

The conceptualization of a network like INSIA emerged in fall 2018, following engagements between the Ministry of

Social Services and the Swedish Agency for Health Technology Assessment and Assessment of Social Services (SBU). Both the evidence producers and users identified the absence of a global network to support collaboration and development in the field of assessments of social care interventions. Subsequently, SBU initiated consultations with the Nordic Collaboration and the European Centre for Social Welfare Policy and Research, proposing the establishment of an international consortium dedicated to SIA. In August 2019, SBU received a formal ministerial commission from the Swedish government "to initiate and establish an international network for collaboration within Social Intervention Assessment" (Ministry of Social Services, 2019). Establishment of the network started in 2020 through virtual meetings, the formation of working groups, and the development of a glossary, bylaws, and a nomination committee. The network was formally constituted in November 2021, with its organizational statutes and membership criteria ratified by constituents during the inaugural annual business meeting. Following an interim governance period between 2021 and 2023, INSIA currently operates under the direction of an elected six-member executive board, maintains active working groups, holds regular webinars, and works to expand its membership constituency (Box 1).

**Box 1. INSIA Members.**

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Haute Autorité de Santé (HAS), France.
Health Technology Wales, Wales.
Institut national d'excellence en santé et en services sociaux (INESSS), Canada.
National Institute for Health and Care Excellence (NICE), UK.
Norwegian Institute of Public Health (NIPH), Norway.
Swedish Agency for Health Technology Assessment and Assessment of Social Services (SBU), Sweden.
VIVE – The Danish Center for Social Science Research (VIVE), Denmark.

*Note*. INSIA = International Network for Social Intervention Assessment.

Here, we present INSIA's positions, before our vision and aims because they may hold greater longevity as a stable foundation that reflects our stance and commitments and allows us to remain true to these even as the network adapts to new opportunities and challenges in the future. In brief, INSIA's positions are (Figure 1):

- The best available evidence should guide social care policy and practice decision-making.
- Methodologically robust, trustworthy evidence is critical to inform the design of effective policies and programs aiming to improve social problems.
- Greater emphasis should be placed on developing robust evidence for social care policies through rigorous research and evaluations.
- An independent, global network of organizations that promotes international best practice and collaboration in SIA is required.




**Figure 1.** INSIA Positions. INSIA = International Network for Social Intervention Assessment.

First, it is the position of INSIA that the best available evidence should guide social care policy- and practice decisions. Here, SIA play a crucial role by helping provide a comprehensive understanding of the entire body of evidence, strengthen confidence in the findings, and address any inconsistencies and weaknesses within the evidence. Basing decisions on the findings of just one study or a small subset of studies may not offer a complete or accurate reflection of the knowledge available from all existing research (Long et al., 2002; Oakley et al., 2005).

INSIA further positions that use of trustworthy evidence can promote improvement of social problems through more effective and relevant policies and programs. In particular, evidence of how well policies and programs "work" in different circumstances is fundamental, but also quantitative and qualitative evidence of how and why they work, and the specific nature and extent of social problems are necessary to improve the effectiveness of policy responses. Relevant evidence also includes aspects such as costs of alternative interventions, clients' preferences, resources required and available, and sustainability.

It is also the position of INSIA that greater focus should be placed on building a robust evidence base for social policies

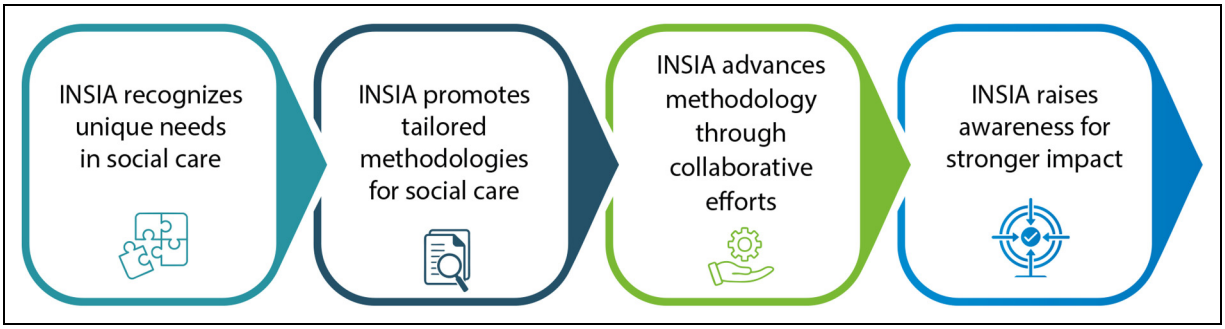



**Figure 2.** Why INSIA Matters: Bridging Gaps in Methodology for Social Intervention Assessment. INSIA = International Network for Social Intervention Assessment.

by researching and conducting evaluations of policies and programs. Because interventions that aim to improve social outcomes often are complex (Grant et al., 2013), local consultation and multiple forms of evidence are often necessary. An expanding collection of literature documents the application and value of various methods in recently conducted evidence synthesis within the social sciences (Kreuter et al., 2021; Long et al., 2002; Victor, 2008). For example, using quantitative and qualitative methodologies is necessary to reliably capture the complexities of the social world in which services to vulnerable populations and for social problems are developed. One argument for this is the growing costs of social services (Butler, 2024; Eurostat, 2024), which generate a need for information regarding the nature of social issues and the effects of social care policy- and practices requiring public policy intervention.

Finally, it is the position of INSIA that the network meets a need for an independent network that promotes the use of evidence-informed social care interventions, congruent with values of social care—such as social justice, equity, challenges of power, and resource differentials (Butler, 2002; Shaw, 2007). It gratefully builds on existing efforts by groups such as SCIE, the Campbell Collaboration social welfare group, and the Systematic Reviews in Social Policy and Social Care Centre at the University of York. Despite the impressive work of such entities, SIA lag far behind that produced in the health and medical sciences (Davis et al., 2014) and there remains a need for a platform for organizations and initiatives to collaborate, share their work, pool resources, cocreate solutions and more. A connected network is critical for improving people's lives through evidence-based social initiatives, as it uniquely facilitates the exchange of expertise, assets, and technical capabilities across geographic boundaries, academic fields, and professional domains.

INSIA's current vision is to better people's lives by promoting the use of evidence-informed social care interventions. To this end, we aim to

- promote evidence-informed decision-making, policy direction, and practice;
- develop and promote approaches to, methodological principles and guides for social interventions assessments;
- develop and promote the availability of SIA;
- support international coordination, cooperation, and collaboration in the production of SIA.

For example, we strive to develop and promote tools and methods to share, translate, and adapt SIA across different global settings and context, particularly in cocreation with global and community partners, and provide a platform to share experiences and knowledge among members of INSIA.

Because of social care's global significance and unique contextual considerations that cut across sectors—such as health, housing, public safety, criminal justice, employment, and education—we believe a dedicated network for SIA is necessary.

Producing solid evidence in this field requires approaches that go beyond generic methodologies and simple accommodations of the medical model of HTA, in order to meet the specific needs of the social care context, research traditions, and research questions. Improving people's lives by promoting the use of evidence-informed social interventions requires collaboration, shared resources, and expertise across regions, professions, and disciplines that only a connected network can provide. Moreover, a network like INSIA is needed as a platform for advocacy, raising awareness of the unique needs and challenges in social care, and amplifying the voices of those often vulnerable individuals and groups who rely on these services. Such challenges, that INSIA takes on, are not addressed via other networks (Figure 2).

INSIA strives to be a resource for a range of audiences invested in SIA because social factors are strongly intertwined with outcomes in related fields, such as public health:

- academic and research organizations that produce evidence in the social care field;
- public institutions responsible for social policy;
- nongovernmental organizations focused on social care;
- public health agencies;

- social service providers supplying direct social services, such as family support, mental health services, and housing assistance;
- policy development organizations such as think tanks and policy advocacy groups dedicated to social care issues.

INSIA offers access to international connections, collective expertise and insights, cross-disciplinary collaborative opportunities, a platform for capacity strengthening, equitable access to tools, resources, and data in the realm of social care, all of which in turn can enhance funding applications, research or policy advocacy, or better allocation of resources or effective social intervention designs. When working together, as a network, it is possible to enable joint work, reduce duplication, optimize investment of effort, clarify variation in approaches, and foster improvement of social care interventions.

Lastly, INSIA urges other organizations to contribute to the important work in producing and using evidence synthesis in social care to inform and guide policy and practice. We invite other organizations to join the network, welcoming full and associate members from around the world.

In summary, INSIA was established in 2021 to better people's lives by promoting the use of evidence-informed social care interventions. We take the position that trustworthy evidence can improve social problems through effective social intervention policies and programs, that the best available evidence should guide social care policy- and practice decisions, and that there is a need to continue to build a robust evidence base for social policies by researching and conducting evaluations. INSIA is uniquely positioned to bridge the gap in SIA globally, promoting collaboration, capacity building, and shared learning across disciplines and geographies. We argue that this network is not only highly relevant to the current times, but also crucial in helping solve social problems of tomorrow. The position statements elucidate INSIA's stance on the importance of promoting and enabling SIA, providing an aligned perspective that guides the network's actions and decisions. In the next few years, there is a need for more joint work to take forward the agenda we have proposed, with commitment and investment, to assure improvement of social problems.

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## References

Aujla, N., Frost, H., Guthrie, B., Hanratty, B., Kaner, E., O'Donnell, A., Ogden, M. E., Pain, H. G., Shenkin, S. D., & Mercer, S. W. (2023). A comparative overview of health and social care policy for older people in England and Scotland, United Kingdom (UK). *Health Policy*, *132*, 104814. https://doi.org/10.1016/j.healthpol.2023.104814

Berlin, M., Vinnerljung, B., & Hjern, A. (2011). School performance in primary school and psychosocial problems in young adulthood among care leavers from long term foster care. *Children and Youth Services Review*, *33*(12), 2489–2497 https://doi.org/10.1016/j.childyouth.2011.08.024

Butler, I. (2002). A code of ethics for social work and social care practice; A critical commentary. *British Journal of Social Work*, *32*(2), 239–248. https://www.jstor.org/stable/23716761. https://doi.org/10.1093/bjsw/32.2.239

Butler, P. (2024, October 3). Rising cost of social services in England putting arts and youth services at risk, say councils. *The Guardian*. https://www.theguardian.com/society/2024/oct/03/rising-cost-of-social-services-in-england-putting-arts-and-youth-services-at-risk-say-councils

Crisp, B. R. (2015). Systematic reviews: A social work perspective. *Australian Social Work*, *68*(3), 284–295. https://doi.org/10.1080/0312407X.2015.1024266

Davis, J., Mengersen, K., Bennett, S., & Mazerolle, L. (2014). Viewing systematic reviews and meta-analysis in social research through different lenses. *SpringerPlus*, *3*(511). https://doi.org/10.1186/2193-1801-3-511

Eurostat. (2024, November 25). EU social benefits expenditure up 6% in 2023. *Eurostat*. https://ec.europa.eu/eurostat/web/products-eurostat-news/w/ddn-20241125-2

Filipenco, D. (2024, May 12). The biggest social issues that affect modern society. *Developmentaid*. https://www.developmentaid.org/news-stream/post/173559/social-issues-that-affect-modern-society

Forbes, A., & Griffiths, P. (2002). Methodological strategies for the identification and synthesis of "evidence" to support decision-making in relation to complex healthcare systems and practices. *Nursing Inquiry*, *9*(3), 141–155. https://doi.org/10.1046/j.1440-1800.2002.00146.x

Grant, S., Montgomery, P., Hopewell, S., Macdonald, G., Moher, D., & Mayo-Wilson, E. (2013). Developing a reporting guideline for social and psychological intervention trials. *Research on Social Work Practice*, *23*(6), 595–602. https://doi.org/10.1177/1049731513498118

Kelly, L., Harlock, J., Peters, M., Fitzpatrick, R., & Crocker, H. (2020). Measures for the integration of health and social care services for long-term health conditions: A systematic review of reviews. *BMC Health Services Research*, *20*(1), 358. https://doi.org/10.1186/s12913-020-05206-5

Kreuter, M. W., Thompson, T., McQueen, A., & Garg, R. (2021). Addressing social needs in health care settings: Evidence, challenges, and opportunities for public health. *Annual Review of Public Health*, *42*, 329–344. https://doi.org/10.1146/annurev-publhealth-090419-102204

Long, A. F., Godfrey, M., Randall, T., Brettle, A., & Grant, M. (2002). Developing evidence based social care policy and practice. Part 3: feasibility of undertaking systematic reviews in social care. *White Rose Research*, http://eprints.whiterose.ac.uk/42963/

Ministry of Social Services. (2019). Commission to initiate and establish an international network.

Mullen, E. J. (2014). Evidence-based knowledge in the context of social practice. *Scandinavian Journal of Public Health*, *42*(13 Suppl), 59–73. https://doi.org/10.1177/1403494813516714

Mullen, E. J., & Shuluk, J. (2011). Outcomes of social work intervention in the context of evidence-based practice. *Journal of Social Work*, *11*(1), 49–63. https://doi.org/10.1177/1468017310381

National Academies of Sciences, Engineering, and Medicine; Health and Medicine Division; Board on Health Care Services; Committee on Integrating Social Needs Care into the Delivery of Health Care to Improve the Nation's Health. (2019, September 25). *Integrating social care into the delivery of health care: Moving upstream to improve the nation's health*. National Academies Press (US). https://www.ncbi.nlm.nih.gov/books/NBK552597/ https://doi.org/10.17226/25467

Oakley, A., Gough, D., Oliver, S., & Thomas, J. (2005). The politics of evidence and methodology: Lessons from the EPPI-Centre. *Evidence & Policy*, *1*(1), 5–31. https://doi.org/10.1332/1744264052703168

OECD. (2015). *Integrating social services for vulnerable groups: Bridging sectors for better service delivery*. OECD Publishing.

O'Rourke, B., Oortwijn, W., & Schuller, T., & International Joint Task Group. (2020). The new definition of health technology assessment: A milestone in international collaboration. *International Journal of Technology Assessment in Health Care*, *36*(3), 187–190. https://doi.org/10.1017/S0266462320000215

Sanderson, I. (2002). Evaluation, policy learning and evidence-based policy making. *Public Administration*, *80*(1), 1–22. https://doi.org/10.1111/1467-9299.00292

Shaw, I. F. (2007). Is social work research distinctive? *Social Work Education*, *26*(7), 659–669. https://doi.org/10.1080/02615470601129834

Steketee, G., Ross, A. M., & Wachman, M. K. (2017). Health outcomes and costs of social services: A systematic review. *American Journal of Public Health*, *107*(S3), S256–S266. https://doi.org/10.2105/AJPH.2017.304004

U.S. Department of Education. (2021). *Supporting child and student social, emotional, behavioral and mental health needs*. U.S. Department of Education, Office of Special Education and Rehabilitative Services.

Victor, L. (2008). Systematic reviewing in the social sciences: Outcomes and explanation. *Enquire*, *1*(1), 32–46.

Wallace, A., Baldwin, S., Croucher, K., & Quilgars, D. (2004). Meeting the challenge: Developing systematic reviewing in social policy. *Policy & Politics*, *32*(4), 455–470. https://doi.org/10.1332/0305573042009444

World Economic Forum. (2024). *Global risk report 2024*. https://www.weforum.org/publications/global-risks-report-2024/