



Building Research Capacity in Social Care

Critical reflections from the NIHR Applied Research Collaboration (ARC) social care capacity building programme (2024-26)

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Context and purpose

Social care research needs dedicated, sector-specific approaches to building research skills, capability, and infrastructure.

The programme aimed to strengthen research capacity across social care by:

- Improving how evidence is generated, shared, and used in policy and practice
- Supporting sustainable, research-engaged cultures across the workforce
- Creating roles and pathways that connect practice and research (e.g., Researchers in Residence)
- Offering flexible individual awards plus mentoring, training, and peer learning

Research design

Study activities

1) Programme mapping

- National activities mapped from ARC KSS documentation
- Regional adaptations captured via MS Forms

2) Online survey

3) Semi-structured interviews (n=16)

- Oct to Dec 2025 (29–66 mins)
- 10 of 15 ARCs; diverse roles & settings

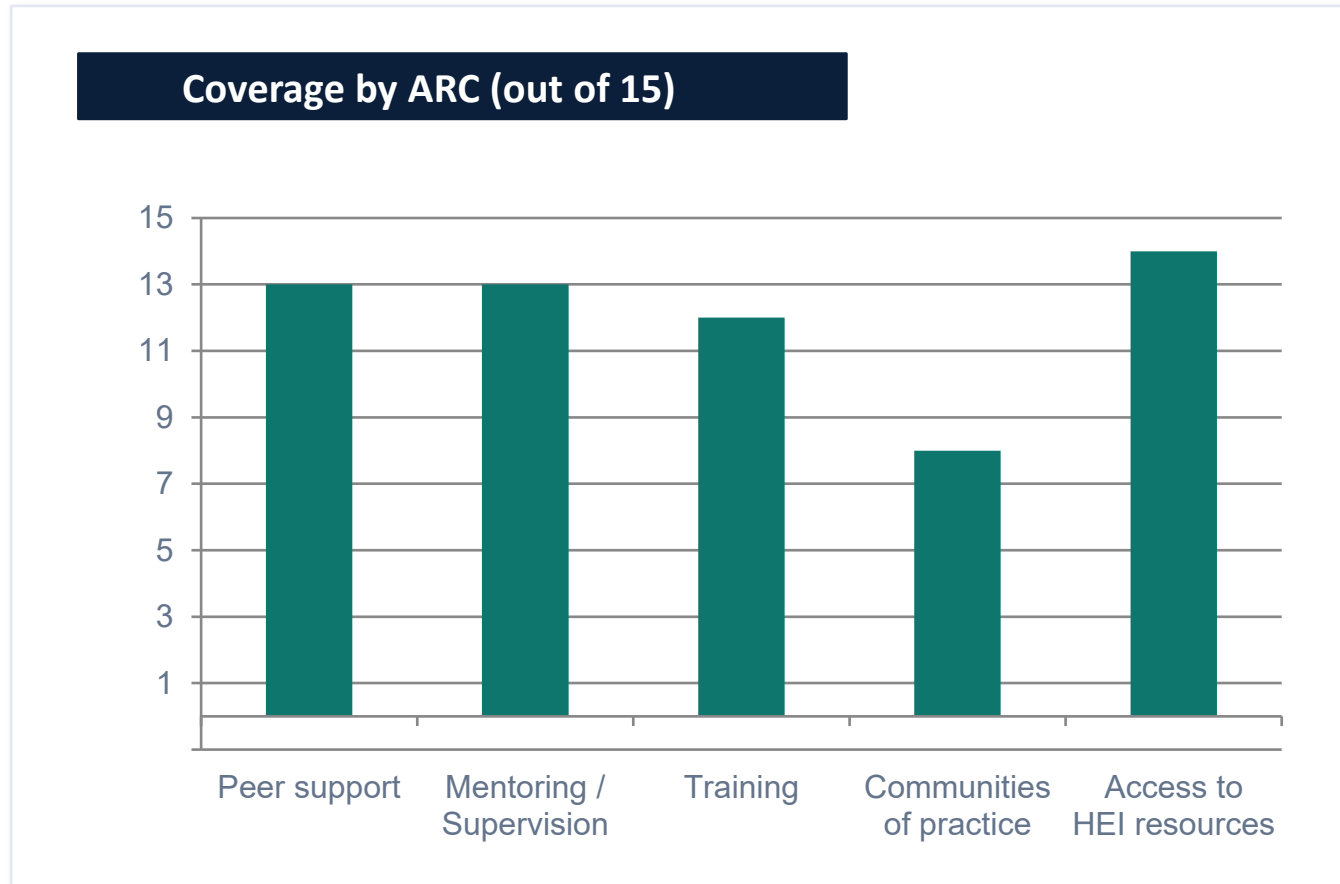
4) Triangulation

- Sense-checking with ARC award holders and leads
- 4 March 2026 (in-person) and 19 March 2026 (virtual)

Interpretive lenses

- Cooke's Research Capacity Building Framework
- Consolidated Framework for Implementation Research (CFIR)
- Kirkpatrick's training evaluation model

Programme Mapping: What was delivered regionally?



- 103 award holders overall

- Mentoring / supervision:

- 72 had supervisors

- 74 had mentors

**Some had a combined supervisor/mentor*

- Communities of practice: attended by ~60 award holders

- Formal courses: 86 award holders

- HEI library/e-resources: 99 of 103 (Offered by all but one ARC)

Programme Mapping: What was delivered nationally?

Key nationally coordinated activities included:

- Induction & early goal setting
- Capacity Building Community Forum (bi-monthly)
- Governance & Ethics Interest Group (bi-monthly)
- ARC leads coordination meetings
- Annual national gatherings

Selected delivery metrics

- Cohort size: 67
- Inducted: 55 (Jul 2024–Dec 2025)

- Ethics and governance group:
11 participants expressed interest

- 10 online events on relevant topics (e.g., researchers in residence)
- 53 award holders attended at least one event. (Each attended by approx. 15-20.)

- March 2025 event: 48 attendees
- March 2026 event: 50 attendees

Respondent Characteristics (n=11)

- 91% female
- 73% White British

- 2 social care practitioners
- 8 academic researchers
- 1 dual practitioner/researcher

- 81% individual award holders
- 54% supporting capacity building

% satisfied or very satisfied with the national programme? (n=11)

– Handbook:	73%
– Induction:	91%
– Online meetings:	91%
– Event:*	100%

*Not applicable to all respondents (n=9)

Self-reported change from pre to post award (n=11)

At pre-award...

- I have **knowledge** to develop as a researcher (64% agreed)
- I have **skills** to develop as a researcher (64% agreed)
- I can see how research can **contribute** to my role (45% agreed)
- I use research to **inform thinking** around decisions (64%) * and in **varied forms** for **decision making** (55%) *

At post-award, either 10 of 11 or all (*) responses were neutral or agreed

Changing Attitudes and Preconceptions

Pre award all (n=3) social care practitioners agreed with the statement: “Researchers work in an **ivory tower**, isolated from practice”. At post award, none agreed with this statement.

1) Mechanisms of change: Development of applied research skills

What participants developed

- Hands-on skills in evidence appraisal, question formulation, methods selection, and managing realistic timelines.
- Practical capability in literature searching, rapid reviews, audio recording, coding, and basic research software.
- Confidence grew through doing research in real social care settings rather than only through formal teaching.

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It's been practical, day-to-day learning, not just hearing about research, but actually learning how to do it in a way that fits my role.

Illustrative participant voice (paraphrased)

Key message: Time-limited programmes can build practical research skills, but applying them depends on support beyond the programme.

1) Mechanisms of change: Growing confidence to engage in research

Why confidence mattered

Many began by feeling uncertain about whether they belonged in research, especially alongside academics.

Confidence meant more than technical skill: it involved feeling entitled to ask questions, contribute ideas, and speak up.

This shift was particularly important where research had previously felt distant from frontline social care work.

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At first I felt research belonged to other people, but over time I started to see that my practice experience gave me something valid to contribute.

Illustrative participant voice (paraphrased)

Key message: Early gains were mainly cultural: increased confidence, interest in research, and a stronger sense that research is 'for us'.

1) Mechanisms of change: Learning through reflection and adaptation

How learning happened in context

Plans often had to change in response to staff shortages, shifting priorities, and operational pressures.

Reflection and iteration helped participants adapt methods, rescope activity, and learn from what did not work.

Success was often redefined in realistic, context-sensitive terms rather than against an ideal original plan.

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A lot of the learning came from having to rethink things as we went along and work out what was actually possible in that context.

Illustrative participant voice (paraphrased)

Key message: Progress was rarely linear; participants learned by adapting to workload, organisational change, and governance demands.

1) Mechanisms of change: Connection, support and shared learning

What supportive networks enabled

Peer contact reduced isolation, especially for people in lone or newly created research roles.

Participants also learned how to build networks, ask for help, and use relationships to solve problems and move work forward.

Support was emotional as well as practical, helping people stay engaged with research in demanding settings.

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Knowing there were other people figuring out similar challenges made a huge difference — it made the work feel possible and less isolating.

Illustrative participant voice (paraphrased)

Key message: Mentoring, peer support, and safe spaces for learning helped participants stay engaged despite uncertainty and competing pressures.

2) Enabling conditions and constraints: Learning close to practice

Why proximity to practice mattered

Keeping research close to day-to-day service realities helped maintain credibility and trusted relationships with colleagues.

Embedded roles made it easier to identify relevant problems that practitioners could see but lacked time or capacity to investigate.

Participants increasingly described research as part of everyday enquiry rather than as a separate specialist activity.

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Because the work stayed close to practice, the questions felt real and people could see why the research mattered.

Illustrative participant voice (paraphrased)

Key message: Keeping research close to practice made it more relevant, credible, and accessible for people outside traditional academic routes.

2) Enabling conditions and constraints: Organisational pressures

Financial constraints, staff shortages, restructures, and changing priorities made it hard to prioritise research.

Research activity was often squeezed out by immediate operational demands and statutory pressures.

Making space for research required active negotiation rather than simply goodwill.

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When the service is under constant pressure, research is one of the first things to get pushed aside unless space is protected.

Illustrative participant voice (paraphrased)

Key message: Whether early gains translated into ongoing research activity depended heavily on local conditions such as time, role clarity, and priorities.

2) Enabling conditions and constraints: Leadership support

How leadership affected progress

Managerial encouragement and visible senior interest helped participants justify time for research and explain its value.

Embedding research within substantive roles reduced tensions between research and delivery when protected time was respected.

This support was fragile: leadership changes or shifting expectations could quickly undermine momentum.

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When leaders showed they valued the work, it became much easier to defend the time and keep research on the agenda.

Illustrative participant voice (paraphrased)

Key message: Leadership support and protected time were pivotal, but these enabling conditions could be fragile when priorities or key support infrastructures changed.

2) Enabling conditions and constraints: Ethics and governance

Approval routes were usually identifiable, but applications and permissions were often slow, unclear, and difficult to sustain.

Delays affected momentum, confidence, and project timelines, especially when research had to fit around demanding roles.

Shared discussion helped participants recognise these challenges as structural.

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Ethics and governance taught me a lot, but it also slowed everything down and sometimes made the work feel harder to sustain.

Illustrative participant voice (paraphrased)

Key message: Governance processes were a major structural constraint; shared discussion helped participants see these barriers as systemic, not personal.

2) Enabling conditions and constraints: Regional and national infrastructure

Regional and national spaces supported confidence, coherence, and a sense of belonging across the programme.

Mentoring and supervision sustained momentum by offering technical, reflective, and emotional support.

Shared spaces for checking in and comparing approaches helped participants navigate uncertainty and consider next steps.

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Those regional and national connections gave me somewhere to test ideas, ask questions, and feel part of a wider research community.

Illustrative participant voice (paraphrased)

Key message: Regional and national networks sustained confidence and momentum, but continued support from the wider system remained essential.

2) Enabling conditions and constraints: Inclusive national programme design

Design features that supported participation

Mixed cohorts brought together people from varied professional and disciplinary backgrounds.

Informal learning spaces reduced perceived barriers and made it easier to participate across health, care, and academic settings.

Cross-disciplinary interaction broadened perspectives and strengthened belonging.

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Because the programme brought different kinds of people together, it felt more open and less like research belonged to only one group.

Illustrative participant voice (paraphrased)

Key message: A flexible, social-care-led design widened participation, but future programmes also need stronger links to wider research and funding systems.

3) Outcomes: Short-term effects

Increased visibility, use, and sharing of research

Participants described early changes in how often research was discussed in routine meetings and day-to-day work.

Learning was being shared beyond immediate teams through informal dissemination and wider conversations.

The main effect was not immediate service transformation, but greater confidence, curiosity, and openness to evidence.

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Research started to come up more naturally in conversations — not as something separate, but as part of how we think about practice.

Illustrative participant voice (paraphrased)

Key message: Short-term effects were meaningful: greater visibility of research, more sharing, and growing curiosity about evidence use.

3) Outcomes: Intermediate effects

Growing interest and early organisational ripple effects

Participants saw early signs of stronger organisational interest in research and more openness to practice-based inquiry.

Colleagues and managers appeared more willing to discuss research pathways, partnerships, and opportunities.

These shifts were uneven and still emerging, but suggested growing confidence and momentum.

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It feels as though people are starting to see research as something we can build into the organisation, not just an individual interest.

Illustrative participant voice (paraphrased)

Key message: Early organisational ripple effects were encouraging but uneven and depended on sustained support from organisations and partners.

3) Outcomes: Long-term effects

Sustaining capacity and momentum

Capacity building worked through practical learning, growing confidence, and supportive relationships.

What participants could do with that learning depended on protected time and leadership support.

Early effects were modest but meaningful; sustaining momentum requires continued infrastructure and pathways.

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The biggest change is that I can now imagine research remaining part of my role in the long term, rather than ending with this programme.

Illustrative participant voice (paraphrased)

Key message: Long-term capacity depends on continuity: clearer pathways, ongoing networks, and shared investment after dedicated funding ends.

Implications for future RCB in social care

- Time-limited programmes can successfully build confidence, skills, and connections in social care research, but insufficient on their own to sustain research activity, longer-term
- Impacts are primarily cultural vs. structural (e.g., increased visibility of research)
- The programme offered scaffolding and support for individuals navigating unpredictable, non-linear trajectories, especially in creating accessible pathways for a cohort with diverse educational backgrounds
- Mentoring, peer support and safe spaces for learning/sharing are crucial.
 - How to recognise, value and promote mentoring and support roles, including knowledge, skills and capabilities needed?

What are your thoughts and reflections on what we have shared?

Thank you for your support and valuable contributions!



Any comments or questions?

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