Wrexham University Research Online

Book Chapter

Mixed methods research

Livingston, W., Buykx, P., Neale, J. and Brulland Selseng, L.

This book chapter is published in *Handbook of Research Methods in Social Work*. (2025) International Handbook on Research Methods in Social Work, Edward Elgar Publishing.

Copyright of author. Published on Wrexham University research repository with the permission of publisher/author. Reproduced with permission of the Licensor through PLSclear.

Without limiting the author's and publisher's exclusive rights, any unauthorised use of this publication to train generative artificial intelligence (AI) technologies is expressly prohibited.

The definitive version of this book chapter is available at: https://www.elgaronline.com/edcollchap/book/9781035310173/chapter16.xml

Recommended citation:

Livingston, W., Buykx, P., Neale, J. and Brulland Selseng, L. (2025) 'Mixed Methods Research', In: Alston, M., Buykx, P., Foote, W., and Betts, D. (eds), Handbook of Research Methods in Social Work, International Handbook on Research Methods in Social Work, Edward Elgar Publishing, pp 186-198. Available at:

https://www.elgaronline.com/edcollchap/book/9781035310173/chapter16.xml

Mixed Methods Research in Social Work: Exploring Alcohol and other Drugs through Interdisciplinary Collaboration

Wulf Livingston, Penny Buykx, Joanne Neale, Lillian Bruland Selseng

Abstract

Social workers are trained to be reflective in evaluating their practice. They routinely use a rich variety of information to make assessments and guide future actions. These skills in uniting multiple sources of 'data' to inform activity are well-aligned with the skills used in undertaking mixed methods research. This chapter will illustrate how social workers may purposefully select and use multiple sources of data to better understand a practice problem in context or to evaluate a solution. Specifically, we will offer frameworks for how to approach four common research and evaluation tasks (1) Needs analysis, (2) Developing measures and interventions, (3) Evaluation of services, and (4) Policy appraisal. For each of these, we will discuss how two or more complementary sources of data might be used to illuminate the issue at hand. Illustrative case examples will be provided from the substance use field. The chapter will conclude with reflecting on how undertaking mixed methods research lends itself to interdisciplinary collaboration, mirroring inter-professional partnerships often required in social work practice.

Introduction

Social workers are trained to be reflective about evaluating their practice, and to notice how their choice of action influences a situation. They routinely use a rich variety of information to make assessments and guide future actions in practice. These skills in uniting multiple and varied sources of knowledge to inform activity are well-aligned with the skills used in undertaking mixed methods research and studies.

Social work is a profession that has increasingly established its own knowledge base and research identity. This is built upon ideas drawn from a range of other disciplines and professions, notably: medicine, psychiatry, psychology, and sociology. This journey has included the utilisation of a variety of research approaches from classical experimental designs to establish the effectiveness of specific interventions through to collaborative participatory approaches that might focus on system change. In doing so, social worker researchers have embraced a diversity of quantitative and qualitative methodologies, ranging from demographic and health information through to narratives and visual data.

This chapter illustrates how the use of mixed methods and different data sources can complement each other, strengthen our understanding of the lived and living experiences we encounter and inform our evidence-based practice responses. For social work 'evidence-base' is often about the effectiveness of interventions or services, and this chapter reflects that emphasis. We begin with a brief introduction to the nature of mixed methods approaches and an initial illustration of how this might be done across a number of research or evaluation considerations. The chapter then explores a selection of published research examples, all with a focus on alcohol and/or other drugs. This repeated focus helps the reader understand the depth of application within a single area of inquiry,

one which manifests itself in so many social work encounters. The chapter then concludes by drawing out some explicit social work considerations when using mixed methods.

What do we mean by mixed methods?

The traditional and dominant interpretation of mixed methods is that it must include both quantitative and qualitative approaches (Journal of Mixed Methods Research, 2023). The value of mixed methods is recognised where the use of a variety of approaches are likely to provide answers to given research questions that cannot be easily resolved through the adoption of a singular method. This is often done in what is referred to as a pragmatist paradigm that utilises a combination of deductive and inductive considerations (Creswell & Plano Clark, 2017).

Integration of methods can occur at various points in the research process; design, data collection, analysis and write up. Critical to mixed methods research is how the combination of approaches and data sources enables a research question to be answered. This might be through a sequence of explanations, with qualitative data helping to explain a quantitative analysis, or via a sequence of explorations, with each subsequent data set helping to develop an emerging understanding. Alternatively, the design might be convergent or simultaneous, where different methods are woven with iteration (Creswell and Plano Clark, 2017). We might also consider this has an added value in comparison, enrichment or expansion of ideas and understanding (Chaumba, 2013). Not only does mixed methods research therefore combine different types of data, it can also include both a singular or mixed adoption of a research design or overall framework. These are often explicitly referred to in mixed methods research as elements or packages of work within a study.

Despite this apparently clearly defined position regarding what constitutes mixed methods, the nuanced detail has long been debated (Creswell & Garret, 2008). Social workers are consistently encouraged to avoid simplistic or binary interpretations and it is wise for us to also do so here. This is what Doyle et al. (2009) refer to as a false dichotomy between positivist and non-positivist stances. This can be crucial for social work, which in its research and evaluation activity, needs to mirror the wider aspirations of the profession in supporting and valuing a diversity of actors and voices. Chaumba (2013) argues that the giving of voice is one of the three important elements bought to social work research by mixed methods, the other two being comprehensive analyses of phenomena, and enhanced validity of findings. We therefore suggest that mixed methods is best understood as the utilisation of a range of data collection methods, including both quantitative and qualitative sources, which are combined to ask different things of different people in different ways.

Although most research questions could in theory be answered by a range of approaches, some approaches will be better suited to a specific question than others. Thus, the aims of a study are a central consideration when choosing the research approach. In the table below, we offer examples of how some typical research or evaluation considerations might be addressed. This is illustrative rather than exhaustive. It also shows how some methods and sources of data are likely to be useful in more than one context.

Table 1. Illustrative examples of potential mixed approaches and data sources

Research or	<i>Possible</i> design or	Possible sources of data	Example	Methods used in example
Evaluation	overall approaches			
Consideration	(Singular or combined)			
Understanding the	Cross-sectional Inquiry	Case Studies	An exploratory study investigating experiences of	Cross sectional study
needs of specific	Needs Analysis	Demographic Data	alcohol and drug use and service provision among	Existing data set (general
populations	Systematic Reviews	Focus Groups Interviews	those also with visual impairment. This study used a	population surveys)
		Survey Instruments	mix of secondary data analysis and qualitative	analysis.
		Published literature (i.e.	interviewing.	International literature
		previous studies,	(Galvani et al., 2014; Galvani et al., 2016).	review.
		systematic reviews etc)		Interviews with individuals
				Interviews with
				professionals.
Developing	Collaborative design	Published literature	A collaborative research project to develop a	Cross sectional and
measures and	Cross-sectional studies	Stakeholder consultations	measure of recovery from alcohol and other drug	longitudinal
interventions	Longitudinal studies	Delphi Groups	problems. The project adopted a collaborative design	Delphi Groups
		Focus Groups	involving people with living and lived experience of	Focus Groups
		Interviews	substance use and addiction, academics, and	Stakeholder consultations
		Surveys	clinicians (Neale et al., 2016)	Cognitive Interviews
		Biometric data		Survey data
Evaluation of	Cross-sectional Inquiry.	Case Studies	Review of new national programme to establish local	Longitudinal study
actual delivery or	Retrospective analysis	Performance Monitoring	service focused on supporting families with complex	Existing service data –
services	Realist or Theory	Data	needs, where a child/children can be at risk as a	secondary analysis,
	Evaluation, i.e.		result of parental substance misuse problems. The	including validated
	Contribution Analysis		project) adopted a longitudinal evaluation approach	outcome measures.
			including secondary data analysis, and primary	Service mapping.
			qualitative interviews and case studies. (Thom, 2012;	Qualitative Interviews.
			Thom et al., 2014).	Focus groups

Appraisal of policy	Discourse Analysis	Focus Groups/ Interviews	A review of a 10-year national strategic policy for	International literature
	Narrative review	Literature reviews	substance misuse. The study adopted a Contribution	review.
	Realist or Theory	Media texts	Analysis approach and utilised a mixture of secondary	Secondary data analysis.
	Evaluation, i.e.	Surveys	data analysis and primary qualitative stakeholder	Guidance and evaluation
	Contribution Analysis	Whole or specific	consultation events.	reviews.
		population data sets	(Livingston et al.,2018)	Workshops.
				Interviews.

It is worth noting that the quantitative and qualitative components of mixed methods research projects are often published separately. Although they may appear together in longer documents such as a PhD or final published research report, peer-reviewed journals often have strict word constraints that make it very hard to publish all aspects of a mixed methods study in one output. This can make it difficult to see 'how' qualitative and quantitative methods are combined, such that the sum is greater than the separate parts. As a result, a reader sometimes has to search the literature closely to determine if a journal article is part of a broader mixed methods research project. The journal of Mixed Methods Research is an important exception for those interested in reading additional examples.

Detailed examples

Building on the research and evaluation considerations shown in Table 1, we now provide detailed examples of mixed methods research related to alcohol and other drugs.

Needs analysis

The purpose of undertaking a needs analysis is to identify and evaluate the needs, issues and priorities of a particular population or group. Often this involves exploring how, or if, these needs are being met by current provision. This is important to social work practice because it can help to inform service planning and provision, policy development and advocacy.

Example - Understanding substance use and the wider support needs of Scotland's prison population

Drug and alcohol use within prison settings is very common. It can present a range of ongoing health and organisational response problems (Toomey et al., 2022). A recent project sought to gain a better understanding of the nature of such use, the needs it presents and how best to respond to them within the context of the Scottish prison population (Perkins et al., 2022). This was a cross sectional project, adopting a needs analysis approach aimed at capturing the 2021-22 picture some 15 years after the last time the needs of this group were comprehensively assessed. It was one of four projects examining the health needs of people in Scottish Prisons, all of which adopted mixed methods approaches (Scottish Government, 2022).

The range of data collection methods and sources involved in the alcohol and drug study included: (i) rapid literature review, (ii) interviews and focus groups with professional stakeholders, (iii) interviews with people with lived and living experience, (iv) healthcare data analysis and (v) service mapping. The study was supported by researchers with a range of social care and social work practice backgrounds (including direct lived experience), who also had experience in big data analysis, qualitative interviewing, and participant methodologies.

This study followed the Creswell and Plano Clark (2017) convergent approach to mixed methods research, with each data collection activity occurring simultaneously and feeding into each other to produce a more comprehensive picture. The value of the mixed methods here is that the quantitative data in this context provide a detailed descriptive portrait of drug use and consequences, with the qualitative data offering an enrichment through explanations and understandings of this picture. The report confirmed the current pattern of high levels of synthetic cannabinoid and prescription drug use within Scottish prisons. The mixed methods process of combing the data into a final report analysis arrived at several unusual conclusions. It became clear that from all perspectives prison was not the best place to have or address the needs of those with complex alcohol and drug experiences. Further, the use of drugs in prison was a logical response to the environment in which individuals found themselves. And, finally that the most important

identified need was appropriate housing when released and not related specifically to alcohol and drug use.

Example - The drug-death related bereavement and recovery study

Although drug-related death is a significant societal challenge in many countries (EMCDDA, 2022), which strongly impacts the lives of people who are bereaved, there is a lack of knowledge about the experiences and needs of those left behind. To strengthen understanding of the experiences of people who are bereaved following a drug-related death, a large Norwegian project known as "The Drug-death Related Bereavement and Recovery Study" (The END project) was launched in 2017. The END project was a mixed-method research project consisting of three work packages that combined different data types within an overall framework, i.e., survey, document analysis, focus group interviews, in-depth interviews, and collaborative action research. Questionnaires (n=255) and qualitative individual interviews (n=42) examined the psycho-social functioning of people bereaved by a drug-death, including their experiences of help from professionals and support from social networks. Analyses of policy documents and focus group interviews conducted with 120 professional practitioners explored how they supported people who were bereaved. A collaborative action element involving practitioners, people who were bereaved, educators, and researchers developed research-based knowledge into bereavement care practice

The researchers had different professional backgrounds and different methodological expertise. For example, some had extensive experience in narrative or discursive qualitative approaches, others in action research, others were experienced with statistics and quantitative analyses, and some had experience in mixed methods. Some had specialist expertise in grief and crisis, some in substance use issues and others in family and relational work. In addition, the researchers collaborated with experts by experience who participated in the project.

The qualitative and quantitative methods were combined in different ways in the project. For example, quantitative analysis results informed research questions explored in the qualitative data, and vice versa. PHD candidates published both quantitative and qualitative analyses and combined and discussed them together in the PHD overarching text. The project's final reports presented and combined quantitative, qualitative, and mixed study knowledge contributions. Some knowledge contributions also included quantitative and qualitative sources in the same paper.

An example is from one paper which examined the occurrence and content of stigmatisation of people bereaved by drug-related death. Thematic and descriptive analyses were undertaken on data derived from open-ended and standardised questions from a survey exploring interpersonal communication experienced by participants following their bereavement. Responses suggested that 106 (42%) had experienced negative comments. The 106 respondents who stated that others had made negative comments regarding their loss shared between one and five sentences relating to remarks made by other people, yielding informative qualitative material. Thematic analysis (Braun & Clarke, 2022) was used to examine the written statements, which provided insights into the content of the negative comments received by people who were bereaved by a drug-death (Dyregrov & Selseng, 2022). Using quantitative and qualitative data in the study contributed to more comprehensive knowledge. The quantitative data provided information about the extent of experienced negative comments after their loss, while the qualitative data offered enrichment through explanations and understandings of the thematic content of the negative comments.

<u>Developing measures and interventions</u>

Social work practice often involves delivering psychological, social, or therapeutic interventions. Social workers may therefore need to select an intervention to use or identify a measure that can assess whether an intervention is working. Occasionally, it may even be necessary to develop a new intervention or assessment measure. Either way, any interventions and measures used in practice should be well-designed, evidence-based, and acceptable to the client group for whom they are intended. Combining qualitative methods (which focus on subjective meaning and understanding) and quantitative methods (which prioritise objectivity, standardization, and bias reduction) offers an ideal approach to both intervention and measurement development.

Example - Development of 'SURE': A measure of recovery from drug and alcohol dependence

Over the years, the concept of 'recovery' has become increasingly central in the treatment of alcohol and other drugs. Indeed, services are often now expected to demonstrate that their clients have 'recovered' as an indicator of treatment success. Despite this, there is no universally agreed definition of 'recovery' and the term has often been divisive. To address this, a mixed methods study was undertaken with two main aims: (i) to develop a measure of recovery that had good acceptability and usability for people with experience of substance use problems and (ii) to assess the measure using statistical techniques to make sure that it was valid and reliable.

The work was undertaken in stages by a multi-disciplinary team of qualitative and quantitative researchers, clinicians, and people with lived and living experience of substance use. The latter referred to themselves as 'service users', so this terminology is used in describing their work.

To address aim (i), a series of online consultations (Delphi groups) was undertaken with experienced service providers to ascertain the types of question they thought a recovery measure should include. Focus groups were then conducted with service users to critique what the service providers had suggested. From this, a list of 33 recovery statements was produced. Service users were next interviewed about the statements and their feedback was used to produce an early-version measure. Following this, new service users completed the draft measure, reflecting qualitatively on wording, content, and form. Their feedback was used to generate a second version of the measure and this second version was completed by more service users who commented on the appropriateness and usefulness of the statements, scaling system, and layout. Analyses of all the qualitative feedback produced a 30-question measure.

To address aim (ii), a UK-wide quantitative study was undertaken. Nearly 600 people completed the 30-question recovery measure as well as some additional questions, plus some completed the measure twice. This enabled team members with statistical expertise to run tests to ensure that the measure was robust and would measure recovery consistently across time, people, and situations. Analyses reduced the number of questions to 21 and slightly changed their format.

Service users approved the revisions and named the measure SURE (Substance Use Recovery Evaluator). The 21 questions covered substance use, self-care, relationships material resources, and outlook on life. SURE is now used globally to monitor individuals' progress in recovery and to evaluate outcomes following recovery-focused interventions (Neale et al., 2016).

Example - (b) Co-designing SURE Recovery: a mobile application for people with experience of alcohol and other drug problems

After the SURE measure was published, people with living and lived experience of substance use asked if it would be possible to include the measure in a mobile application (app). Responding to this request, research team members collaborated with an IT company to create an app that would

enable people to track and monitor their own recovery journeys, recognise when they might need help, identify sources of support, and find inspiration from others in recovery. A secondary objective was to generate new data that the research team could use to provide additional insights into substance use and recovery (Bowen et al., 2022).

Again, the team worked collaboratively with people with living and lived experiences throughout all stages of the work. Structured interviews and workshops were conducted with people who used substances to optimise the content, functionality, and appearance of the app. Meanwhile, statisticians advised on quantitative research questions to be included and how these would be handled within the app's content management system. People with living and lived experience of substance use tested prototypes of the app which they named 'SURE Recovery'.

The first version of SURE Recovery was released in 2019 and included: (1) a recovery tracker that allowed people to monitor their recovery, receive personalised feedback, and view their recovery scores on a graph; (2) a sleep tracker that enabled them to monitor their sleep and also produce personalised feedback, a score, and a graph; (3) resources for use in the event of an opioid overdose; (4) reading material, including a book based on the lived experiences of people in recovery; (5) a diary to record thoughts and feelings; and (6) an artwork feature where people could submit images for potential display on the app's home screen. In addition, optional research questions covered demographic, substance use, and treatment-related topics.

Further qualitative research to ascertain end users' views and experiences of using the app (Neale and Bowen, 2022) and quantitative analyses of the data generated by the research questions within the app were undertaken in 2021 and 2022. Findings were then used to refresh the app in 2023.

Evaluation of services

Often social work provision, whole team or service approaches are initiated through pilot or early adopted provision. Such services will then be evaluated to establish efficacy in the models of delivery, partnership working arrangements and outcomes or benefits for recipients.

Example - Family drug and alcohol courts

One of the most common intersections for social work with alcohol and drug use is that of child protection. It often sees children, families and social workers in court. In response to this there has been increasing moves to see such cases heard in more appropriate and family orientated legal environment often referred to as Family Courts. This has occurred across a number of countries around the globe, often evaluated through mixed methods and published in social work facing journals (Harwin et al., 2109; Zhang et al., 2019).

The use of such in England and Wales has been subject to a national pilot evaluation, subsequent ongoing roll out and further evaluations process. As such there have been a repeated number of research projects, which provide a rich and layered example of utilising mixed methods to examine a specific intervention. A good summary and signpost to the myriad pilots and related research projects and studies can be found in Meindl (2022).

The current English evaluation is divided into four projects examining overall effectiveness, parent mentoring, parent-to-parent letters, and post proceedings support. Each of these adopts an element of the quasi-experimental (random control) design and includes the collection of quantitative data about engagement in courts and services, legal and child outcomes, along with qualitative data via interviewing of families and other stakeholders (What Works in Social Care, 2023). An interim report of the current Welsh evaluation highlights some similar early quantitative descriptions of

engagement and outcomes and indicates towards subsequent qualitative interviewing that will be used to complete the mixed methods picture (Meindl, 2022).

Robust evaluations of family drug and alcohol courts is not easy. As Harwin et al. (2019) argue, such courts are a

'...complex and multi-stranded intervention whose impact is felt on children and parents' lives, as well as on courts, children's services, health and criminal justice agencies. Capturing these impacts across the board is a major challenge' (5).

It should be noted that for some social work researchers have questioned the ethics involved in using a randomised controlled trial process like this that require some individuals or families to not receive, or be delayed in getting, a service by means of being allocated to a control group, often without their consent or knowledge (Harwin et al., 2019).

More broadly the use of specialist and adapted, more person-centred and social work orientated court environments have also been used in what are known as Drug Courts, i.e. for individuals whose drug use has led to criminal sanctions and enforced treatment. These have also been subject to some large-scale evaluation, often with the adoption of mixed methods approaches (Logan and Link, 2019).

Policy appraisal

Appraisals of policy or strategies are undertaken with a view to establishing whether or not they have delivered on intended activities or outputs and then in turn whether these have led to changes or identifiable outcomes. By definition, they try to take account of a range of actors, actions, interventions and stakeholders and as such lend themselves to mixed methods approaches which adopt a number of elements or work packages. Typically, these will include reviews of literature and previous evaluations, analysis of a range of existing data and associated reports, alongside combinations of focus groups and interviews to help make sense of the emerging pictures.

Example – Minimum Unit Pricing for Alcohol (Wales and Scotland)

The consequences of alcohol use often present themselves to social workers. Minimum pricing for alcohol has been identified as one of the most effective forms of alcohol policy (World Health Organisation, 2022). It sets a minimum price below which alcohol cannot be sold and thus alters the affordability of alcohol for some. It has now been introduced into three countries on a national level and a range of states within other countries (Livingston et al., 2023). After much detailed modelling to estimate the likely impact of the policy, these recent implementations are now being evaluated to consider policy effectiveness and impact.

Overall policy evaluation takes place within theory driven evaluation approaches such as Contribution analysis. These approaches invariably involve the collection of multiple and usually mixed methods studies. They also use researchers from mixed discipline backgrounds, and this includes social work. The most scrutinised and therefore researched implementation of minimum unit pricing for alcohol has occurred within the context of the adoption of the policy in Scotland, where there have been over 20 different studies (Public Health Scotland, 2023), each focusing on a different element of the potential impact and how it contributes to what is a whole population intervention.

One of the study elements focuses on those individuals drinking at harmful levels (Holmes et al, 2022). This comprehensive mixed methods study adopted a repeated cross-sectional design with

data being collected at different time points prior to and post the implementation of the policy. The study utilised a combination of quantitative and qualitative interviewing within hospital and community settings plus secondary analysis of a large data set. It involved researchers from multiple universities, and a community consultancy. The team had experience as modellers, big data analysts, qualitative researchers, people with lived experience and community members.

The exploration with those drinking at harmful levels added a nuance to headlines reported elsewhere about the introduction of MUP in Scotland reducing sales (consumption) and hospital admissions. For this more specific population the response to MUP was often much more about trying to maintain drinking and manage affordability. This was often done by switching to different alcohol types and extending existing coping mechanisms of borrowing money, going without food, or not paying other bills. The value of the mixed methods approach here was that these lived-experience accounts of coping mechanisms could be understood for different subgroups, which were defined using quantitatively collected data regarding alcohol dependence and other characteristics.

Capturing the views and voices of individuals

It has become increasingly important that social work literature and practice are explicitly inclusive of individual and community perspectives. Social work research can and should be no different. There has consequentially been a demand for an increase in research approaches that forefront the voices of those in need and receipt of provision, including for alcohol and other drug research (Livingston & Perkins, 2018). Much of this capturing of perspectives is done through a range of qualitative orientation considerations, i.e. ethnography, participatory action research, semistructured interviews, biographic narratives, photo elicitation (Drugs and Alcohol Today, 2018; Burns et al., 2021). Critically for this chapter, the qualitative element of any mixed methods design, is often how researchers ensure they have sufficiently captured the diversity of stakeholder voices including those with lived and living experience. This can be researcher-led interviews, focus groups or indepth consultations. However, what is increasingly being articulated and practised, is to have individuals and communities as integral collaborators with all or as much of the research process as possible, including design, data collection, analysis and dissemination, rather than just being data respondents or brief consultees about research approaches. Challenging epistemic injustice, i.e. the bias valuing of one form of knowledge or expertise over another, is an extension of the broader social justice movements that should be inherent to much of social work including research (Beresford, 2020).

Discussion - social work considerations

In addition the inclusion of a diversity of voices and explicitly that of lived and living experience within research, the inherent nature of social work, its unique identity and value base also suggest other factors that might need to be considered in developing mixed methods research and evaluation projects. These might, as is reflected in practice, include having increasing regard for social work experiences of working with different professions. Multi-agency practice is now often the norm, and it requires an understanding of methods/research approaches favoured and understood by those with whom we often work. Mixed methods approaches can allow the incorporation of a range of data and processes incorporating the criminological, economic, medical, psychological, and well as the social orientation. These considerations can extend into developing multi-disciplinary research teams.

Working across professional boundaries, notably criminal justice and health, will also require researchers to be mindful of not only of university or social services' research ethics approval processes but also those of other disciplines and organisations. Much of social work research reflects practice and is with those who are identified as vulnerable. This often leads to additional and detailed ethical considerations of protection and safeguarding. Mixed methods and multiprofessional approaches may have to be accountable to more than one process as a result.

Mixed methods research also lends itself to some of the broader social work research considerations. Notably that social work is often highly contextual, and issues of transferability need to be reflected in how research in one context or within one group can be applied in different circumstances. The potential depth and diversity of mixed methods approaches may help. Social work practitioners are often very busy and without access to academic journal paywalls, so regard should be given to issues of dissemination accessibility and the development of practice guidance. Such consideration should also extend to wider community easy to read and accessible dissemination formats, including the use of films and videos.

In many ways, mixed methods research can and should lend itself to many of the agendas for modern social work. The practice of mixed methods research is also often about the richness of working in teams and partnerships, working through the complexities of collaboration, clarifying diverse contributions, applying different approaches, and accounting for multiple ethical and value considerations before arriving at enhanced understanding.

- -Thinking about your own area of practice or research how would an understanding of it be enhanced by the use of mixed methods?
- -What combination of which data collection methods would you choose, and why?

References

Beresford, P. (2020) PPI Or User Involvement: Taking stock from a service user perspective in the twenty first century. *Research Involvement and Engagement* 6 (36). https://doi.org/10.1186/s40900-020-00211-8

Bowen, A., Getty, M., Hogan, C., Lennon, P., Long, E., Strang, J., and Neale, J. (2022) 'Building on collaborative research to co-design SURE Recovery, a mobile application for people with experience of alcohol and other drug problems'. In Tucker, J. and Witkiewitz, K. (eds) *Pathways to recovery from alcohol use disorder*. Cambridge: Cambridge University Press.

Braun, V., and Clarke, V. (2022). *Thematic analysis: a reflexive approach*. The University of Auckland. Available at: https://www.thematicanalysis.net/understanding-ta/

Burns, D.; Howard, J and Ospina, S. M. (2021) *The SAGE Handbook of Participatory Research and Inquiry*. Sage

Chaumba, J. (2013) The use and value of mixed methods research in social work. *Advances in Social Work*. 14(2): 307-333.

Creswell, J.W and Garrett, A. L. (2008) The 'movement' of mixed methods research and the role of educators. *South African Journal of Education* 28 321:333.

Creswell, J. W and Plano Clark, V.L. (2017) *Designing and conducting mixed methods research* (3rd Edition) London, Sage.

Doyle L, Brady A-M, Byrne G. An overview of mixed methods research. *Journal of Research in Nursing*. 2009;14(2):175-185.

Drugs and Alcohol Today (2018) Special Edition – Coproduction in Substance Use Research 18(1).

Dyregrov, K., & Selseng, L. B. (2022). "Nothing to mourn, He was just a drug addict"-stigma towards people bereaved by drug-related death. *Addiction research & theory*, 30(1), 5-15.

European Monitoring Centre for Drugs and Drug Addiction (EMCDDA, 2022) *European Drug Report 2022: Trends and Developments*. EMCDDA.

https://www.emcdda.europa.eu/publications/edr/trends-developments/2022_en

Galvani, S. Livingston, W. Morgan, H and Wadd, S. (2014) Alcohol, other drugs and sight loss: a Scoping study https://www.drugsandalcohol.ie/26967/1/ARUK-report-0118-Alcohol other drugs and sight loss.pdf

Galvani, S. Livingston, W. Morgan, H and Wadd, S. (2016) The relationship between sight loss and substance use: users' perspectives *Drugs: Education, Prevention and& Policy*. 23(6) 476-483.

Harwin, J., Broadhurst, K., Cooper, C. and Taplin, S. (2019). Tensions and contradictions in family court innovation with high risk parents: The place of family drug treatment courts in contemporary family justice. *International Journal of Drug Policy*, 68: 101-108.

Holmes, J.; Buykx, P.; Perkins, A.; Hughes, J.; Livingston, W; Boyd, J.; Johnston, A.; McCarthy, T.; McLean, A.; Wright, A.; Little, S.; Gardiner, K.; Peddle, L.; Yannoulis, Y.; Stevely, A.; Mackay, D.; Hernández Alava, M.; Brennan, A.; Meier, P.; Sasso1, A. and Angus, C. (2022) *Evaluating the impact of Minimum Unit Pricing in Scotland on people who are drinking at harmful levels*. Edinburgh: Public Health Scotland https://www.publichealthscotland.scot/publications/evaluating-the-impact-of-minimum-unit-pricing-in-scotland-on-people-who-are-drinking-at-harmful-levels/

Journal of Mixed Methods Research (2023) *Definition*. https://journals.sagepub.com/description/MMR

Livingston, W.; Madoc-Jones, I.; Holloway, K; Perkins, A.; Buhociu, M and Murray (2023) *24-month Review of the Introduction of Minimum Pricing for Alcohol in Wales*, Cardiff, Welsh Government.

Livingston, W and Perkins, A. (2018) Participatory Action Research (PAR) Research – Critical methodological considerations. *Drugs and Alcohol Today* 18(1):61-71

Livingston, W., Perkins, A., McCarthy, T., Madoc-Jones, I., Wighton, S., Wilson, F. & Nicholas, D. (2018). *Review of Working Together to Reduce Harm: Final Report* Cardiff: Welsh Government GSR report number 21/2018 (Project Ref - C93/2016/2017).

Logan, M. W and Link, N.W. (2019) Taking Stock of Drug Courts: Do They Work?, *Victims and Offenders*, 14(3): 283-298.

Meindl, M.; Hosch, M and Westlake, D. (2022) An evaluation of the Family Drug and Alcohol Court in Wales pilot: Interim Report. Cardiff, Cascade, Cardiff University https://cascadewales.org/wp-content/uploads/sites/3/2022/11/An-evaluation-of-the-Family-Drug-and-Alcohol-Court-in-Wales-pilot-interim-report-1-1.pdf.

Neale, J., Vitoratou, S., Finch, E., Lennon, P., Mitcheson, L., Panebianco, D., Rose, D., Strang, J., Wykes, T., Marsden, J., (2016) 'Development and validation of 'SURE': A patient reported outcome measure (PROM) for recovery from drug and alcohol dependence', *Drug and Alcohol Dependence*.

http://authors.elsevier.com/sd/article/S0376871616301521

Neale, J. and Bowen, A. (2022) 'Lessons for uptake and engagement of a smartphone application (APP) for people in recovery from alcohol and other drug problems: A qualitative study', *JMIR Human Factors* 8, 9, e33038. doi: 10.2196/33038.

Perkins, A.; Livingston, W.; Cairns, B.; Dumbrell1, J.; Gardiner, K.; Little, S and Madoc-Jones, I. (2022). Understanding Substance Use and the Wider Support Needs of Scotland's Prison Population. Edinburgh, Scottish Government. https://www.gov.scot/publications/understanding-substance-use-wider-support-needs-scotlands-prison-population/

Public Health Scotland. (2023) *Evaluating the impact of minimum unit pricing for alcohol in Scotland: Final report A synthesis of the evidence*. Edinburgh. Public Health Scotland.

Scottish Government (2022) Understanding the Health Needs of Scotland's Prison Population: A synthesis report. Edinburgh, Scottish Government.

Thom, G (2012) Evaluation of the Integrated Family Support Service First Interim report. Cardiff, Welsh Government https://www.gov.wales/sites/default/files/statistics-and-research/2019-07/120914integratedfamilyen.pdf

Thom, G.; Delahunty, L.; Harvey, P and Ardill, J. (2014) *Evaluation of the Integrated Family Support Service -Year 3 Summary Report*. Cardiff, Welsh Government.

https://www.gov.wales/sites/default/files/statistics-and-research/2019-07/140328-evaluation-integrated-family-support-service-year-3-summary-en.pdf

Toomey, C., Fotopoulou, M. and Armstrong, S. (2022). *Mapping Drug Use, Interventions and Treatment Needs in Scottish Prisons: A Literature Review*. Scottish Centre for Crime and Justice Research. https://www.sccjr.ac.uk/publication/mapping-drug-use-interventions-and-treatment-needs-in-scottish-prisons-a-literature-review/

World Health Organisation (2022) No place for cheap alcohol. The potential value of minimum pricing for protecting lives. https://www.who.int/europe/publications/i/item/9789289058094

What Works for Social Care (2023) Family Drug and Alcohol Courts (FDAC) https://whatworks-csc.org.uk/?s=family+drug+and+alcohol+courts

Zhang, S.; Huang, H.; Wu, Q.; Li, Y and Liu, M. (2019) The impacts of family treatment drug court on child welfare core outcomes: A meta-analysis. *Child Abuse and Neglect* 88, 1-14.