Social Work Assessment and Intervention

Social Work Assessment and Intervention:

Working with Diverse Populations

Edited by

Selwyn Stanley, PhD

Cambridge Scholars Publishing

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I would like to acknowledge the immense contribution that social workers worldwide make to the lives of people in a range of distressing circumstances. You serve as a ray of hope and inspiration for countless individuals grappling with life's challenges. Your tireless effort and commitment often go unrecognised, and you trudge on despite having to operate in not-so-ideal circumstances of employment. Hats off to the yeoman service you render and for putting a smile on the faces of the people you serve.

Selwyn Stanley
(Editor)

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ENDORSEMENTS

"Social work professionals encounter a wide range of community and client problems across their work, some predictable and some unknown. This book is an important addition to any social worker's library, for it brings immediate and needed overviews of keen topics that cut across issues encountered – child abuse and trauma, intersectionality, refugees, substance use/abuse, and many other client populations. Thus, providing insightful professional perspectives and issues in practice and insights into some of the best social work practice approaches. Knowing more about some of the most vulnerable groups in our communities may help to address intolerance, social discrimination, and stigma, while improving client outcomes. This book provides this type of insight and real-world applicable knowledge; it's a must-read."

Cynthia Hovland, PhD
Associate Professor & MSW Program Director, School of Social Work,
Cleveland State University, USA

"In the ever-changing world of social work, the need to deliver sound assessment and intervention remains constant. Selwyn Stanley has drawn together an overview of effective approaches in a diverse range of areas, including sexual abuse, adults with learning disabilities, bereavement, HIV and intersectionality – to name a few. It is impossible to cover every population and field of work, but this book aims to shine a spotlight on particular areas frequently dealt with in practice. Social work students and practitioners should find this book extremely valuable in guiding their work and developing their skills."

Polly Sykes
Senior Lecturer & Head of Social Work, University of York, UK

"The practice of contemporary social work is increasingly complex. Social workers and other helping professionals face practice issues complicated by intersecting identities of race/ethnicity, poverty, disability, trauma, and chronic health conditions. The book, "Social Work Assessment &

Intervention*: Working with Diverse Populations*", offers both new and experienced professionals a handbook of current research, theory, international perspectives, and evidence-based practices to guide their work. This book serves as an excellent assigned text in pre-service education or as a resource for social workers in the field. I offer my fullest endorsement."

Charles Edmund Degeneffe, PhD
Professor and Chair of the Department of Administration, Rehabilitation, and Postsecondary Education, San Diego State University, USA

"As the title suggests, this book covers a diverse range of considerations for working within a diverse society in social work in the modern world. It provides consideration for different age groups, from children to the elderly. It also touches on complex contemporary topics that should be embraced in social work interventions and assessments, such as intersectionality, gender equality and disability inclusion. Its diverse content coverage contributes to the social work profession as a good read for social workers, academics, researchers and students from different settings, working with different client groups."

Dr Noreth Muller-Kluits
Lecturer/Researcher in the Department of Social Work, Stellenbosch University, South Africa

"This is an interesting, valuable, and up-to-date resource that looks at specific interventions with disadvantaged groups in detail and takes an international perspective. It is successful in considering both individual experiences and wider social issues that may affect them. In achieving that, there is a particular emphasis on marginalised groups, for example, persons with learning disabilities, children who have been sexually abused, refugees and people with AIDS. Each chapter has been put together by experts on the topics that they have written about. Any social work practitioner or teacher will find much that is thought-provoking in this book."

Simon Ward
Department of Mental Health, Social Work and Counselling at Liverpool John Moores University, UK.

ACKNOWLEDGEMENTS

It has been a mammoth task to pull this book together, given the range of contributors dispersed across several countries. My heartfelt gratitude to each and every author for their commitment to this book project and for giving it their best shot to ensure that the contents within are informative and evidence-based and help students and practitioners grasp the nuances of working with a diverse range of populations needing social work intervention. Without your effort and hard work, this book would certainly not have seen the light of day, and I wish to record my appreciation for your valuable contribution.

Many thanks to Prof. Donald Forrester for penning the foreword. Your writing embodies the crux of what social work is, its spirit and philosophy, and aligns so well with the contents of this book. A special thanks to colleagues from the social work fraternity: Dr Cynthia Hovland, Dr Charles Degeneffe, Dr Noreth Muller-Kluits and Simon Ward, who have endorsed this book and have found it to be timely and relevant. I thank you all for your kind words of support and encouragement.

I am grateful to the team at Cambridge Scholars Publishing for their behind-the-scenes work and for bringing this volume to its publication readiness.

And finally, a word of thanks to my wife, Sheeba, and daughter, Roshni, for their unbridled encouragement, for motivating me to plod on, for freeing me from domestic responsibilities (what a perfect excuse!), and above all, for staying out of my hair!

Selwyn Stanley

FOREWORD

The refreshing focus of this entertaining and informative collection of essays about social work is the sheer diversity of practice. The chapters illustrate some of the range of contexts in which social work has a role to play, with contrasts in the issues worked with, the societal understanding of them, and the nature of the social work contribution evident in each chapter. Look more deeply, and a rich and contrasting variety of approaches to the social work task itself can be found. The same can be seen in relation to understandings of research and evidence, with contributions ranging from those based on practice experience to others that offer considered reviews of the evidence. A particular feature of the book is the rich mixture of backgrounds of the authors. Some are current practitioners, while others are academics, and they hail from countries with very different economic and cultural contexts.

This sense of multiplicity is not, as they say, a bug; it is a feature of the book. It is all part of the intention of the editor, Dr Selwyn Stanley. At the simplest level, there is something here for everyone. It feels as if whatever issue you might be interested in, there is a chapter that has that as its focus. While this may not be literally true—social work covers so many different issues that no single book could possibly capture them all—the diversity that the book encompasses means there will be chapters of relevance for any problem or issue that you might encounter as a social worker or as an academic interested in social work.

Yet the true worth of the book is not that you can find one chapter of relevance. In pulling together practitioners and academics, those from richer and less prosperous countries, Dr Stanley has created a collection of parts that is greater than its sum, for it is in the implicit comparisons and contrasts that the real power of the collection emerges. It is in the unexpected contrasts and the surprising similarities that a picture begins to emerge of a broader social work—a social work that is global and yet focused on making a difference for individuals; a social work that engages with an extraordinary range of issues but that retains a common core of values, skills, and perspectives.

Many of the chapters focus on respectful ways of engaging and working with people in difficult circumstances. Most take a critical stance toward conventional perspectives on specific social problems or issues. All are interested in protecting human rights and, where possible, helping

people. Overall, a sense of compassion and wisdom combined with a reluctance to accept simplistic answers to complicated questions shines through and, perhaps more than anything, a sense of a profession that seeks to embrace the complexity of the social world while finding real and tangible ways to make a positive difference. These seem to me key hallmarks of social work, and it is refreshing to see them demonstrated through a collection of such vivid variety.

Ultimately, therefore, this book is more than a collection—it is, for me, a celebration of social work and social workers and an exploration of what social work is and what it can be. In producing such a collection, Dr Stanley has done a wonderful job of celebrating the diversity and contribution of the social work profession, providing us with insights into specific issues and a broader sense of a lively, vivid, and vital global profession.

Donald Forrester, PhD
Professor of Child and Family Social Work, Cardiff University
Director, CASCADE Centre for Children's Social Care

FROM THE EDITOR'S DESK

> At this very moment, there are individuals only you can reach and differences only you can make in their lives.
>
> - **Mike Dooley** (*New York Times* best-selling author).

Social work as a profession involves working with diverse populations, particularly those who are in distressing circumstances. The reference here could be to children experiencing neglect and abuse, people who encounter domestic violence, or older people living in isolation. Many others face issues relating to family breakdown, mental health, or substance misuse, frequently encountered by social workers in practice. These populations are often those considered vulnerable, marginalised, and disadvantaged. Dealing with these service user groups requires proficient use of a range of skills, techniques, and strategies of assessment and intervention to alleviate their distress, enhance coping, and generally promote well-being and functioning. This book is envisaged as a one-stop text that will provide a ready reference to understand issues in practice while working with different service user groups. Its USP is that it is a compilation based on professional perspectives that brings together theoretical frameworks, identifies issues in practice, and gives the reader an inkling of what works best with people faced with a range of psychosocial problems. It thus adopts an evidence-based approach that is rooted in practice experience, besides drawing from current research and the extant literature. It outlines strategies of micro-intervention aimed at individuals, families, and small groups that could enhance psychosocial functioning and well-being. Reference to current policies and legislation will enable an understanding of macro-intervention strategies that seek to deal with various issues faced by the social groups in focus. The effort throughout is to provide an easy-to-read yet comprehensive overview of the problems and people being addressed.

The 'populations' dealt with in this book are not the *only* groups considered to be disadvantaged or marginalised. There are many others. For example, the Gipsy communities in Europe, the Aboriginals in Australia, or the tribal communities in India. However, the ones that this text deals with are people encountered commonly in practice in a wide

array of professional settings. They are considered vulnerable owing to the uniqueness of the circumstances that they find themselves in and tend to be alienated from the social mainstream. They are those whose social experiences are often laced with stigma, intolerance, prejudice, and social discrimination. These are people who find themselves in a position of disadvantage, those whose human rights are often denied or undermined. They thus become some of the 'natural' target groups that merit social work intervention and those with whom social workers work in a wide array of practice settings, perhaps universally.

Each of these chapters seeks to briefly locate the issue faced by the group under discussion in its wider socio-political and demographic context. Attention will be paid to theoretical frameworks that provide a basis for assessment and the various intervention strategies used in practice. Practice anecdotes will enable practitioners to provide an illustrative account of the issues encountered in the real world. Each chapter will provide both a general commentary on the issue being addressed and, at the same time, a multifaceted analytical understanding of how best to deal with its manifestation and consequences for the person experiencing the problem. The book would thus be a work of reference on individual topics that readers can access on a self-contained basis. The overarching aim is to provide a comprehensive text that brings to the forefront an understanding of how best to engage with and address significant issues that these social groups face in contemporary society.

Chapter 1 provides an overview of some key themes of relevance to contemporary social work practice. In this chapter, the editor Selwyn Stanley looks at some key definitions of social work and highlights some vital elements of relationship-based practice and the value base that underpins good practice. The strengths-based approach is discussed, as well as the general phases that characterise the social work process. The chapter ends with a discussion around cultural diversity and cultural competence, a theme of relevance in societies today.

Chapter 2 deals with working with risk and uncertainty with vulnerable children. In this chapter, Ciarán Murphy considers at length the importance of identifying and assessing risk and strategies to protect and mitigate against factors deemed to put children at risk. The author also highlights the importance of taking 'defensible' rather than 'defensive decision-making' in the context of working with vulnerable children and promoting 'child-centred practice'.

Chapter 3 focuses on working with children who have experienced sexual abuse and violence. The authors, Delphine Collin-Vézina and Rosée Bruneau-Bhérer, deal with this sensitive issue by outlining

traumatic experiences in childhood that predispose children to various mental and behavioural issues. The authors also dwell upon ethical issues in this context and present two empirically validated models: Trauma-Focused Cognitive Behavioural Therapy (TF-CBT) and Attachment, Self-Regulation and Competency (ARC).

Chapter 4 deals with social work practice with young offenders. In this chapter, Nadine Campbell-Fuller and Danielle Ennis look at the role of social workers in working with young people who offend and consider the values, ethics, and regulations that govern the profession. Issues relating to gender, ethnicity and age are considered, and relevant psychological and sociological perspectives have been outlined. Prevention of re-offending and early interventions and multi-agency initiatives have been explored to mainstream young offenders into society.

In Chapter 5, Naomie Farber and Erin Flaxman address the issue of adolescent pregnancy and review major trends in adolescent fertility and outline a continuum of risk among youth, particularly those belonging to disadvantaged backgrounds. Implications for practice have been explored, and the authors emphasise the importance of age-appropriate educational psychosocial programmes to equip young people to make choices that enhance healthy behaviour and focus on providing preventive and interventive services for young people.

Chapter 6 visits assessments and interventions for people grappling with intimate partner violence, an issue much aggravated during the COVID pandemic the world over. The authors Helen Holmes, Lucy Titheridge and Alaina Sandford discuss the need and importance of providing safety for children and older adults who are often caught up in the violence. Assessment issues have been elaborated, and strategies for intervention have been detailed in the chapter.

Chapter 7 has been penned by Florence Shalini and Arunkumar and deals with the assessment and management of psychosocial issues encountered by older people. Evidence-based interventions by social workers that facilitate access to services, provide psychosocial support, and promote independence for the elderly, besides the importance of multi-agency collaboration, are some of the issues outlined in this chapter. The crucial role played by social workers in advocating for elderly rights, ensuring access to essential resources, and fostering intergenerational relationships to reduce isolation are the other themes that the authors dwell upon in this chapter.

In Chapter 8, Katie Walker provides a clear discussion about what learning disabilities really are before dwelling on the challenges of caring for people with such disabilities. The author dwells on key aspects relating

to the formulation of the assessment of mental capacity. The importance of involving the family and carers in the assessment process has been stressed in the chapter. Aspects dealing with intervention strategies have been detailed, as well as a comprehensive exploration of relevant policies and legislation that guide practice with people having learning disabilities.

Chapter 9 is authored by Prince Annadurai, Nellaiappar, Johannes Samuel, and Misha Anjali. It explores the vital and often underappreciated role of social workers in the care of burn survivors. The authors examine the intricate challenges faced by burn patients, spanning psychosocial, cultural, and gender-specific dimensions. The chapter provides a deep dive into how social workers assess trauma, family dynamics, and social support systems, offering holistic interventions tailored to individual needs. Readers will discover dimensions of trauma-informed care, the resolution of medico-legal challenges, and strategies for promoting community reintegration and economic independence. This chapter offers a thought-provoking perspective on promoting resilience and long-term recovery for burn survivors.

Chapter 10, written by Ramesh K. S. and Raja Samuel, explores the critical role of social work in cultivating hope for promoting social change, advocating for rights, and fostering supportive environments. Social work interventions extend beyond clinical treatment, addressing socio-cultural barriers, economic challenges, and the stigma surrounding mental illness. By employing a person-centred approach, social workers collaborate with families, communities, and healthcare professionals to create inclusive and sustainable recovery pathways. This chapter delves into various assessments and interventions that enhance quality of life, reduce institutionalisation, and empower individuals to reclaim their agency. Ultimately, it underscores the indispensable role of social work in bridging the gap between mental health care and social justice.

In Chapter 11, Laura Clements and Shirindi Modjadji examine social work assessment and intervention with parents who use and misuse drugs. The authors explore how parental drug use is approached in social work practice in two countries (South Africa and the UK) and the diverse legal frameworks that govern licit and illicit substance use in these countries. The authors explore how these differences inform and impact social work assessment and intervention with drug-using parents. The chapter further examines how dominant socio-cultural narratives about drug users influence social work decision-making and provides a brief overview of theoretical frameworks that underpin social work assessment and intervention in relation to drug misuse.

Chapter 12 deals with issues in working with bereavement, trauma, and crisis. Penned by Andy Langford, the chapter also considers the impact of bereavement on partners and young children. Mourning rituals can often aggravate the sense of loss in such scenarios. The importance of trauma-informed care in practice has been elaborated upon in this chapter, and there is reference to recovery and impact models that help people overcome trauma and the grief associated with bereavement.

Chapter 13 has been authored by Kgashane Johannes Malesa and explores intersectionality in social work with LGBTQI communities. The author highlights the psychosocial challenges that members of these communities face and the discrimination, social isolation and mental health issues consequently experienced by them. Theoretical models have been dealt with, and micro- and macro-strategies of intervention have been highlighted in the chapter. There has also been a strong emphasis on value-based practices, such as confidentiality issues, that have been discussed by the author.

Chapter 14 has been penned by Lekganyane Maditobane and Dipela Mmaphuthi and covers a range of issues in working with people with a diagnosis of HIV/AIDS. The stigma and discrimination faced by them have been emphasised, and their aggravated status during the COVID pandemic has been the lens through which social work practice has been viewed by the authors, along with strategies for providing psychosocial support to people whom one may encounter in practice.

The chapters have been penned by practitioners and academics with specific experience in the topic area that they have written about. Each chapter provides a comprehensive overview of issues encountered in practice pertaining to the vulnerable group that the chapter focuses on and ensures breadth and depth of coverage on issues of interest to social work students, practitioners, and other professionals who work with people in a range of distressing circumstances.

Selwyn Stanley, PhD
Editor

CHAPTER 1

CONTEMPORARY SOCIAL WORK: AN OVERVIEW OF KEY ELEMENTS

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It will be a good start to this chapter by looking at some common definitions of Social Work as enunciated by various professional bodies.

The British Association of Social Workers (BASW) states that:

Social workers work with individuals and families to help improve outcomes in their lives. This may be helping to protect vulnerable people from harm or abuse or supporting people to live independently. Social workers support people, act as advocates, and direct people to the services they may require. Social workers often work in multidisciplinary teams alongside health and education professionals.

The Canadian Association of Social Workers (CASW), on the other hand, states:

Social work is a profession concerned with helping individuals, families, groups, and communities to enhance their individual and collective well-being. It aims to help people develop their skills and their ability to use their resources and those of the community to resolve problems. Social work is concerned with individual and personal problems but also with broader social issues such as poverty, unemployment, and domestic violence.

The National Association of Social Workers (NASW) of the USA holds that:

Social work practice consists of the professional application of social principles and techniques to one or more of the following ends: helping people obtain tangible services; counselling and psychotherapy with individuals, families, and groups; helping communities or groups provide or improve social and health services; and participating in legislative processes. The practice of social work requires knowledge of human

development and behaviour, of social and economic and cultural institutions, and the interaction of all these factors.

Finally, the global definition of social work, universally accepted by the profession, is as below:

Social work is a practice-based profession and an academic discipline that promotes social change and development, social cohesion, and the empowerment and liberation of people. Principles of social justice, human rights, collective responsibility, and respect for diversity are central to social work. Underpinned by theories of social work, social sciences, humanities, and indigenous knowledge, social work engages people and structures to address life challenges and enhance well-being.

International Federation of Social Workers (IFSW)

Looking at these definitions, there are some common (and perhaps core) elements that are worth identifying.

- Social work, as a profession, deals with vulnerable people.
- It is a helping, problem-solving process that works with individuals, families, groups, and communities to alleviate distress.
- It seeks to enhance the well-being of people and liberate and empower them.
- Social work practice requires knowledge and skills.
- Its operation is underpinned by values and principles that are inclusive.
- It is also concerned with mitigating macro-social issues that generate distress and, hence, is concerned with social change.

Other characteristics that have been identified by these definitions are providing access to resources for people in need, collaborating with other professionals, and working within legislative parameters. While the people-orientated nature of the profession is clearly embodied in these definitions, the aspect of relationships, which is a crucial element of working with people, has not been explicitly mentioned. It may be worth looking at what is undoubtedly a quintessential element of the profession in the next section.

Relationship: its nature and significance

There is no doubt that if the social work process is to enable people to become liberated, autonomous, and empowered, as enshrined in the definitions explored earlier, then the most important tool in the social worker's repertoire is the medium of the relationship established between

the helper and the helped. The relationship needs to be one that is positive, purposeful, and professional. It is the bridge that provides the basis for the development of a bond or connection between the two key actors in the scenario. A positive relationship is one that is motivating, encouraging, and reassuring, provides elements of hope and optimism, and is sustaining, nurturing, and nourishing. All of which are crucial ingredients that a vulnerable person in distress looks forward to. The relationship needs to be purposeful and goal-directed, as it is only a means to an end. The end being the alleviation of distress, the promotion of well-being, and the enhancement of the quality of life of the help seeker, the service user, or the client. Professionalism accrues from the skill and knowledge base of the social worker, which translates into competence in practice and includes elements such as emotional regulation, impulse control, the maintenance of professional boundaries, and objectivity in assessment and decision-making, besides including aspects of honesty, integrity, transparency, and accountability.

It is worth recalling the 'core conditions' of professional relationships outlined by Rogers (1977): congruence, empathy, and unconditional positive regard. Congruence, also referred to as 'genuineness', is the alignment of one's thoughts, feelings, and actions. It is about being authentic and honest and not hiding behind a false façade. Empathy is the ability to understand what someone else is feeling; it is about recognising and seeing things from the point of view of the 'other' in the relationship. It is about putting oneself in someone else's position and feeling what they feel as accurately as possible. It is the imaginary transposition of oneself into the subjective inner world of another person, a near-accurate perception of their thoughts, feelings, and experiences. Unconditional positive regard is all about accepting people for who they are and not what they ought to be. It is about treating people with dignity as objects of worth, incorporating elements of being non-judgemental and approaching people without bias or prejudice that may stem from one's own experiences.

Good interpersonal communication has been referred to as the cornerstone of social work practice (Koprowska, 2020; Lishman, 2009), which serves to achieve positive outcomes for service users (Healy, 2017). Acknowledging the crucial role played by effective communication in social work practice, Seden (2005) mentions that it is helpful for a wide array of reasons, such as establishing relationships, transmitting and sharing information, exchanging ideas and perceptions, creating change, exchanging attitudes, values, and beliefs, and achieving service user and practitioner goals. Maidment and Egan (2016) describe micro-skills as

verbal and non-verbal techniques used in communication with others (see Box 1.1).

Box 1.1

The micro skills related to the framework suggested by Maidment & Egan (2016) are listening, responding, using empathy, summarising, questioning, conciliation, validating, transferring, reflecting, paraphrasing, using silence, assertiveness, goal-setting, interpreting, externalising, verbal and non-verbal cues, clarifying, negotiation, prioritising, normalising, challenging, universalising, conflict management, affirming, using immediacy, boundary-setting, confronting, and recording.

Relationships are bi-directional and involve reciprocity, a mutual exchange of feelings, and emotional interaction between the parties involved. This may often not be the case when clients find themselves interacting with social workers involuntarily against their will or choice, as seen during referrals made by other agencies, such as the judiciary. The challenges encountered by the social worker in such cases tend to be heightened owing to the resistance encountered from their clients. In any case, if progress has to be made, then this is an issue that needs to be addressed as something to be dealt with, reduced, overcome, or resolved. The social worker's skills in dealing with or managing resistance are crucial in several scenarios frequently encountered in practice. Reflective practice requires the social worker to identify the source of the resistance, which could be due to myriad factors, as the first step in dealing with a non-cooperative client. Resistance could be towards the social worker as a person (owing to gender and perceived social class differences); towards the social work process itself due to feelings of guilt, shame, and being uncomfortable disclosing sensitive and often intimate accounts to a total stranger; or towards institutional policies, procedures, or activities, such as unwilling participation in group work activities. Resistance may also be encountered when it involves a change in deep-seated attitudes or long-standing behaviours, such as giving up alcohol or drugs. Strengthening empathic understanding and conveying an understanding of the client's experience (Elliott et al., 2011) has been suggested as a way forward. The therapeutic alliance model (Sotero et al., 2016) considers three fundamentals: actively strengthening relationship bonds, gaining trust and confidence, and identifying and mutually agreeing on tasks and activities to be undertaken and goals to be attained in the short and long

term. Techniques of Motivational Interviewing (MI), such as 'rolling with resistance' or engaging in 'change talk', have also been advocated as effective strategies for dealing with resistance (Forrester et al., 2012).

Box 1.2

Resistance in social work has been considered to be antagonism or hostility to treatment or intervention (Forrester, Westlake, & Glynn, 2012). It is behaviour in which the client opposes or impedes the direction or diverts the social worker. Resistance in social work practice can take various forms and is often experienced as clients' responses that are challenging, involuntary, disagreeing, blaming, and defensive (Westra et al., 2012).

The value base of social work

Box 1.3

Bisman (2004) considers values as the 'moral core' of the social work profession; Vigilante (1974) refers to them as the 'fulcrum of practice'; Bernstein (1970) regards values as providing the 'vision and discernment' required for guiding practice; Younghusband states that they are 'everywhere in practice'; Ferguson and Woodward (2009) consider social work to be 'an ethical, value-based profession'.

The phrases used by these writers (see Box 1.3) underscore the importance of the value base of social work. These values guide professional practice by regulating the behaviour of practitioners, affirming the identity of the profession, and, above all, being instrumental in safeguarding vulnerable clients from exploitation, abuse, and maltreatment. Reference to some key social work values has already been made in the previous section of the discussion involving the Rogerian core conditions that characterise therapeutic relationships.

Felix Biestek, a Jesuit priest and social work educator, in a book titled 'The Casework Relationship' (1961), outlined certain principles of practice that can be easily remembered through the acronym PANICCC. This refers to the purposeful expression of feelings, acceptance, a non-judgemental attitude, individualisation, client self-determination, controlled emotional involvement, and confidentiality. Social work values

involve respect for people, honouring the diverse and distinctive organisations and communities that make up contemporary society, and combating processes that lead to discrimination, marginalisation, and social exclusion (Parrott, 2010).

The Code of Ethics of the British Association of Social Workers (BASW) states that social work is based on respect for the inherent worth and dignity of all people as expressed in the United Nations Universal Declaration of Human Rights (1948), by upholding and promoting human dignity and well-being, respecting the right to self-determination, promoting the right to participation, and working holistically from a strengths-based perspective. It considers the objective of promoting social justice by challenging oppression and unjust policies and practices, respecting diversity, and working in solidarity. Professional integrity is another key value emphasised in terms of being trustworthy, ethical decision-making, transparency, and accountability, besides maintaining professional boundaries. These values are also enshrined in the IFSW's Global Ethical Principles (2018).

The Strengths-Based Approach (SBA)

Box 1.4

A strength-based approach in social work entails empowering clients to identify and apply their strengths to achieve their goals, rather than focusing on fixing weaknesses or deficits. Strengths-based approaches aim to change the way individuals with care and support needs are assessed and supported by social work and social care services by refocusing interventions away from 'need' and deficits and towards resources and 'strengths'. The overarching aim is to improve the lives and well-being of users and carers.

Department for Health and Social Care, 2019.

Strengths-based social work acknowledges the inherent strengths of individuals, families, groups, and organisations, mobilising and deploying these strengths to aid the process of recovery and to empower those in need of social work intervention.

It is therefore a relationship-based collaborative approach that promotes the opportunity for individuals to be co-producers of services and support rather than solely being passive consumers of services (Morgan and Ziglio, 2007). The strengths-based approach to social work

practice values the empowerment of individuals seeking support from services and advocates a relationship of collaboration as opposed to one of subservience to authority (Itzhaky & Bustin, 2002).

SBA according to SCIE (2018):

- is rights-based and person-centred and has a clear ethical and value base.
- puts individuals, families, and communities at the heart of social care and recognises that they have a key role to play in the care of children and young people, which cannot be replaced solely by professional intervention.
- includes a new way of looking at people, embracing the core belief that even if they are experiencing problems, they have the strengths, skills, resources, and capability to effect positive change in their lives if enabled and supported to do so.
- appreciates that the valuable skills and experiences children and young people and their families have are key to working alongside them and co-producing solutions.

Social Care Institute for Excellence (SCIE, 2018)

In the words of Saleeby, one of the early advocates for an SBA in social work, "The strengths perspective demands a different way of looking at individuals, families, and communities. All must be seen in the light of their capacities, talents, competencies, possibilities, visions, values, and hopes, however dashed and distorted these may have become through circumstance, oppression, and trauma" (Saleebey, 2009: 297).

1. Rapp, Saleebey, and Sullivan (2008) outline six important elements of the SBA.
2. Goal orientation: It is crucial and vital for the client to set goals.
3. Strengths assessment: The client finds and assesses their own strengths and inherent resources.
4. Resources from the environment: Connect resources in the person's environment that can be useful or enable the person to create links to these resources. The resources could be individuals, associations, institutions, or groups.
5. Different methods are used first for different situations: In solution-focused therapy, clients determine goals first and then identify strengths. In strength-based case management, individuals first determine their strengths using an assessment.

6. The relationship is hope-inducing: by finding strengths and linking them to connections (with other people, communities, or cultures), the client gains hope.
7. Meaningful choice: Each person is an expert on their strengths, resources, and hopes. It is the practitioner's duty to improve upon the choices the person makes and encourage informed decisions.

According to the Social Care Institute for Excellence (SCIE, 2018), SBAs can result in better outcomes at the individual, family, and organisational levels.

- At the individual and family level, SBAs aim to achieve greater stability and reduce risk for children and young people. They also aim to increase the well-being and resilience of families. SBAs encourage the involvement of children and young people and their families in decision-making so that they are more in control of the support they receive and, thereby, their everyday lives.
- At the organisational level, local authorities achieve better value for money and cost savings, and there are stronger incentives for innovation, greater organisational adaptability, and opportunities for a fresh start. This can also enable increased staff wellbeing and reduced turnover.

Personalisation

Personalisation is a concept and social policy objective that is of relevance to social work practice. In the UK, it was ushered in by the Department of Health as a philosophy of practice and a guiding principle for service delivery within the social care sector. Personalisation has been described variously by several authors. Beresford (2014) contends that personalisation is 'a term that has no clear or agreed meaning and does not have a place in many established dictionaries' (p. 1). Gardner (2011) holds that personalisation is both a 'way of thinking and a way of doing' that is guided by an underlying philosophy and principles, including 'self-determination', 'dignity', and 'choice' (p. 18) and, as such, is aligned well with the core values that underpin social work practice, such as individualisation, self-determination, and the use of a participatory approach. It has hence been considered to be a process involving an individualised assessment and response, the expression of individual preferences and choices, or a process in which users and professionals negotiate a common understanding of the needs of the individual (Spicker, 2013). The approach to practice places the needs, wishes, choices, and

capacities of the service user (or client) at the centre of the process of assessment and intervention.

Personalisation holds that social care services need to be tailored to the individual needs of the service user and provide the right kind of support as is appropriate for the unique life circumstances that they are faced with (Harlock, 2010). It also includes the provision of information and advice relating to care and support for families, investment in preventive services, and the promotion of independence and self-reliance among individuals and communities (Dunning, 2008). Personalised approaches like self-directed support and personal budgets involve enabling people to identify their own needs and make choices about how and when they are supported (SCIE-Social Care Institute for Excellence). Putting reciprocity and contribution at the centre of practice recognises that it is fundamental to the service users' sense of self-worth and citizenship (Richardson, 2022). Personalised approaches acknowledge the need for people to be able to access appropriate information, advocacy, and advice so they can make informed decisions relating to their life circumstances. Personalisation hence recognises and accepts people as individuals who have strengths and preferences and puts them at the centre of their own care and support.

The Social Work Process

Contemporary social work has its roots in the earliest manifestation of the profession, with the development of Social Casework, which can be traced to perhaps the earliest writings of Mary Richmond and to her book titled 'Social Diagnosis', published in 1917. Casework grew as a method of intervention developed and refined by other early caseworkers such as Gordon Hamilton, Fern Lowry, Herbert Aptekar, Florence Hollis, Anne Garrett, and others. It had its moorings in the then highly influential psychoanalytic approach that dominated the development of psychiatry and psychology in the early twentieth century. Subsequently, casework developed as an accepted method of helping individuals and families experiencing psychosocial problems. The casework process considered three broad phases: Study, Diagnosis, and Treatment as key aspects of the methodology of helping people. Rather than being distinct sequential stages, they were considered processes that continued throughout the duration of engagement with the client. The caseworker was the expert who 'studied' the client and his problem, made a 'diagnosis' of causal factors, and then 'treated' the individual to 'fix' or 'set things right'. The entire approach was rooted in the notion of pathology, abnormality, and a perspective of deviance, which was the lens through which clients were

viewed and understood. This approach held sway for most of the early and mid-twentieth century and began to be challenged by the waning of the psychoanalytic movement.

It was in the sixties and seventies that the disability movement gained ground, and Mike Oliver, a disabled academic, coined the term 'social model' in 1983. The social model gained momentum and was responsible for the move away from the earlier medicalised model of disability to the understanding that problems faced by people have their roots in social issues, both structural and systemic, rather than in individual pathology. Social workers, particularly in the West, were quick to adopt this perspective as being less blame-orientated and taking a more egalitarian approach to understanding and helping people with their problems. The quest for a stronger professional identity also enabled the move away from the use of clinical jargon such as 'diagnosis' and 'treatment', which were seen to belong to the earlier medical/clinical model then in vogue. More neutral terminology entered the lexicon of social workers, and the clinical terms used earlier were now substituted with terms such as 'assessment' and 'intervention', which are widely used now. Figure 1 below is self-explanatory and depicts the social work process and its elements.

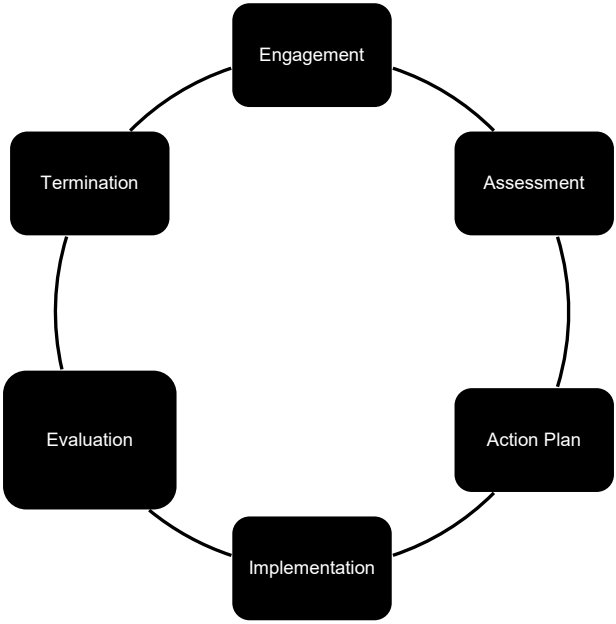

Fig.1-1 Phases in the Social Work Process

The engagement process is the initial phase largely devoted to establishing and developing a relationship with the client or service user, understanding the reasons for contact, and clarifying mutual expectations about roles, the process, and its limitations. It is also about generating hope and optimism and providing encouragement and solace as needed. All this forms the basis for exploring the issues faced and the outcomes to work towards on a mutually agreed-upon basis.

Assessment is a crucial step in the entire process and is initiated gradually during the initial phase of engagement when the social worker starts developing some generic notions about the nature of the person and the issue being dealt with. It is also about assessing what additional information is required for a holistic understanding of the issue and where and how it can be obtained. More importantly, it is about assessing the needs of the client and the resources that are available and/or required. Risk assessment is also a factor that needs attention in terms of evaluating what hazards are perceived in the immediate circumstances and if they need to be prioritised and mitigated. There is a developing understanding of how past events or actions have led to the current circumstances and of the roles that the person at the centre of it or his significant others have played. Mary Richmond developed the notion of the 'person-in-situation', and the assessment process deals with both to obtain a near-holistic and comprehensive assessment of the presenting scenario. Shared and agreed-upon assessments help to make the process democratic and participatory and are also likely to result in better outcomes.

The planning phase deals with the development of action plans geared towards desired objectives, both short- and long-term. It involves identifying alternate actions, weighing their pros and cons, and deciding to implement the best-suited option, given its feasibility and in light of resources that are available or could be mobilised. This may also need to identify other actors who could play a role in mitigating the issue of concern.

Once action plans have been firmed up, the implementation phase sets in. This would involve taking steps identified in the earlier phase by the client and others involved. This often requires a behaviour change and/or changes in attitudes by the actors in the scenario, as well as the availability of resources that could help mitigate the distress. Anticipatory guidance, encouragement, and motivation need to be strongly manifested here, as do steps taken to deal with obstacles, disappointments, and setbacks. This phase should ideally result in the achievement of predetermined objectives and lead to the next phase of evaluation.

The evaluation phase deals with an assessment of outcomes in terms of the extent to which goals have been achieved. It typically deals with

developing an understanding of what went well and what did not, what worked or did not. Identifying barriers to goal achievement, deciding on other options that can be taken to overcome these barriers, and assessing the need for additional resources are all crucial elements of this phase. Goals may need to be reframed, changed, or modified, and new action plans may have to be considered if the distress experienced has not been satisfactorily dealt with or if there are loose threads that need to be tied up. It is important to stay in tune with the client's feelings here, as there could be exhilaration and joy in successful goal attainment or disappointment and dejection when failures are encountered. A successful resolution of the situation indicates a move towards termination and preparing the client to function autonomously in a self-directed manner. Making follow-up arrangements for future contact to monitor progress and improvement may also need to be considered.

Multiculturalism and Cultural Competence

Box 1.5

A multiculturalism perspective increases knowledge, awareness, and understanding about race, ethnicity, gender, and immigrant populations and is likely to contribute to culturally competent social work practice. It holds that social workers need to be aware of their values and biases, be aware of the client's worldview and be able to deliver culturally appropriate interventions.

(NASW: Massachusetts Chapter, 2014).

Societies the world over are becoming increasingly multicultural owing to migration and improved travel and communication possibilities. Social workers in contemporary times are faced with the need to increasingly interact with and render professional assistance to a client group that is heterogeneous and diverse in several aspects. A multicultural society increases the prospects of people belonging to minority groups experiencing unfavourable and prejudiced social attitudes towards them and the emergence of discrimination and oppressive experiences. It hence becomes important from a practice perspective that social workers understand the nature of social diversity in relation to a range of sociocultural and demographic factors such as race, ethnicity, national origin, colour, sex, sexual orientation, gender identity or expression, age,