

The Politics of Evidence-Based Policy-Making: The Case of Denmark

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Abstract

The paper presents how research evidence in the form of systematic reviews was established in Denmark in the fields of medicine, social affairs and education. Based on a research project, the institutionalization of the idea of evidence-based policy and practice through the establishment of evidence producing organizations, such as The Campbell Collaboration, i.e. the so-called evidence movement is described and analyzed.

The evidence movement is an international affair, but in this paper the focus is on the Danish branch of the movement and on the political aspects related to this. Three questions are addressed: 1) Why and how has the evidence movement become institutionalized? 2) How is it organised and how does it practice? 3) Which are the political dimensions and conflicts related to this development?

The paper is divided in two parts. The first part is empirical. It holds an analysis of how the idea of evidence-based policy and practice has travelled into Denmark, how the idea has been institutionalised in organisations specialized in producing evidence-based knowledge and how these organisations practice.

The second part of the paper is reflective. It holds a discussion of the political dimensions and the political context of the development of the evidence movement including a discussion on the conceptual dispute, the methodological conflicts and the roles of different actors engaged in the arena of evidence politics.

Zusammenfassung

Dieser Beitrag zeigt, wie sich Evidenz in der Form systematischer Reviews in den Feldern Medizin, Sozialarbeit und Bildung in Dänemark etabliert hat. Die so genannte Evidenzbewegung („evidence movement“), also die Institutionalisierung der Idee einer evidenzbasierten Politik durch die

Etablierung evidenzproduzierender Organisationen (z.B. Campbell Collaboration) wird auf Basis eines Forschungsprojektes beschrieben und analysiert.

Die Evidenzbewegung ist international, doch steht im Fokus des Artikels der dänische Zweig der Bewegung. Drei Fragen werden diskutiert: 1) Warum und wie wurde die Evidenzbewegung institutionalisiert? 2) Wie ist sie organisiert und wie sieht ihre Praxis aus? 3) Welche politischen Dimensionen und Konflikte sind mit dieser Entwicklung verbunden?

Der Artikel ist zweigeteilt. Der erste empirische Teil analysiert, wie die Idee einer evidenzbasierten Politik und Praxis nach Dänemark gekommen ist, wie sie in Form von Organisationen, die auf die Wissensproduktion spezialisiert sind, institutionalisiert wurde und wie diese Organisationen arbeiten. Der zweite reflektierende Teil diskutiert die politischen Dimensionen und den politischen Kontext der Entwicklung der Evidenzbewegung und geht dabei auf die konzeptionellen und methodologischen Debatten sowie auf die Rollen der verschiedenen Akteure in der Arena der Evidenzpolitik ein.

1 Introduction

In Denmark welfare policies and public sector reforms are high politics these years. Demographic changes threaten on the horizon. Projections show that in the future there will be fewer people in the labor market, large numbers of public employees will retire and the demand for welfare services will increase. In this context the evidence movement has established itself in Denmark in recent years. In several policy fields organizations specialized in producing evidence through summarizing and synthesizing already existing evaluative knowledge in so-called reviews have been formed. By producing but also disseminating evidence produced internationally the organizations aim at ensuring that policy-making and policy delivery are evidence-based. The paper analyses and discusses this development.

The concept of “evidence” has a very broad and diffuse meaning in the debate on the “evidence-based policy and practice”. The recent debate has shown heated disagreements about what counts as evidence (Donaldson, Christie and Mark 2009: 5-6). This discussion is part of a much wider discussion and also a field of study especially within evaluation. This wider field is about the use and influence of evaluation and research in

policy and professional practice, on which there has been written extensively. One recent book with a good overview of the field is Nutley et al. (2007). However, in this chapter "evidence" understood as systematic research reviews is in focus, and not the general issue on utilization of research and evaluation.

The focus is on the Danish branch of the evidence movement and on the political aspects related to this. Three questions are addressed. 1) Why and how has the evidence movement become institutionalized? 2) How is it organized and how does it practice? 3) Which are the political dimensions and conflicts related to this development?

The paper is divided in two parts. The first part is empirical. It holds an analysis of how the idea of evidence-based policy and practice has travelled into Denmark, how the idea has been institutionalized in organizations specialized in producing evidence-based knowledge and how these organizations practice.

The theoretical, analytical approach in this part is institutional and methodological. The institutional approach puts focus on how the idea of evidence-based policy and practice has travelled into Denmark and how it has become institutionalized in organizations specialized in producing evidence. Institutionalization may be driven by different pressures. Using DiMaggio and Powell (1991: 67) a distinction can be made by coercive, mimetic and normative pressures. Coercive pressure results from formal or informal pressures and authority exerted on organizations by other organizations upon which they are dependent as well as by cultural expectations in society. Mimetic pressures results from uncertainty. When organizational technologies are poorly understood, when goals are ambiguous, or when the environment creates symbolic uncertainty, organizations may model themselves on other organizations. Normative pressures finally stem from professionalization defined as collective struggle of members of an occupation to define conditions and methods for their work and to establish a cognitive base for and thereby legitimate their occupational autonomy. The analysis of how the evidence idea travels and becomes institutionalized will clarify whether the institutionalization of the evidence movement in

Denmark is driven by coercive, mimetic and/or normative pressures.

A central notion in DiMaggio and Powell (1991) is that the travel and institutionalization of ideas result in isomorphism defined as homogenization across organizations and organizational fields. The analysis of how the evidence-producing organizations organize and practice will clarify whether isomorphism occurs or whether the idea of the evidence movement is translated into local contexts and shaped by national and local political traditions and stakeholders, as suggested by among others Czarniawska and Joerges (1996), Sahlin-Anderson (1996), Radaelli (2005) and Røvik (2007).

The analysis of the practice of the evidence-producing organizations also draws on a methodological approach. Methodologically the historical point of departure of the evidence movement has been to produce systematic reviews using meta-analysis, defined as treatment-control comparison based on statistical calculations, to synthesize results from primary studies designed as randomized controlled trials (RCTs, also called “the gold standard”). Across time other kinds of reviews as well as other types of syntheses have been developed. A recent methodological overview on reviews and review practices thus distinguishes between systematic reviews, narrative reviews, conceptual reviews, rapid reviews, realist reviews, scoping reviews, “traditional” reviews, critical reviews, expert reviews and “state of the art” reviews as well as between meta-analysis, narrative synthesis, cross-study synthesis, best practice synthesis, vote counting, cross-design synthesis, best available evidence and realist synthesis (Petticrew and Roberts 2006). Wherever relevant these distinctions will be used and further defined for analyzing the practice of the evidence-producing organizations.

The second part of the paper is reflective. It holds a discussion of the political dimensions in and the political context of the development of the evidence movement including a discussion on the conceptual dispute, the methodological conflicts and the roles of different actors engaged in the arena of evidence politics. The approach in this part is political in a broad sense of the term. According to Warren (1999) the concept of politics should not be

defined solely as behavior, as a game, as allocation, as institutional authority, as power, as conflict or as collective action. Instead the concept of politics should be defined more holistic as “the subsets of social relations characterized by conflict over goods in the face of pressure to associate for collective action, where at least one party to the conflict seeks collectively binding decisions and seeks to sanction decisions by means of power”. Using this definition evidence politics is about conflicts related to what constitutes knowledge potential usable in collectively binding decisions.

The analysis is based mainly on publicly accessible documentary data, including websites for organizations producing systematic reviews, guidelines and handbooks from these organizations and reports from conferences on the topic and interviews with four key persons, including three Danes and one from Norway. In addition, the authors of this paper have participated in seminars and conferences on evidence topics in Denmark and abroad. Four international conferences and three Danish conferences have been attended. Our work on the evidence movement is research-based and has been supported by the Danish Social Science Research Council. More details on our sources are available in the two original reports from the project (Bhatti, Hansen and Rieper 2006: 18; Rieper and Hansen 2007: 16). However, we are not only analytical outside observers of the institutionalization of the evidence movement. On several occasions we have been involved in discussions on methodological questions. We have stressed the need for not only focusing on the “what works question” but also focusing on the “what works for whom in which context question” as well as the “why question”. We advocate for a contingency-based approach to evidence and are so to speak players on the center ground not preaching in any of the often sectarian churches (Rieper and Hansen 2007).

2 The historical institutional development

In Denmark the evidence movement has gained ground and become institutionalized in especially three fields: the health sector, the field of social work and the educational field (Bhatti, Hansen and Rieper 2006). Each of these fields will be analyzed beneath.

Evidence-based medicine

The concept of evidence travelled into Denmark in the late 1980s and the beginning of the 1990s where researchers in the field of medicine arranged several conferences inviting among others the Canadian David Sackett, who some years earlier had coined the idea of evidence-based medicine, to hold keynotes (Kristensen and Sigmund 1997: 10). At that time it was stressed that practicing evidence-based medicine requires the best available clinical evidence on which to answer clinical questions and that the clinical question determines the evidence one seeks (Sackett 1997: 19).

In the beginning of the 1990s Danish researchers also participated in the British initiatives to establish the international Cochrane Collaboration. In 1993 a branch of this, the Nordic Cochrane Centre, was established in Copenhagen. The center is the “host” for four of the Cochrane Collaborations among 50 internationally composed review groups. The center facilitates the four groups, arranges courses in review methodology and disseminates Cochrane produced evidence. The center is financed from a number of sources including the Danish Government, but no commercial companies.

Over the years more evidence-producing organizations have been established and have started to produce reviews. Copenhagen Trial Unit (CTU), which is involved in both preparation of reviews and ordinary clinical experimental activity, was established in 1995. CTU is closely related to Cochrane. Institute for Rational Pharmacotherapy, which produces reviews on new medical products, was established in 1999 under the Danish Medicines Agency and Pharmakon (a

conference and training center in the pharmaceutical sector), which is involved in preparation of reviews in pharmacy (e.g. good pharmacy practice, patient safety and medication errors), was established in 2000.¹

The Cochrane Collaboration is without doubt the most productive organization producing reviews in the world. And Cochrane serves as a model for many of the other evidence-producing organizations. The Cochrane database of reviews holds more than 4,000 published reviews and protocols, protocols being a project description for an ongoing review project. The Cochrane Collaboration has prepared a comprehensive handbook on review methodology called the “Cochrane Handbook for Systematic Reviews of Interventions”. The handbook subscribes to the evidence hierarchy considering knowledge which is produced via classical experiments in the form of randomized trials the most reliable design, much more reliable than quasi-experimental studies using matching, cohort and case control studies, before-after comparison not to speak about process evaluation, qualitative case studies or professional and expert opinion. Also the handbook subscribes to synthesizing using meta-analysis whenever possible.

The Cochrane Collaboration practices as it preaches. Observers report that by far the majority of the existing Cochrane reviews are prepared with a point of departure in the evidence hierarchy (Eraut 2004: 95). Our own analysis shows that 2/3 of the 499 systematic reviews published by Cochrane in 2005 included results exclusively from primary studies designed as RCTs (Rieper and Hansen 2007). Critics of this position for example within the field of social psychiatry have argued that RCTs sometimes are so divorced from clinical practice that their

¹ Reviews are also produced and disseminated by a unit working with technology assessment within the health services. The idea of health technology assessment received attention in Denmark from the 1980s, but was not institutionalized until 1997 where an institute for health technology assessment was established under the National Board of Health. When reviews are used in health technology assessment their focus on clinical treatment is most often combined with other kinds of knowledge on for example organizational and economical aspects of the treatment in question.

findings become meaningless and that more credibility ought to be rendered to observational studies (Deahl 2006).

Evidence-based social work

In Denmark, the idea of evidence-based policy and practice travelled into the field of social welfare 10 years later than had been the case in medicine. The travelling process was, however, very much alike. In 2000 the international Campbell Collaboration was established with the aim of producing systematic reviews within the fields of crime and justice, education and social welfare. The Campbell Collaboration was modeled on the Cochrane Collaboration organizationally as well as methodologically. A Danish welfare researcher had been invited to a planning meeting. Participating in this the idea of establishing a Nordic Campbell Centre at the Danish National Institute for Social Research was born. This idea was realized in 2002. The Nordic Campbell Centre, today called SFI Campbell, primarily works with producing and disseminating systematic reviews in the field of social work, but it also disseminates knowledge produced by the international Campbell Collaboration in the fields of crime and justice and education. The profile of the Nordic Campbell Centre has thus been influenced by the organizational context in which it became embedded. SFI Campbell is a division within SFI—The Danish National Centre for Social Research. It is also the Nordic Campbell Centre and functions as a regional partner to The Campbell Collaboration. Thus, the center is indirectly financed by the Danish Ministry of Social Affairs.

Turning to the question of review practice, the Campbell Collaboration has prepared guidelines for review practice. In addition, Campbell refers to the Cochrane Handbook. The development of methodology in the Campbell Collaboration can be characterized as a mimetic process where the practice of the Campbell Collaboration has been modeled on the practice of the Cochrane Collaboration. This can also be illustrated by the fact that 2/3 of all published Campbell reviews accepted results

exclusively from primary studies designed as RCTs (Rieper and Hansen 2007).

SFI Campbell has initiated reviews on among other themes active labor-market policy, a policy area in which the Scandinavian countries have been forerunners. One of the reviews made on this theme concerns the employment effect caused by the threat of activation, in other words, whether the unemployed who are registered for activation find work by themselves in order to avoid activation. The review includes results from 13 primary studies, three from the US, one from respectively Australia and Switzerland and eight studies carried through in Scandinavia.

In this case a protocol was approved by the international Campbell Collaboration which included results not exclusively from RCTs, but also from primary studies designed as pseudo-experiments, natural experiments as well as econometric analyses of observation data (Bjørn et al. 2004a). If one had chosen merely to include primary studies rooted in RCTs, it would have had the consequence that all studies carried out in the Scandinavian countries would have been excluded. When the idea of the evidence movement travels out of the field of medicine, it is confronted by other research and evaluation traditions. In most non-medicine fields there seems to be rather few RCT rooted studies carried out outside the USA. Using the classical Cochrane/Campbell methodological approach produces review conclusions mainly built on American experience. To which degree, in which fields and on which topics are these relevant and applicable in a European and Scandinavian context?

In the protocol of the review on treat of activation the reviewers wrote that they planned to synthesize the results using meta-regression analysis. However, in the review they argue that due to heterogeneity across the studies they had chosen instead to do a narrative synthesis (Bjørn et al. 2004b). This has caused discussions in the Campbell Collaboration. The politics here is to use meta-analysis whenever possible. According to Campbell, the reviewers thus ought to have used meta-analysis in relation to synthesizing the results from the three RCT designed primary studies from the U.S. and narrative synthesis on the other studies.

The reviewers on the other hand argue that doing this would have been very time consuming and not in any way altering the conclusions. SFI Campbell has chosen to publish the review even though the controversy has meant that the review is not yet accepted.

The review process related to the review on treat of activation is interesting as it in an external evaluation of the Nordic Campbell Centre became the steppingstone for a critic of the narrow methodological tradition in the classical Cochrane/Campbell approach. The external evaluation panel chaired by the director of the Danish National Board of Health recommended that the center works to get the international Campbell Collaboration to accept other designs than RCTs (Fisker et al. 2007). In addition, the panel recommended that the Nordic center should be given more financial resources and that the hitherto fixed-duration contract should be replaced by normal governmental funding. In late 2008 the Parliament followed this recommendation.

Evidence-based education

A few years after the idea travelled into social welfare the turn came to the field of education. In 2004 a Danish delegation consisting of civil servants from two ministries and researchers participated in a conference in Washington examining the possibilities for increasing the effectiveness of education in OECD countries with the help of evidence-based knowledge. The conference was the first of four conferences arranged by the OECD center called Centre for Educational Research and Innovation (CERI) as part of the project "Evidence-based Policy Research in Education" (OECD 2007). The Washington conference, which was arranged in co-operation with the U.S. Education Department's Institute of Education Sciences and the American Coalition for Evidence-Based Policy, had the heading "OECD-U.S. Meeting on Evidence-Based Policy Research in Education". The ideas of evidence-based medicine, evidence-based social work etc. now became supplemented by an idea of evidence-based research. In Denmark many educational

researchers experienced the idea of evidence-based research as a contradiction in terms.

At the Washington conference presentations were made on, among other topics, experience from the Campbell Collaboration's effort in the education area and from the American What Works Clearinghouse (WWC) established in 2002 by the U.S. Department of Education's Institute of Education Sciences and closely affiliated with the Campbell Collaboration. The Danish delegation participating in the conference was made up of both civil servants from the Ministry of Science, Technology and Innovation, the Ministry of Education and researchers from at that time the Danish University of Education, now merged into University of Aarhus as School of Education. The conference became the scene of sharp arguments between on the one side the American participants subscribing to RCT designs and on the other the participants from the Nordic countries putting forward the argument that there are many sources of evidence (OECD 2004b).

Parallel with this OECD carried out a review of Danish educational research. The review report (OECD 2004a) suggested that Denmark should consider to either establishing a What Works Clearinghouse after the American Model or being inspired by the British Evidence for Policy and Practice Information and Co-ordination Centre (EPPI). This suggestion kept the methodological agenda open, as the WWC subscribes to the RCT approach (Boruch and Herman 2007) while EPPI subscribes to a more pluralistic approach (Gough 2007). In spring 2006 the two ministries and the university decided to establish a Danish Clearinghouse. The decision was made public at a conference entitled "An obvious improvement—conference on better use of evidence-based educational research". In the memo presenting the new initiative the Cochrane Collaboration, the Campbell Collaboration and the WWC were mentioned as models to get inspiration from (Danmarks Pædagogiske Universitet, Ministeriet for Videnskab, Teknologi & Udvikling and Undervisningsministeriet 2006). The memo may be interpreted as if central actors in this phase tried to close the methodological agenda by

mentioning only organizations subscribing to the RCT approach as models for organizing.

In the educational field in Denmark there is a tradition for designing evaluations formative rather than summative. And there is no tradition at all for using RCT designed primary studies when experimenting with new ways of organizing and developing pedagogical interventions. In this context the practice of the Danish Clearinghouse thus immediately became a matter of conflict. The concept of evidence and the methodological approach were brought up for discussion in books (Moos et al. 2005), in articles (Laursen 2006; Borgnakke 2006; Hansen and Rieper 2006) and at conferences. These discussions seem to have influenced the way the Clearinghouse has chosen to work. The policy for review practice which the Clearinghouse has worked out thus departs from a typology thinking of evidence. The plan is to use several methods for synthesizing among others meta-analyses, narrative synthesis and combined synthesis (Dansk Clearinghouse for Uddannelsesforskning 2006). The international methodological discussions and experience have so to speak constituted a menu from which an approach has been developed.

A comparative perspective on institutionalization processes

The three cases show that institutionalization processes have differed across fields. In both medicine and social welfare the travel of the synthesizing part of the idea of the evidence movement into Denmark has been brought about by key researchers meeting the idea by participating in international research networks. Normative pressures have driven the processes of institutionalization. Researchers have been able to use the idea of synthesizing to further develop the conditions and the methods of their work. And they have succeeded in raising support and economic resources to establish organizations specializing in producing evidence. The process has been supply-driven.

In the educational field coercive pressures have been important as a starting point as governmental organizations have put pressures upon the dependent Danish University of Education.

These coercive pressures have constituted a point of departure for initiation of normative pressures. The government, in collaboration with the OECD, has created a coercive pressure and has by using economic resources tempted educational researchers to implement the idea of establishing a national organization specialized in synthesizing. The process has been demand-driven and not supply-driven as in the medical and social welfare fields.

The institutionalization processes in the three fields in Denmark have been relatively decoupled processes. One transverse initiative has, however, probably also been of some importance. In 2004-2005 a private think tank assembled a network consisting of more than 40 persons representing several ministries, municipalities, interest organizations and a few research institutions. In several meetings the network discussed the idea of the evidence movement and in the end published a report warmly supporting the idea unfortunately without really reflecting on more critical topics (Mandag Morgen 2004). This campaign initiative contributed to putting the idea of evidence on the agenda not least in the interest organizations of the welfare professions.

As shown, the international networks have been carriers of an organizational idea of organizing review work in worldwide international organizations with regional and national branches and with research groups and networks working out synthesis on specific themes. Included in the organizational idea is an idea of producing global knowledge. The idea of global knowledge has been questioned as the overall idea has travelled from medicine into the fields of social welfare and education. This is probably the reason why regional and national centers have not become as widespread in the Campbell Collaboration as in the Cochrane Collaboration. In some countries the skepticism towards global knowledge in the fields of social welfare and education has led to the establishment of national organizations producing reviews, in the UK for example EPPI and SCIE.

In Denmark the SFI (Nordic) Campbell Centre sticks to the idea of global knowledge. However, in relation to the publishing of a review on multisystemic therapy (MST) the idea of global knowledge became questioned. The review on MST synthesized

results from eight primary RCT designed studies carried through in the U.S., Canada and Norway. The conclusion was that there is no evidence that MST is a better means than the alternatives. The publishing of the MST review initiated an intensive methodological discussion. One of the aspect of this was whether it would be more fruitful for Denmark to learn from contextual relevant RCT designed primary studies (for example the study carried through in Norway) than from the review synthesis of the results of MST experiments comparing MST with very unlike treatments as usual.

In the educational field the Danish Clearinghouse for Educational Research has chosen another strategy than the explicit global one. The Clearinghouse follows a double strategy. On the one side it disseminates global knowledge from among others the Campbell Collaboration, but at the same time it produces more contextualized reviews synthesizing results from the Scandinavian countries.

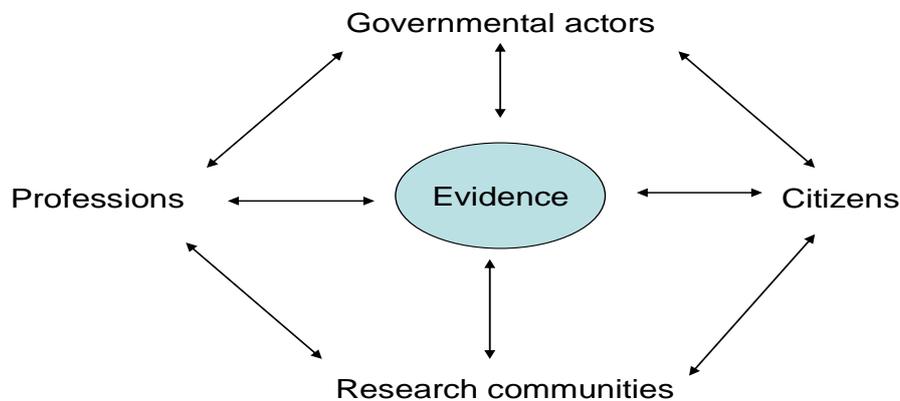
In the fields where normative pressures have been important the organizational idea of the evidence movement has been furthered by mimetic pressures. National branches of international organizations have been modeled on experience from other countries. In the educational field where coercive pressures have been important also inspiration on how to organize has been picked up internationally, but in this case the organizational and methodological solution has been shaped much more by the local context and the conflicts embedded in this.

Clearly the methodological idea of the evidence movement has developed as the idea has travelled across borders and fields. The Campbell methodology was modeled on the Cochrane methodology in a mimetic process. However, as the SFI (Nordic) Campbell Centre gained experience methodological discussions initiated pressures to develop and broaden the methodological approach. However, to assess the importance of this is still too early.

3 The political dimensions in the institutionalization of the evidence movement

Figure 1 is a simple illustration of the actors on the political conflict arena related to the evidence dispute and “game”. As the analysis above has shown research communities have been important drivers in the development of the international evidence-producing organizations, Cochrane and Campbell, and their regional branches, whereas governmental actors have been important drivers in the educational field. Governmental actors can be seen as both coercive regulators and potential users of evidence. Research communities are mainly producers interested in developing their activities and being able to attract resources. Both professions and citizens may be influenced by evidence-based decisions and they may also be users of the evidence produced. Relations between actors differ across fields. In the field of medicine research communities are more interwoven in the profession than is the case in the fields of social work and education. The reason is first that the larger hospitals are research institutions in addition to their treatment functions, and second that the medical profession is highly professionalized and research is an integrated part of the careers of the medical professionals. This is not the case within the social and educational sector.

Beneath three kinds of politics related to this arena will be discussed. We distinguish between “the politics of evidence”, defined as conflicts related to the very idea of evidence, “the politics of evidence-based practice”, defined as conflicts related to how the role of the professions are shaped by practicing the idea of evidence, and “the politics of evidence-based policy”, defined as conflicts related to how the role of governmental actors is shaped by practicing the idea of evidence.

Figure 1: The arena for evidence politics

The politics of evidence

The idea of the evidence movement is in fact not one idea, but a bundle of ideas. We can distinguish between the overall idea of synthesizing knowledge, and the more specific ideas of how to practice methodologically and how to organize the knowledge producing system.

The overall idea of the evidence movement has been developed as an answer to the information society's information overload and can be seen as a strategy for creating transparency in multiple knowledge streams. As such the overall idea is hard to question. And it has not as such been questioned in Denmark.

Another story is, however, the very concept of evidence, on which there has been an intensive dispute (see for example Social Kritik 2005, Unge Pædagoger 2006, and internationally Donaldson, Christie and Mark 2009). The actors engaged in the debate have primarily belonged to the research community, but actors from the professions have also played a role. The role of the actors has been to contribute to the debate from various positions of interests and different scientific positions.

The dispute, which may be interpreted as a game concerning the power of definitions, has shown that the concept of evidence is elastic. On the one side the dispute has concerned the content of the concept. Does evidence mean that something is proofed?

Does evidence mean that something is trustworthy? Does evidence mean that something is obvious? Some have argued that to some degree the dispute about the concept of evidence relates to language (Qvortrup 2008). In an Anglo-Saxon perspective evidence relates to proof and thereby to causality. In French the meaning of the concept is softer as it relates to experience, habits and to the self-evident and obvious action. In both languages the meaning of the concept relates to clarity, but where the Anglo-Saxon version emphasizes distinctive knowledge, the French version opens up for including also tacit knowledge. Thereby the two versions of meaning subscribed to the concept may become each others' contradictions, or even sometimes enemies.

On the other hand the dispute has concerned the concept of evidence compared to related concepts, above all the concept of documentation. Some actors in the medical field have argued in favor of a distinction between evidence and documentation, where evidence is defined as knowledge produced through systematic reviews, in other words second order knowledge, while documentation is defined as other kinds of systematic knowledge, including knowledge produced through primary studies, statistics on results of treatments etc. (Lindberg 2002). On the contrary, some actors in the field of social work have argued that evidence is one of the means for social workers to document their work, share knowledge and thereby ensure quality (Nielsen 2005).

Most often, however, the concept of evidence and the concept of documentation are used less systematic and often synonymously. This implies that for many actors participating in the evidence discourse evidence have many sources. Thinking of the educational field besides reviews and primary research for example tests on pupil's competence, evaluations of all kinds, international comparisons such as the PISA studies etc may be defined as evidence.

Not only the very concept of evidence but also the methodology used for gathering evidence is thus open for dispute and an arena for power of definition games. As the analysis has shown the international evidence producing organizations argue for departing from the evidence hierarchy. This position has been

heavily questioned in Denmark especially as the idea of evidence has travelled into the fields of social work and education. Giving RCTs precedence has been questioned. Focusing narrowly on the “what works question” and very seldom on the “what works for whom in which context question” and the “why question” has been questioned. And the premises for the idea of global knowledge have been questioned.

Whereas the dispute about the concept of evidence has engaged many actors, from research communities, professions as well as governmental actors, the methodological dispute has been a primarily micro-political process going on in research communities. Sometimes, however, as the example of the evaluation of the Nordic Campbell Centre shows, even the methodological dispute is lifted up into a broader agenda.

The discussion about whether there are one or several sources of evidence relates to different streams of thought about what constitutes a legitimate knowledge producing system. As the concept of evidence was coined in the medical field it was anchored in a linear thinking about knowledge production, a type of thinking often named mode 1, where research results feed into practice development. When the concept of evidence has travelled into other fields such as social work and education, social workers and teachers have experienced that practice built on professional more tacit knowledge experience is questioned. And researchers and evaluators who have been working with formative evaluation related to e.g. pedagogical reforms have experienced that their professional approach has been questioned. In the field of education it has been proposed instead to think in a mode 2 inspired way and thereby accepting that evidence may be produced in different ways departing from both the research side and the practice side defining the synthesizing task as an effort to combine different streams of evidence into reviews.

At last a possible side effect of the evidence movement has been discussed in the research communities. The question is whether the existence of the evidence movement will influence the allocation of resources to primary research and evaluation studies. Some research communities being part of the more formative evaluation tradition have aired the fear that research

grants in the future may be allocated primarily to primary studies matching the evidence thinking. Maybe their prediction will turn out to be right. At any rate the evaluation panel mentioned above recommended that the Nordic Campbell Centre ought to contribute to promoting more Danish “what works” primary studies. On the long view the evidence movement may change research policy thinking and priorities.

The politics of evidence-based practice

This section and the following one are—as already mentioned—limited to “evidence” as systematic reviews of research. The politics of evidence-based practice concerns how the professions take part in, are influenced by and use evidence. This theme has been intensively discussed especially in the interest organizations of the welfare professions among others the organizations of nurses, ergo-therapists, social workers and teachers.

Evidence optimists, typically leaders of the interest organizations, have argued that evidence is a means to document and legitimate the work of the profession. Also evidence according to this standpoint facilitates sharing of experience and learning and ensures quality. Thereby evidence thinking may be a strategy to secure resources and professional power and a shield against cutbacks. In fact, “evidence-based practice” is used by the associations of professions as an element in their strategy for improving the level of professionalization. For instance, the subject is included in the University Colleges that educate the professionals within social work, education (school teachers), and the paramedical professions.

Evidence pessimists, typically ordinary members of the interest organizations, on the contrary, have argued that institutionalization of evidence thinking runs the risks of strengthening detailed control, standardizing work, decrease freedom of work practices and reifying the relations between professionals and clients. In addition pessimists interpret evidence thinking as a liberal ideology aiming at cutting back the welfare state.

In between the optimists and the pessimist are actors engaged on a more day to day basis in ensuring that professionals have

access to the best available evidence. These actors are pre-occupied with developing relations between research communities and practice and developing educational programs and training courses as to make professionals reflect on evidence and keep them up to date. Among those are “knowledge brokers” in various institutional settings, such as knowledge centers, the University Colleges and the National Board of Social Services.

In the arena for politics of evidence-based practice conflicts and disputes are observable. Empirical studies of how evidence is used by and influences professionals are more limited. In the field of medicine one study has been made on the influence of evidence in the form of Cochrane reviews on clinical practice in the treatment of liver patients (Kürstein et al. 2005; Kjellberg 2006). The study shows that even in an environment where RCTs are regarded as “the gold standard” and systematic reviews are accepted as the best method to synthesize knowledge many doctors are not aware of which treatments are regarded as the best available in relation to specific diagnoses. As it is stressed also in the literature on use of evidence (e.g. Nutley et al. 2007), this illustrates that there are many barriers for using evidence in daily practice even in fields where evidence thinking is highly supported. Barriers must be expected to be even greater in fields characterized by conflicting view points on the evidence idea.

The politics of evidence-based policy

The politics of evidence-based policy concerns how governmental actors take part in, are influenced by and use evidence. Also this theme has been a matter of dispute although to a lesser extent than the above-mentioned theme. The question about how political decisions come about is a classical theme in political science. Are political decisions rational linear processes? Are they results of games and negotiations between coalitions? Or are they more anarchic garbage can like processes? The short answer to all three questions is yes. Political decisions take different pathways in relation to different agendas and different context.

There is, however, not any doubt that evidence thinking includes an effort to rationalize political decisions. The dispute

here concerns whether the result will be better informed, but still political decisions or de-politicized, de-democratized and technocratic decisions. The think tank mentioned above promoted evidence thinking as a strong mean for making political priorities in a situation with sparse resources and increasing demands on the welfare state. In a situation with a majority government this could be a relevant scenario. But in a muddy political situation like the Danish one with a multiparty minority government and parties strongly competing for voters not least on welfare questions this does not seem a very plausible scenario.

At the level of service provision a number of Danish local governments have formulated an “evidence policy” supporting or demanding that service delivery and programs to the citizens are to be based on “research evidence”.

At the national level the discussion relates to the different levels in the political system. The dispute (to some actors fear) in this context concerns whether the freedom of municipalities will be restricted due to increasing central governmental control stemming from a standardization pressure linked to evidence thinking. This is parallel to the standpoint of evidence pessimist mentioned above.

4. Conclusion

In the introduction three questions were raised. 1) Why and how has the evidence movement become institutionalized? 2) How is it organized and how does it practice? 3) Which are the political dimension and conflicts related to this development? Now it is time to summarize the findings of the analysis and draw conclusions.

There are several explanations as to why the evidence movement has become institutionalized in Denmark in recent years. In the field of medicine and social work researchers have imported the idea from abroad and been successful in institutionalizing it in evidence producing and disseminating organizations. Using concepts from institutional theory institutionalization processes in these fields have been primarily

normative. Members of the research community have developed and professionalized the cognitive base for their work thereby legitimating their position by supplying a new form of knowledge, systematically synthesized knowledge, to society. In the field of education institutionalization has been the result of a coercive process. National governmental actors have in collaboration with the international regulatory developer OECD imported the idea and persuaded research communities to implement it. Demand for knowledge has created supply. In addition there has been an overall support for the idea of systematically synthesizing knowledge because the idea has been interpreted as to meet important challenges in contemporary society. Challenges linked with the information society's information overload and the demographic and economic trends of the welfare society.

Synthesizing practice is organized and practiced in different ways. In the fields of medicine and social work, practice is organized in regional centers placed in Copenhagen and linked to the international networks in the Cochrane and Campbell Collaborations. In the field of education, practice is organized in a national Clearinghouse. While the centers in the field of medicine and social work comply with the methodological position of the international collaborations (the evidence hierarchy and the use of meta-analysis), the clearinghouse in education has gone off from this so-called gold standard and takes a more pluralistic, contingency-based approach. While the international embedded organizations depart from the idea of globally valid knowledge, the clearinghouse departs from the idea that (at least some kinds of) knowledge is valid only in specific contexts.

The political dimensions and conflicts related to the development of the evidence movement are several and relate to how research communities, professions, governmental actors and citizens interact and are influenced. The politics of evidence concerns how to define the concept of evidence, how methodologically to produce evidence as well as how to build an evidence-producing knowledge system. The politics of evidence-based practice concerns how the professions take part in, are

influenced by and use evidence and the politics of evidence-based policy, how governmental actors take part in, are influenced by and use evidence. Many disputes and “games” are ongoing in this arena. Most important are the disputes and “games” related to whether to define the concept of evidence narrow or broad, whether the evidence movement is professionalizing professionals or decreasing their room for exercising discretion and whether the evidence movement ensures informed political decision-making or de-politicizes and de-democratizes it.

In a broader perspective all this relates to how to develop society. The evidence movement sells itself by offering a means to enhance quality and effectiveness in society by making good and not so good professional practice transparent. In this way a new layer in administrative policy may be formed in continuation of more than 25 years of new public management. Where “old” new public management layers have been economy-based, incentive-based, leadership-based and oriented towards user-responsiveness (Hansen 2005 and 2008), the new layer is more broadly knowledge-based. In this perspective the methodological conflicts related to the evidence movement should not be a matter of discussion solely in research communities. The central question is whether a position following a narrow definition of evidence combined with strong methodological demands on what constitutes evidence as it is sometimes expressed through the evidence hierarchy thinking represents a nothing-works strategy for rolling back the welfare state?

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