

Is there a valid distinction between evidence-based practice and practice-based evidence?

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Two kinds of pursuit of evidence

Evidence-based practice is apparently defined as the pursuit of clinical practice in accord with a body of independently tested knowledge. In practice, this has come to mean the application of techniques, or procedures, in accordance with evidence of outcome. The highest standard of judgement is an RCT, whose structure has in no way been shown to reflect everyday clinical practice. In fact, the application of the statistical methodology is unreliable in every published case, because the requirements of safe generalisation from sample to population have been violated in or more ways [most often, the selection of samples [size, drop-out] has been too restrictive to support the assumption of randomness.

These problems have resulted in an attractive inversion of the phrase and an adoption of a different form of research; *practice-based* evidence. In this approach the most appropriate, available methodology is applied to almost any interesting question arising in clinical practice. Outcomes are measured in rather different ways, however.

Are these two forms of inquiry sufficiently robust and logically independent for the distinction conferred upon them to be valid? Or do the elegant phrases used to refer to them disguise an old and discarded distinction; one that has been discarded because it was shown to lack intellectual value. Specifically, does evidence-based practice parallel a notion of pure research whilst practice-based evidence parallels a notion of applied research? These distinctions are outlined in the next section.

Pure and applied research; a ancient debate

In the 1970s there were extended debates in academic departments about the validity of a distinction between pure and applied research. Was pure research best described as the pursuit of theoretical development by any means best suited to the question in an academic setting where utility was unimportant? And was applied research characterised by empirical study of a question which had practical utility for a group or an activity, situated in a setting where research results would be applicable? The often implicit assumption was that pure research was driven by theoretical questions, whilst applied research was driven by specific, empirical and theory-

free questions. It was certainly noticeable that applied research provided examples of methodological ingenuity, but rarely any interesting theory that contributed to psychology generally.

Finally, and almost certainly related to the fact that the major molar theories in academic psychology were dissolving, this distinction between pure and applied was discarded in favour of a recognition that research questions were largely characterised by the ability to formulate empirical approaches to answering them. Hypotheses were interesting both to the extent that they could be pursued and to the extent that they were defined as interesting by local circumstance; this could be a theoretical reason or a practical issue.

Conclusion

Current debates are based on the desire to enhance the value placed on *practice-based* evidence by researchers generally and by specific bodies representing the structuring of power in the clinical field. The power wielded by NICE depends on claiming a special place for evidence-based practice as somehow more pure [grade A evidence]. *Practice-based* evidence is considered an interesting applied field of low importance to the big question[s]. In fact, the only real distinction is that many clinical procedures inside and outside psychology and psychiatry are historically under-researched and this fact needed to be addressed urgently. If one wants to know the answers to questions of effectiveness and efficiency then the best available methods have to be employed in multiple studies from many centres. The best method depends on the question and cannot be given *a priori*. There is no intellectually valid distinction between the two forms of evidence and the usurping of power depends on ignoring, or blurring, this fact of scientific procedure.

As a profession we have been pusillanimous in surrendering power by following a spurious distinction.