social work

WITH ADULTS

EDITED BY

Georgina Koubel

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Praise for this book

"Few texts capture the perspectives and experiences of both adult service users and those social workers who seek to support and work alongside them. This one does and should be applauded for this... This is a positive, forward-looking book and one which I recommend to students, practice educators and university lecturers alike."

Jem Price, Social Worker and Senior Lecturer, University of Brighton, UK

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Contributors

Ian Devereux was a Director and Partner in two successful businesses. One week after marrying his second wife, Denise, Ian contracted a virus which resulted in Denise having to drive him to A&E. Twenty-four hours later he was in a coma, resulting in his becoming paralysed from the neck down and spending most of 2007 in hospital trying to recover. Three years later, Ian still needs the support of PAs to get out and about and carers to help with his personal care, and he uses Direct Payments to manage his own support. Having become extremely frustrated while in hospital, following his discharge he jumped at the opportunity to join the TREND project as a co-sessional trainer. Using Direct Payments has meant Denise is Ian's wife, not his carer, and they have even been able to organize family holidays together with the support Ian needs.

Felicity Elvidge, RGN, BA (Hons) Social Work Studies, KAPT, Advanced Certificate SW&CM, Post Graduate Diploma Interprofessional Health and Social Care, practised as a Registered Nurse in a variety of settings before going into care management. She was one of the first appointments in the country to the dedicated post of Adult Protection Coordinator (now Safeguarding Co-ordinator) over 12 years ago. Felicity is a contributor to the *Journal of Adult Protection* and the *Kent Journal of Practice Research* with a particular interest in the prevention of institutional abuse arising as a consequence of poor quality accommodation-based care provision.

Donna Francis has been a service user for two and half years. She employs her own Personal Assistant. Donna has a form of dwarfism that means that she needs extra support to live independently. Donna is now a self-employed co-trainer for her local council, giving social services staff a perspective of what it is like to be a disabled person and receive services. Having been to university, had a paper published and been travelling, Donna does not let her dwarfism stop her living a full life. Donna also works for a small charity promoting independent living for disabled people.

Keith French is a social work practitioner who works as a care manager with people with sensory disabilities. Keith is himself profoundly deaf. He is currently studying for the post-qualifying award in specialist social work at Canterbury Christ Church University. Keith has a wealth of knowledge and experience of the Deaf community and Deaf culture and is most interested in seeking the rights of and redress for this oppressed linguistic cultural minority group. He has a deep interest in the psychological perspectives of D/deaf people and of their social welfare and in whether society has been or is enabling or disabling them.

Yolaine Jacquelin, MA Women's Studies, is a Training Consultant within a local authority Learning and Development team. She leads on adult services care management training and is interested in making user participation a meaningful reality. Her professional background includes over 15 years working in service provision for adults with a learning disability.

Georgina Koubel, CQSW and MSc Interprofessional Health & Community Studies, currently working as a senior lecturer in social work at Canterbury Christ Church University (CCCU), qualified as a social worker in the mid-1970s and spent many years as a generic statutory social worker in London. Moving to Kent Social Services in 1993 she developed a specialist interest in adult services, first as a care manager and then as a training consultant and training manager. An appointment to the social work team at CCCU followed in 2003, which involves teaching on social work and interprofessional learning programmes. This post has enabled the development of particular interests in the areas of rights and risks, adult safeguarding, disability discourses, reflective practice and person-centred approaches to working with vulnerable adults. Publications include two books co-edited with Hilary Bungay, *The Challenge of Person-Centred Care: Interprofessional Perspectives* (Palgrave Macmillan 2009) and *Rights, Risks and Responsibilities: Interprofessional Working in Health and Social Care* (Palgrave Macmillan 2012).

Edith Lewis is a Senior Lecturer in Social Work at Canterbury Christ Church University who was born and brought up in Zimbabwe. She completed an MSc in Social Policy and Planning at the London School of Economics in the late 1990s and has 16 years' experience of working in health and social services in different roles. Her areas of interest and expertise include issues of identity, equality and diversity, globalization, improving access to services for people with learning disabilities, social policy issues related to social work practice and managing change in human services.

Charley Melville-Wiseman is a Senior Social Work Practitioner in an integrated Health and Social Care Community Mental Health Team. She has worked in mental health services for over ten years and has a particular interest in the holistic mental health needs of women. She also works as an Approved Mental Health Professional and was awarded an Outstanding Professional Practice Award by Kent Police for a piece of work in this role. She has experience of teaching in both the UK and Finland and hopes to pursue her research interests into the relational needs of women with acute mental health difficulties in the future.

Julie Potten is a Care Manager in an Integrated Health and Social Care Community Learning Disability Team. She has extensive experience and expertise in working as a practitioner in both health and social care services and in January 2011 completed the BSc in Health and Social Care.

Marilyn Russell is a senior social work practitioner based in a hospice where she works with people facing life-threatening conditions, and their networks and families. Marilyn has previously worked extensively with domestic abuse and is particularly interested in all areas of safeguarding, and also in working with couples where a partner is coping with a life-threatening condition or receiving end-of-life care. While working at the hospice she has qualified as a couples counsellor with Relate. She is in the process of undertaking studies on the post-qualifying social work programme at Canterbury Christ Church University.

Louise Watch, BSc, MA Disability Studies, has 15 years of experience working with local authorities and organizations of disabled people. Her work has focused on establishing and managing Direct Payment support services and in the provision of training around self-directed support, independent living, rights and citizenship.

Through her company, Louise has also provided disability equality training, consultancy and independent living support for individual disabled people and those working within social care. Louise utilizes personal assistance and is actively involved in campaigns that seek to improve the quality of day-to-day life for disabled people.

Mark Wiles is a social worker who has been working as a case manager within an adult coordination team for the past five years. Many of the people who use services are older adults who come to the service as a result of the effects of long-term health conditions, including many living with dementia. He has developed a particular interest in this area of work, and has recently completed his studies for the post-qualifying award in specialist social work at Canterbury Christ Church University.

Introduction

Georgina Koubel

Social work with adults could cover a vast range of people who need to use social work services at some stages in their lives. It is not possible for one book to do justice to the complexities of work with everyone who may need to make use of such services. As the majority of people who work with adults in Social Services Departments are most likely to engage with older people or people with physical disabilities or learning disabilities, these are the main areas on which the book concentrates. Not all practitioners who carry out social work with adults are qualified social workers. Some may have developed their interest and expertise through other personal or professional pathways. Nevertheless, throughout this book the application of social work knowledge, skills and values will be highlighted.

> Social services for adults are right at the heart of the welfare state. They carry out essential tasks working with a wide range of people – home care services, day centres, residential care schemes, rehabilitation of blind or partially-sighted people, provision of equipment to aid independent living, help to parents with disabilities to carry out their parenting tasks, support for families who have caring responsibilities, work with people with mental health problems and support to learning disabled people and their families.
>
> (DH 1998: Chapter 1)

The history of social work with adults can sound like an unremitting tale of woe. Adults who use services including social work services can be reasonably considered as individuals or groups who have been, at various times, ignored, pitied, abused, institutionalized, exploited, patronized or marginalized by services and society.

This book certainly does not ignore or reject the many limitations and hardships people have had to face because of the attitudes and actions of others. However, in addition to rigorous analysis of the disadvantages and deprivations experienced by many adults who use services, what the reader will also find in this book are examples of challenges met, opportunities embraced, lives enhanced rather than restricted, and consideration of the role and significance of social workers and various other social care practitioners in promoting positive and person-centred practice.

However, social work practice does not take place in a vacuum. Legislation, social policy, political ideologies and global movements of peoples all interact to form a

network within which social work with adults can operate and the social and political contexts that frame social work permeate and underpin the personal and professional accounts in this book. There are some fields where social work perspectives occupy a particular place within, for example, more medicalized or specialized areas of practice such as hospice services, multidisciplinary mental health teams and social work with people with sensory impairments and these will also be addressed. Although the book will focus mainly on statutory services, these areas of practice will also be covered.

Contributors to this book have been carefully chosen because of the personal or professional experience or perspective that each can offer to enhance our understanding of what is meant by social work with adults. This is an academic textbook with reference to a raft of books and papers which students, practitioners and hopefully some people who have used services, i.e. those who have become 'experts by experience', will find interesting, enlightening and possibly challenging. One of the challenges that will be explored within this book, and indeed in the context of the future of social work with adults, is the validity and power of the personal within the professional sphere. A particular focus within the concept of this book is to capture the voices of practitioners and service users as well as academics. To assume that academics are somehow uniquely removed from the impact of personal experience would be as erroneous as to assume that the personal testimonies of service users have no wider significance than their own lives.

To develop a hierarchy of validity without carefully assessing the diverse perspectives offered in this book would be premature. The idea of professionals learning from the accounts offered by people who use services is not new but it is still emerging. Notions of partnership and power-sharing do challenge traditional notions of who is the helper and who is the person being helped (Shakespeare 2000). However, I believe that the establishment of common aims and causes, as discussed in several of the chapters in this book, could be an important aspect of the future for social work with adults, and that working together in a variety of ways can embrace the common humanity that connects all those whose lives interconnect through the medium of social work and social care.

The first part of the book, *The Context of Social Work with Adults*, will introduce readers to a range of underpinning and fundamental features that frame social work with adults. These will include the evolution and development of social work from its historical twin bases in casework/charity and social justice until it was established as a profession in the 1970s.

In Part II of the book**,** which highlights the challenges and complexities involved in *Working with Different Service User Groups in Adult Services*, individual chapters will concentrate on working with particular individuals and groups who comprise many of the service users that practitioners within social work with adults are likely to encounter. These include people with physical disabilities, people with learning disabilities, older people and people with dementia, people facing life-threatening illnesses and people with sensory disabilities. Mental health is a key consideration within social work with adults, and although it is not explicitly the remit of this book, a number of chapters also recognize the challenges that face practitioners working with adults who

additionally experience mental health issues. Other areas such as interprofessional working, the changing role of service users and carers, culturally aware practice, modernization and personalization will be discussed throughout the book; some will form the focus for a particular chapter.

This is not specifically a book about social work theory, although social work knowledge, skills and values provide a basic underpinning for every element of the book. Each chapter contains a number of different theories as well as the legislation and policies that inform and frame social work practice with adults. However, rather than address each of these as separate issues, the following chapters aim to show what practitioners actually do, i.e. how within practice they apply and integrate social work knowledge, skills and values. At the end of this Introduction there are some suggestions for books to read if you want to explore these aspects further.

The first two chapters are written by Georgina Koubel who has been in social work almost since the inception of statutory Social Services Departments, which were set up in 1970. The intention of these first two chapters is to set the framework for thinking critically about the changing role of social work and social care with adults. Looking back at the treatment of, for example, disabled people and people with mental health difficulties over the centuries provides an opportunity to understand how notions of poverty, disability, risk, choice, vulnerability, dangerousness and dependence are constructed within the context of the social strategies and beliefs of the times. Once it has been accepted that elements (such as our views about people with disabilities) within society are constructed by the views and ideologies prevalent at the time rather than that they have always been the same and are natural and inherent, the stage is set for a critical interrogation of what in each age may have been 'taken for granted'.

The second chapter will examine the modernization of social work with adults from the end of the 1970s to the present day and the implications for social work practice. These chapters will establish the framework within which readers can enhance their understanding of the changing and contextual nature of social work with adults, evaluate their own values and attitudes, and develop a critically analytical perspective of their own experience of practice.

The next two chapters take the current context of social work and social care and look at two essential aspects of the work: safeguarding and user involvement. In Chapter 3 Felicity Elvidge, a very experienced Safeguarding Coordinator, provides an introduction and overview of the challenges and complexities involved in safeguarding vulnerable adults. Exploring the history and development of adult protection and safeguarding, the chapter explores the importance of person-centred safeguarding as a core value of good practice in the multi-agency context and not solely as a procedural response to abuse. This will be linked to relevant theoretical models of practice within social work and social care. Issues of risks, choice, capacity and vulnerability will inform the analysis and case scenarios will include consideration of the relationship between adult safeguarding and domestic violence.

Chapter 4 offers a very different perspective, and hopefully one that will engage and invite readers who think they understand the delicacies of involving service users in consultation and partnership to review and reflect upon any prior assumptions

about the complexities and challenges involved. This chapter examines the process of partnership working through exploring the co-provision of training. It asks questions about whether authentic partnership between trainers and service users can really be possible, and highlights the need to analyse how such collaborations can be used to enhance practitioners' awareness of the need to look beyond the label and see – really see – the person behind the reductive and marginalizing categories reserved for people in society who need different levels of support. The main author for this chapter is Yolaine Jacquelin who has been involved in social care and training in Adult Services for many years. She has worked closely with Donna Francis and Ian Devereux as co-trainers on the TREND programme, and their comments and stories are very much part of the chapter to ensure their views as service users and as participants in delivering training are clearly heard.

Most communities and work places are now multi-ethnic and multicultural and this requires practitioners to be sensitive and be knowledgeable about how other people may think and act. It is also crucial to realize the role migration takes in constructing situations and the patterns of ethnic relations and how attitudes to those considered different are formed. It therefore becomes a prerequisite in social work practice to respond appropriately and meet the needs of those accessing social services regard-less of their background. In Chapter 5, Edith Lewis, who was born and brought up in Africa, explores the need for practitioners in social work and social care who are self-aware, knowledgeable about other cultures' perspectives and who have the relevant skills required to respond effectively to the challenge of globalization as it affects social work with adults. She critically examines issues of difference/sameness; the nature of identity and the concept of Britishness as articulated by politicians and by those who may (or may not) see themselves as different from mainstream society. The chapter explores the growing need for well-qualified and competent social work professionals who are able to respond sensitively to an increasing level of intercultural interactions. Social workers need empathy and interpersonal skills as well as cultural awareness and knowledge of what it means to be or feel 'different' and to understand the importance of individual identity for those who have settled or are settling in British society today by continuously challenging their own personal beliefs, values, assumptions, stereo-types and prejudices (Laird 2008).

Having set the scene and looked in some depth at the historical and political context of social work, the second part of the book addresses the challenges and com-plexities of the integration (and sometimes dissonance) between contemporary policy and practice. Each of these chapters is written by an expert in the field, a practitioner (who may also have experience as a user of services) who contributes the benefits of his or her many years of personal and practice wisdom. Practice examples (all fully ano-nymized) are considered in the context of relevant research, theory and policy drivers, and reflective exercises encourage readers to think more deeply and critically about their own values and beliefs about social work with adults.

The first author in this second part of the book is Louise Watch, who herself requires support from services. In Chapter 6, her voice resonates with the determi-nation and conviction of someone who has overcome many obstacles placed in her path as a person with disabilities. Her personal story is compelling particularly as it

highlights the difference the views and values of professionals can make in enhancing (or limiting) opportunities, and the importance for her of interprofessional collaboration between health and social work/social care. However, the chapter offers more than an individual perspective, looking at the context of the development of social work with people with physical disabilities, starting with the exploration of different definitions and models of disability, and exploring the meaning and significance of relevant terms. The chapter highlights the importance of a rights-based approach to working with people with disabilities, alongside the challenges for promoting independence, choice and control in social work with adults.

Chapter 6 also looks at the development from a social model perspective with the ultimate goal of independent living to approaches which afford fresh ideas and solutions based on interdependency and mutual cooperation. Personalization will be explored in terms of wants, hopes, aspirations, solutions and fears, with examples and personal narrative. By examining these fundamental features of working with people with disabilities, the chapter aims to enable those who work within social work and social care to understand the complexity – and the possibilities and benefits – of working effectively alongside people with physical impairments.

Rights, choice, inclusion and control have been key words in the learning disability agenda from the days of Wolfensburger's Normalization theory and O'Brien's five accomplishments right through to current day with *Valuing People Now* (DH 2009). Often highlighting aspects of her work with individuals experiencing transitions and changes in their circumstances, in Chapter 7 Julie Potten, a practitioner in Adult Services with nursing qualifications and a very strong commitment to social work skills and values, examines how practitioners continue to face the ongoing challenge of how to ensure the recognition of rights, choice and control becomes a reality for the adults with whom they work. Practitioners are required and inspired to promote independence and opportunities for people with learning disabilities while also balancing issues of capacity, professional duties to safeguard along with public and organizational expectation of the management of risk and the pressure of finite resources and complex social situations.

Chapter 7 additionally explores some of the tensions in working with adults, looking at how the use of individual budgets, while providing genuine opportunities for many people with learning disabilities who use services, may also provide challenges in working with individuals with more complex needs due to severe and profound disabilities. The chapter considers the relevance of the Mental Capacity Act (2005) and analyses issues for those who lack capacity or where the practitioner has to negotiate with social and family situations to ensure service users have equality in their access to choice and control. This chapter offers further analysis of the use of the multidisciplinary approach as a way to provide a seamless, effective and accessible service for people with learning disabilities and their networks.

Chapter 8 looks at the situation of a group of people who are sometimes overlooked in terms of their relevance to the picture of social work with adults. Keith French, a social work practitioner who works with people with sensory disabilities, looks at the issues of those with sensory impairments from the point of view of a social worker who is himself deaf and who therefore has a dual perspective when working

with people who experience difficulties with hearing or vision, or both. This chapter investigates some of the issues relating to specialist roles in adult social work within the current context of practice and raises awareness of the dilemmas and conflicts that inform the process of working with people with sensory disabilities, highlighting the notion that people with sensory impairments are more likely to receive paternalistic services. The chapter will explore the ways in which society views people with sensory disabilities and analyse the need for greater awareness and understanding of the role of the social worker in relation to working in a meaningful way with people with sensory disabilities to challenge the discrimination and marginalization that many people in this group experience. It also examines the impact of the changes brought about by the personalization agenda for specific service users within this group.

One of the key areas of work within Adult Services is that of working with older people. In Chapter 9, Mark Wiles looks at the emerging demographics and highlights the issues for society and for older people themselves of the 'ageing population' in the context of tighter budgets and the current 'rationalization' of services for older people. In doing so, he explores the challenges created by the personalization agenda, i.e. the restructuring of the relationships of state and individual to give more responsibility to individuals to meet their own welfare needs. He argues that there is increasing pressure on the time and resources available for work with older service users, but particularly those with dementia, who face the double discrimination brought about by ageism and the prevalence of the medical model in most dementia care. Ageism is a reality experienced by all people as they age and this is informed by the culture we live in, exemplified by the emphasis we place on youth and physical strength, autonomy and independence (Thompson 2005). Having highlighted how structural and organizational factors impinge on work with older people who use health and social care services, the chapter further considers how social work knowledge, skills and values can contribute to much-needed improvements in practice.

Chapter 10 focuses on the work that is carried out by social workers based in a multi-professional Mental Health Team. While one chapter cannot encompass all the complexity of working with adults who are experiencing mental health difficulties, Charley Melville-Wiseman, taking a feminist perspective, examines a number of key themes that are relevant to the role and responsibilities of the social work practitioner. These include the complex issues facing social workers based in integrated health and social care, multidisciplinary mental health services, including the importance of considering the complexity of relational needs, balancing the benefit of relationships to enhance mental well-being while identifying risks that may be present within some of those relationships. Mental ill health often results in the need for some or a significant amount of support from others. This chapter therefore identifies the issues inherently associated with a disparity of power, both perceived and actual, and considers the subsequent possibility of abuses of that power. The challenges of promoting social perspectives in mental health and recovery while working within the strongly endorsed medical model are explored. This is a complex task, and although social workers are trained and equipped to challenge discrimination and social inequality, resisting pressures to meet targets while addressing these issues is not easy when they are not prioritized in the service.

The last 'practice-led' chapter considers the role and remit of the social worker working with people with life-limiting conditions. While this is rightly regarded as a specialist area of social work, Marilyn Russell, who works in a multidisciplinary team based in a hospice setting, argues that many social workers who work with adults are likely to engage with service users and their families who have experienced losses and who may be going through the bereavement process. In many cases, the experience of loss or the way in which the terminal stage of someone's illness is handled, can significantly affect the way in which their family or network manage to cope with the ensuing bereavement. Chapter 11 looks at some of the key social work theories, skills and values that inform good practice with individuals and families facing terminal illness and life-limiting conditions.

Because of the emotional impact of the work, this aspect of social work requires good use of support from the rest of the multidisciplinary team as well as guidance and supervision for the practitioner. Although all social work carries emotional pressures and good supervision is essential to promote considered, quality practice and to maintain the well-being of practitioners, this chapter takes the opportunity to identify problematic areas within emotionally laden practice and to explore the value of reflection in managing the emotional impact on the worker.

In Chapter 12, the Conclusion, Georgina Koubel draws together some of the themes and threads that have emerged from the previous chapters. Not all adults will need to access social services and certainly not all adults who would like services would be eligible for such assistance. Social work with adults involves working with a wide range of adults who need support from services, some of whom may be extremely vulnerable. Some may need safeguarding and support, while many others may need assistance to gain or maintain independence or to promote dignity, choice and autonomy in the ways they choose to live their lives. Many are likely to have experienced marginalization, stigma, discrimination and social exclusion. While the principles, values and theories that underpin social work provide important parameters for work with adult service users, there are real challenges ahead for social work with adults in terms of partnership, power-sharing and person-centred practice. Balancing issues of resources, rights, risks and responsibilities will continue to frame the development of social work with adults in the future. In view of the need to continuously critique and question the role of social work with adult service users, a model to promote reflection is presented for consideration.

Although the future of social work in general, and in adult services in particular, is extremely difficult to predict, there is a risk that procedural and simplistic models will prevail. The development of Personalization and the increased implementation of Independent Budgets may provide opportunities and freedom for many but for others the challenges of taking on the level of risk and personal responsibility may prove too great. In such complex cases, there is still a need for social workers to be involved to work in partnership with people who experience discrimination and marginalization. In order to ensure that social work with adults holds on to its fundamental knowledge, skills and values base, practitioners in this area have to critically understand, apply and consciously reflect on the nature of their roles and tasks and their relationships with service users, colleagues and the wider community.

Because social work is a challenging and exciting area in which to work it requires motivation and commitment, which come from personal experience as well as professional education and development. Each contributor has therefore provided a paragraph outlining where his or her energy and interest comes from. These can be found at the beginning of each chapter.

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Part 1

The context of social work with adults

1   The evolution of social work

Georgina Koubel

> Those who do not learn from history are destined to repeat it.
>
> (George Siddhartha)

Once upon a time, way back in the mists of the early 1970s, I was sitting on a train. Two women stood near me, talking quietly and earnestly to each other. Something in what they were saying caught my attention. They were discussing the situation of a family who were finding it very difficult to cope and the psychological implications for the children within that family of parents who found it both emotionally and materially difficult to meet their needs. I can't say I remember any of the details of what they said and I had never heard of social work but something within me resonated and I knew that this was an area I would have to explore further. I can't even remember how I found out what a social worker was, but I did, and within a few years I was on a social work course and for many years worked as a social worker, initially with the whole range of people using services and later specializing in working with adults. My interest and concern to understand the way people work, my fascination with the relationships between people and with the complex and sometimes contradictory interconnections between society's perspectives and its more disadvantaged members continues to intrigue and challenge me as an academic as much as it did when I was a practitioner.

Introduction

In order to understand what social work is actually about, and to develop the ability to stand back from the demands of practice and cultivate a more critical perspective on the issues that are covered in considering the process of social work with adults, it is important to understand where the concepts that inform social work have come from and how they have changed over the period in which social work has been part of society. Without this broader perspective, it becomes too easy for social workers and other practitioners to get caught up in the day-to-day pressures of applying *this particular policy* and meeting *those particular targets*. This can potentially lead to practice that runs the risk of becoming routine, reactive and unreflective, forgetting the knowledge, skills and values that make social work the unique and meaningful interaction with

individuals, groups and communities that it should be. The aim of this chapter therefore is to enable practitioners within the profession to gain and retain the ability to think carefully about what they are doing and why they are doing it.

It is particularly important that those working in Adult Services should have a critical awareness of the changes and developments that have informed the evolution of social work. This will enable them to develop an objective understanding and a critical eye when considering the context and environment in which social work with adults operates. The first chapter will take a brief overview of the history and evolution of social work with adults from the Poor Law, paying particular attention to the transition from the political indifference of *laissez-faire* (let them be) through the collective principles of the welfare state to the beginnings of the 'modernization' agenda that led to the developments of care management and the changes that have emerged as a result. There will be analysis of the role of the social worker with adults, drawing on the underpinning and often contradictory concepts of charity and social justice that make social work so complex and interesting. Using reflective exercises and case examples, the chapter will start by considering:

- Where does the notion of social work with adults come from?
- Who are the kinds of adults who will need to engage with social services?
- What do you understand by the *laissez-faire* approach to welfare in the nineteenth century?
- What is the difference in considering the collective principles that underpin the Welfare State?
- What do you think are the principles that underpin current social welfare policy with adults?

Learning outcomes

By the end of the chapter, readers should have developed their understanding and awareness of:

- the social, political, legal and policy context of social work with adults, particularly the transition from a *laissez-faire* model of welfare to the collective principles of the welfare state model;
- how notions of stigma, the concept of the 'deserving' and 'undeserving' poor and issues relating to resources and dependency have affected the historical development of social work with adults;
- the need for understanding of different perspectives in social work and social care in order to maintain critical reflection and analysis of the context in which practitioners operate.

The intention is to ensure that practitioners in Adult Social Work develop the habits of reflection and critical analysis (Brown and Rutter 2008; Knott and Scragg 2010). Throughout the book we will look at ways in which practitioners can be helped

to develop habits of critical thinking and reflection, which are no more than the ability to question where necessary practices that may be taken for granted, and to think consciously and conscientiously about their own practice. For practitioners, understanding how the tides of social work ebb and flow can help to avoid the sense of being flooded by the demands of the job or overwhelmed by the inevitable changes and challenges that will arise. Crucially, this level of awareness provides the opportunity for a better and more considered engagement with people who use services.

Clearly this is a lot to cover in a relatively brief account so I have separated the evolution of social work into two chapters. This, the first part, will look at how social work has evolved from the early days of the Poor Law to the comparative consensus around the roles and functions of social work that appeared to operate following the development of the welfare state up to the end of the 1970s. The development of social work will necessarily be considered initially within the wider context of the concepts, perspectives and ideologies that have contributed to the formation of an idea that could be called 'social work'.

The following chapter will look at the modernization of social work and will focus more specifically on issues relating to social work with adults. In some ways this division reflects the changes that have been taking place within social work in the move from generic, inclusive services to increasingly specialized and marginalized practice. We will consider these ideas in more detail as we go on.

The first question we ask of anyone who applies to become a social worker is what they think social work is. In fact we split it into three questions:

- What is social work?
- What do social workers do?
- Why are social workers necessary?

Over the next two chapters (and in fact throughout the book) we will try to address the issues that underpin these three deceptively simple questions.

Defining social work

In his helpful basic introduction to social work, Horner (2009) highlights two contrasting definitions that will help to explore the diverse elements that inform social work. The first is from the Association of Schools of Social Work and International Federation of Social Workers (2004 cited in Horner 2009: 3), which claims:

> The social work profession promotes social change, problem solving in human relationships and the empowerment and liberation of people to enhance well-being. Utilizing theories of human behaviour and social systems, social work intervenes at the points where people interact with their environments. Principles of human rights and social justice are fundamental to social work.

Another definition is provided by Jacqui Smith, a former Labour Home Secretary, who saw the role and function of social work somewhat differently. She says:

> Social work is a very practical job. It is about protecting people and changing their lives, not about being able to give a fluent and theoretical explanation about why they got into difficulties in the first place. (Social work training must equip) social workers to demonstrate the practical application of skills and knowledge and their ability to solve problems and provide hope for people relying on their support.
>
> (DH 2002b)

Reflective exercise

- What do you think are the key similarities and differences between the opinions expressed in these two statements?
- Which of these statements fits more closely and coherently with your own understanding of social work?
- Which statement do you prefer?
- Why do you prefer it?

Both statements highlight the importance of social work being knowledge-based and make it clear that the function of social work is to help and support those who need services. Jacqui Smith's view focuses on the importance of the practical application of this knowledge and uses some interesting language around the role of social work being to 'solve problems and provide hope' for people who use services. There are some differences in emphasis in relation to the importance of the practical application within the IFSW definition but they also talk about the importance of problem-solving and enhancing well-being.

There are, however, a number of crucial differences, and these are important because they lead us back to the sources of social work and reflect the diversity of the origins of social work. Both definitions emphasize change but in the IFSW version the key term is 'social change' while Jacqui Smith's summation talks about changing people's lives. In this latter definition it is the people (or their lives) that have to change while in the IFSW definition it is the role of the social work profession to promote social change. In other words, intervention depends on where the problem is located, whether social work operates to address the inequalities of society that need to be challenged on a political or structural level, or within the lives of people who need services, which can be improved by social work intervention at the level of the individual or family.

A further fundamental difference is that the IFSW places the principles of rights, empowerment and social justice at the forefront of their definition while the statement by Jacqui Smith, without any overt reference to social work values, makes social work practice all sound rather simple and straightforward. Of course it's not a matter of one or the other but the ethical challenges that practitioners are facing are often more complicated than outsiders appreciate.

> Most decisions in social work involve a complex interaction of ethical, political, technical and legal issues which are all interconnected. Our values will influence how we interpret the law.
>
> (Banks 2006: 12)

Within the media, the most common representation of social work is that of a statutory social worker who has either misused her power to intervene inappropriately or who has failed to intervene when she should have done. While it is easy enough to look in hindsight at what should have happened and to find a scapegoat to blame for the terrible things that can happen to children and vulnerable adults, these tragedies do highlight the need for social workers to acknowledge the power they possess and to acquire the skills and reflective capacity to sensitively balance the care and control components of the job. This tension can lead to limited public understanding of the social worker's remit and a lack of appreciation of the difficulty of the decisions that sometimes have to be made in respect of children or adults who may be vulnerable.

> It is the fact of social work's potency – being replete with assumed and ascribed power – that, to a large degree, explains its contested and controversial identity.
>
> (Horner 2009: 5)

One way of trying to understand these issues is to look in a bit more detail at the origins of social work and how it has developed into the collection of knowledge, skills and values that inform social work as it is practised today.

Social work as an identifiable concept can arguably be traced back to the inception of the Charity Organisation Society (COS) which as:

> … the first organisation to which social work today can trace a direct lineage, was called into being and given the task of coordinating both voluntary associational charity and the state provision under the Poor Laws.
>
> (Pierson 2011: 17)

This assertion already contains the seeds of further questions, such as the issue of the relationship between social work, charitable organizations and the state. While this appears to be a modern conundrum in view of cuts to welfare services and the promotion of the Big Society and the assumption of individual responsibility (Koubel and Bungay 2012) rather than depending on the state to provide, the question of who should receive services and who should provide them has been a contested area for centuries.

A brief historical overview may help to clarify why and how social work came into being. In order to make sense of what social work means, we have to draw some links with the way in which society has developed and the beliefs and ideas that informed people's attitudes and values in relation to work with vulnerable or disadvantaged individuals.

The role of the Poor Laws is particularly interesting, as these provided the main source of support for people beyond any provided by their own families or community.

This was the role of the parishes, which were charged under the Poor Law with the provision of 'material relief' in cash or kind to people who would otherwise be completely destitute. From early times there was a relationship between religion and assistance or alms, and in the normally settled and largely unchanging medieval society where everyone knew their place, there was an expectation that those with money and status owed some kind of obligation to those who for whatever reason were unable to support themselves. However, the reasons for the formation of the original Elizabethan Poor Law in 1601 (and perhaps even more so with the later amendment of the Poor Law in 1834) could be seen to have been the fear of challenge, if not revolt, by the poorest classes just as much as a commitment to the ideal of Christian charity and help for the needy (Pierson 2011).

With the advent of the Industrial Revolution, individuals and families flocked in great numbers from the countryside to the towns and cities. There, it was believed, there were opportunities to achieve through paid employment a standard of living that would have been impossible to aspire to in their small agriculturally based communities. The Industrial Revolution was undoubtedly a time of great development and change in the United Kingdom, and not a few individuals made great fortunes from the industry and ideas generated by these changes. However, for others this mass migration to urban centres had a number of unfortunate consequences.

The first of these was that individuals who had impairments or disadvantages could not compete in situations of fierce competition within the marketplace. As people flooded into the new conurbations such as Manchester, Liverpool and London, rural communities became fragmented and disconnected. The parishes that had supported the few older and disabled people in their midst were no longer able to do so. Additionally there was a strong belief among industrialists and politicians, who were the people who held the power in the towns, that the only way this revolution could work (to their advantage) would be to limit to the absolute minimum any intervention by the state. This was called *laissez-faire,* which basically means let it be, don't interfere.

> Thus the picture of the early nineteenth century is of a piece: rapid movement from country to city, poorly built urban housing, poor sanitation and the doctrine of laissez-faire all arrived, historically speaking, at the same time.
> (Pierson 2011: 7)

The concept of laissez-faire also led to a hardening of attitudes towards those who were for any reason unable to compete in this harsh new world. In 1834 the Poor Law Amendment Act was passed, limiting the provision of 'outdoor relief', i.e. the benefits that it had been possible for people to receive in order for them to remain living in the community. The notion of 'less eligibility' was introduced to ensure that no one could live better on 'relief' than they could even on the lowest of wages. In addition to the hardship this caused many people, there was a deliberate attempt to deter people from even applying for help by the use of the weapons of shame and stigma, so that in addition to their travails, people were made to feel guilty about even asking for help.

Reflective exercise

- Some of the concepts we have been talking about may have struck a chord with you. Think about the way society now regards people who require help or assistance and try to answer as honestly as you can the following questions:
    - Do you think as a society we still have the concept of the 'deserving' and the 'undeserving' claimant for benefits and services?
    - Do you think notions of shame and stigma still affect people who access services, perhaps particularly social services?
    - Going back to the earlier discussion about human rights and social work values, do you think everyone should be entitled to services if they need them?
    - Should people have to meet some kind of eligibility criteria and if so how do you think this should be decided?
    - Who, at the end of the day, should pay for these services?

These questions also challenged individuals in the nineteenth century who were thinking about those people who were unable to support themselves. Charitable societies were set up to address the problems of those who were seen to be indigent through no fault of their own; these often included an awareness of the plight particularly of orphaned children, and sometimes those who were severely and visibly disabled were cared for in hospitals. Others who could not provide for themselves or their family (through age or illness, for example) had to enter the work houses or the poor houses as they were known in Scotland. Conditions were extremely harsh, and in addition this inability to remain independent was seen as a source of stigma and shame.

However, the struggle to survive within the unmitigated market economy of the industrial revolution was so severe that it did lead to an increase in awareness among some elements of the emerging Victorian middle classes. Authors such as Charles Dickens and other philanthropists highlighted the plight of the 'poor and needy'. Although there was a general belief that those who fell into poverty were usually themselves to blame through their own weakness of character and intemperate habits, there was also a dawning recognition that for some the conditions of the industrial society contributed at least partly to their plight. Poor housing and sanitation, for example, led to many illnesses that made people unable to work, and within some quarters of society, there was a recognition that there were people who through no fault of their own might be in need of external assistance to acquire the Victorian virtues of thrift, individual responsibility and sober behaviour (Pierson 2011).

The Society for the Organisation of Charitable Relief and Repressing Mendacity [sic] was founded in 1869. It was soon to change its name to the Charity Organisation Society, the organization that could be said to have 'invented' the key philosophies and principles that underpin modern-day social work. Often it was remarkable individuals who led the reforms at this time, and the Head of this innovation, Octavia Hill, was no exception. She believed that people who required assistance should be valued and respected, and that a supportive and empathic relationship could aid them in changing

their behaviour and improving their circumstances. She recognized the impact of poor housing and the damaging effects of poverty, although she did not necessarily see it as a relevant part of the help provided. She set up a system of regular lady visitors who went to see the families to help them with issues of budgeting, child care, and so on. They became a contact outside the family who would be there to help and support people – so long as they also made some effort to help themselves.

The role of the Charity Organisation Society (COS) visitors was to form an empathic, caring relationship with those they visited on a regular basis but also to carry out assessments as to whether, with their support, these families and individuals could be helped to acquire the important Christian values of honesty, sobriety, self-reliance and hard work. Some small amount of money or other material support might be made available if the people could demonstrate their commitment to these values but in general the COS did not see its remit as the provision of 'relief' or benefits. However, it was believed that these empathic and supportive relationships could help people change their ways and aspire to these qualities. This process was called 'casework', and the values underpinning it included ideas of active citizenship and the view that people should be seen as more than merely economic units of production.

Reflective exercise

- Does this sound to you like the kind of issues and values that social workers might be interested in today?
- Are the processes familiar from your understanding of social work?
- Are there aspects of the way this was set up that you would disagree with?
- What other ideals and values do you think social workers use today?

If we look back at the original definitions of social work, it is possible to see that another facet of social work is the recognition of the changes and developments that society needs to undergo. Although the COS could acknowledge the influence of poverty and the environment, they focused their interventions on the needs of individuals and families. However, among other people at the time, such as T. H. Green who lectured at Oxford University and influenced the emerging ideas of the Liberal Party (and later the Labour Party), the belief grew that the state had a responsibility towards its populace. He and other philanthropists highlighted the necessity not simply for people to change their ways but for the place of social reform in promoting the well-being, not just of those who needed assistance but of the whole population.

Other groups such as the workers' guilds, particularly in the North of England, located the community rather than the state or the individual as the target for intervention, and many provided assistance within their local communities. In other parts of the country the rise of the settlement societies, where individual workers would go to live among the poorest members of society to enable communities to support and enable each other through educational, social and cultural events, led to another way of looking at social work which later became known as community work (Healy 2012).

At this stage we can start to see a number of threads which are being braided together to form the different elements that make up social work today. The work of the COS with its casework and emphasis on the importance of the 'therapeutic' relationship, individual home visits, assessment of needs and the provision of help and support (not necessarily material) to facilitate personal change or growth reflects pretty closely the processes of social work today.

The idea of targeting neighbourhoods or communities as both a point of intervention and a potential source of support is one that has been adopted by social work, and in the early days of integrated social work community workers were very often qualified social workers who were employed by the local authority to carry out work with the community. While today this function has largely been ceded to the independent and voluntary sectors, it remains an important component of social work and we will look at it further when we look at the modernization of social work in Chapter 2.

Ideals of citizenship and social reform also fed in to the development of social work and this led to the recognition of social justice as a legitimate concern for social workers and a key principle which would inform social work activity. This was later taken up by the cause of 'radical social work' (Bailey and Brake 1975) and there are still campaigners who argue that the real purpose of social work should be to support the changes in society that are needed to promote equality and combat the disadvantage that many users of social work services experience rather than to engage in 'casework' with individuals and families. While these views have been instrumental in transforming the perception of receiving services for some people in society, for many the alleviation of pressing practical difficulties remains a more urgent focus (Coulshed and Orme 2012).

This variety of views around the role of social work led to the recognition in the early part of the twentieth century that social work was not a simple matter of 'helping out' by kindly but uninformed middle-class ladies, but could more accurately be seen as a skilled and complex activity which was based on a range of knowledge, skills and values that should and could be taught to potential members of this group of workers. The COS continued to develop their notion of social work through setting up the first social work training programme at the School of Sociology in London, soon to be renamed the London School of Economics.

Many aspects of this method of training would be familiar to social work students today. These included the construction of a 'scientific' knowledge base for social work which borrowed eclectically from other scientific disciplines, including the development of ideas from America about a psychological basis for casework, and an emphasis on practice placements to support the development of a distinct set of skills and values. Ultimately, though, social work, as today, was seen to be about people and their engagement with an individual social worker or practitioner at the point where a personal problem intersects with the concerns of society.

> Social work can be defined as an exercise in engaging with people to facilitate the telling of their story around a particular problem relating to their wellbeing, that is to articulate what has happened to them and why. Its interactive base makes social work *a relational profession.*
>
> (Dominelli 2004: 5, original italics)

The Charity Organisation Society (COS) believed strongly in the importance of the individual relationship between the practitioner and the service users, and this is still very much a keystone of social work today. Nevertheless, it is that pesky relationship between social work and society that keeps undermining the idea that it is simply a matter of a meeting of two minds with the aim of one helping the other. Those who supported the aims and objectives of COS realized that beyond the alleviation of individual problems social work could provide a moral impetus for the improvement of society. Influential socialists like Beatrice and Stanley Webb who supported the universal approach to reducing poverty also understood the importance of using social work as a stabilizing influence (Gray and Webb 2010).

These arguments, about the provision of welfare, about who should receive it and how it should be funded, continue today. In addition to the growing recognition of poverty and disadvantage that was becoming apparent as a result of the tumultuous changes wrought by the Industrial Revolution, concern about the poor physical state of volunteers involved in the Boer War (1899–1902) led to a number of significant pieces of legislation giving individuals rights in relation to school meals and medical inspection within the limited state education system (Powell and Hewitt 2002). In 1908, the Liberal Party introduced the Old Age Pensions Act, bringing in the first non-contributory benefit for older people who had no means of support. The early part of the twentieth century also saw the emergence of the Labour Party and thus an increase in the influence of those who believed that the state should actively intervene to alleviate poverty and disadvantage, potentially forming the basis for the development after the Second World War of the welfare state.

The welfare state

Some elements of the welfare state such as the universal provision of free health and education services are so inculcated into the way we live that it is hard to imagine a time when they weren't there. Now we may argue about the cost, quality and extent of such services but it is important to remember that these benefits 'available to all' are fairly recent phenomena. Looking back as far as medieval times there had been some acknowledgement through the Poor Laws that the state should assume some responsibility for the 'impotent poor' (people who were 'aged, blind, chronically sick and lunatics' as classified by the Poor Law of 1601) but charitable organizations like churches and hospitals supplemented this meagre provision around health, education and welfare, and as we have seen from the earlier discussion about the views and values of society there was no consensus that all people should have access to services.

Wars such as the Boer War and the Second World War seem to have exerted particular influence in terms of the development of welfare. After the grinding poverty and unemployment characterized by the Depression of the 1930s, the physical condition of recruits once again raised anxieties about their fitness to fight when the call came at the start of the Second World War in 1939. For a number of reasons, the end of the war in 1945 led to a radical departure in our understanding of the meaning of the role of welfare in society and the ways in which a range of services were provided, not least the role and remit of social work.

Reflective exercise

- Why do you think the experience of being at war led to the development of the welfare state?
- What do you know about the key ideas and principles of the welfare state?
- How do you think this changed our understanding of social work and particularly the role and remit of social work with adults?

There is an underlying perception that as a result of the Second World War the population felt that they had undergone a common experience. Men and women from different sectors within society had found themselves in close contact with one another and formed friendships within the army and through war work that would have been impossible in the class-bound structures that operated prior to 1939. Many people had been injured in the war, both men in the army and women at home, so that it was felt that these people, disabled through bombing, were owed something by the nation they had sacrificed themselves for. Children had been evacuated and home-lessness was a common result of the aerial bombardment. There was a recognition that the war had been won through the collective efforts of people working together, and a feeling that collective effort could, as it had done in winning the war, have the potential to bring about the changes that could improve society and make it 'a land fit for heroes'. It also brought another dimension to the debate about whether and how much the state should be involved in the provision of welfare benefits, including health, social work and social care (Blakemore 2003).

The Labour Government elected in 1945 at the very end of the war heralded a period of rapid and intense change in British society. At any time (as we shall see later when we look at the modernization of social work) there is a close relationship between the political beliefs or *ideology* of the party in power and the social policies they choose to implement (Bochel *et al*. 2009). Building on some of the legislation introduced in the earlier part of the century by the Liberal Party but with a strong commitment to the ideals of equity and fairness for all its citizens, the views of the Labour Party formed an ideological basis for the implementation of the legislation and policies and practices that underpinned what came to be known as the welfare state.

Enduring notions of the 'deserving' and the 'undeserving' poor had not been completely eradicated by the war. Not everyone agreed that it should be the responsibility of the state to provide for all the welfare needs of its citizens, and even at the time there were those such as a number of Conservative politicians who expressed concerns that such a system could lead to an overarching level of control by the state and the potential for increased dependency on the state. Lord Beveridge himself, the author of the Beveridge Report which underpinned the changes that were to take place in Britain after the end of the war and who produced the Beveridge Report in 1942, actually preferred the term *welfare system* to *welfare state* as the former term suggested that although 'a structure of welfare services and social security exists, … it is not provided or organised solely by government' (Blakemore 2003: 275).

Nevertheless there was an unprecedented level of consensus that what Beveridge called the 'five evil giants' that were held to be responsible for the ills of society could and should be tackled through a system of government intervention. He called these 'evil giants' disease, squalor, idleness, ignorance and want (Alcock *et al.* 2003). Even these terms now sound old-fashioned and even archaic. But if they are restated as chronic illness and disability, poor housing, unemployment, lack of education and poverty, we can see that they are still very much part of the picture of our present society, and they are issues that loom large in the perspective of social workers trying to engage with people who still experience many of these areas of disadvantage.

In the latter part of the 1940s legislation was introduced to deal with all of these elements as part of the wider vision of universal provision for everyone. The idea was that people paid in (through National Insurance) when they could afford it and then were entitled to payments through unemployment or sickness benefit if they needed it. This entitlement or right to benefit was the really radical idea, and removed from many the sense of shame or supplication that had been a key fixture of previous welfare programmes. The Beveridge Report effectively reversed the idea of 'less eligibility' so beloved of the Poor Laws by proclaiming that the payments, although never over-generous, should be sufficient to take account of food, clothing, fuel, light, rent and household sundries (Kennett 2001). Although the link to National Insurance contributions meant that not everyone was entitled to these benefits, with women and older people particularly unlikely to be in employment at the time, this was a genuine attempt to develop 'a new birthright, a part of citizenship not a deprivation of it, paid as of right' (Powell and Hewitt 2002: 38) for people anywhere in the country who needed to claim support from the state.

Legislation introduced the concept of free, accessible health and education for all. In relation to social work, the introduction of the National Assistance Act in 1948 brought together perhaps for the first time recognition of the state's responsibilities towards a group who could be loosely defined as 'vulnerable adults' (Wilson *et al.* 2008). Under section 47 of this Act, power was given to the local authority to provide services to promote the welfare of adults, i.e. in the words of the Act those individuals

> aged 18 or over who are blind, deaf, dumb or who suffer from mental disorder of any description and other persons who are substantially and permanently handicapped by illness, injury or congenital deformity or any such disabilities as may be prescribed.

Once again the language used may feel uncomfortable to modern ears but in many ways this Act paved the way for many of the changes that have informed the development of social work policy and practice in relation to older and disabled adults over the next 50 years. Services such as meals on wheels and residential care for older people, alongside day centres, home adaptations and hospitals for disabled people and access to psychiatrists and asylums for those with mental health problems, meant that people who needed assistance were not left to struggle alone. Help was available.