



# Contents

**List of Figures** *xiv*

**Acknowledgements** *xv*

**Preface** *xvii*

- 1 Theory for practice** 1
- Introduction 1
  - Why practice needs theory 2
  - What is theory? 4
  - Theory for practice 5
  - Organisation of theory 12
  - Using theory 13
  - Conclusion 15

## **Part I Social Work Processes**

- 2 Social work processes: assessment** 21
- Introduction 21
  - Assessment theories 22
  - Assessment models 24
  - Assessment as CORE 30
  - Assessment of risk 32
  - Assessment of need 35
  - Assessments and oppression 37
  - User participation in assessment 39
  - Multi-professional assessment 40
  - Conclusion 41

- 3 Social work processes: advocacy and partnership** 45  
Introduction 45  
Systems theory 46  
User participation 49  
Empowerment 55  
Advocacy 57  
Negotiating 61  
Conclusion 63
- 4 Social work processes: communication** 66  
Introduction 66  
Interviewing 67  
Skills in interviewing 70  
Responding 76  
Barriers to communication 81  
Conclusion 84
- 5 Social work processes: reflection and review** 88  
Reflective practice 88  
Review 91  
Implications of review for practice 95  
Ending interventions 96  
Conclusion 100

## Part II Methods of Intervention

- 6 Counselling** 107  
Context 107  
Developments in social work 107  
The psychosocial approach as a method of understanding 108  
Framework for understanding the psychosocial approach 109  
Psychosocial techniques 112  
Criticisms of the psychosocial approach 112

Some benefits of the psychosocial approach	114
Counselling in social work	115
Client-centred counselling	116
Egan's systematic helping	117
Incorporating diversity	119
Narrative approaches	122
Conclusion	124

<b>7</b>	<b>Crisis interventions</b>	128
	Introduction	128
	What do we mean by 'crisis'?	129
	Framework for understanding crisis intervention	133
	Techniques of crisis intervention	135
	Bereavement and loss	139
	Coping with catastrophe	143
	Prevention	145
	Conclusion	147

<b>8</b>	<b>Problem solving practice</b>	152
	Introduction	152
	Task-centred practice	152
	The benefits of undertaking task-centred practice	161
	Solution-focused practice	163
	The limitations of using problem solving practice	167
	Conclusion	169

<b>9</b>	<b>Cognitive-behavioural work</b>	174
	Introduction	174
	Background	174
	Four types of learning	175
	Some techniques and procedures	179
	The growth of cognitive-behaviour therapy	180
	Motivational interviewing	182
	Pro-social modelling	185

Overview for understanding behavioural approaches 186  
Critique 186  
Conclusion 190

## **Part III Contexts of Intervention**

- 10 Working with children and families** 195  
Introduction 195  
Understanding families 196  
Working with families 201  
Response to criticisms 202  
Family violence 203  
Framework for understanding family and couples work 205  
Families and children 206  
Child protection 210  
Conclusion 211
- 11 Working with adults** 216  
Introduction 216  
Community care and care management 217  
Care Programme Approach (CPA) 220  
Single shared assessment 221  
Person-centred planning 223  
Personalisation 224  
Multi-professional teamwork 226  
Working with carers 228  
'Just' practice 229  
Conclusion 231
- 12 Working with groups** 235  
Introduction 235  
What is different about groupwork? 235  
Groups and change 236  
Types and purposes of groups 240

Planning the group	242
Stages of group development and the worker's tasks	243
Handling difficulties in groups	247
Recording	250
Conclusion	251

## **13 Working with communities** 254

Introduction	254
Community	254
Community in social work	256
Tasks and skills	259
Community care	262
Community development revisited	265
Conclusion	267

**Conclusion** 271

**References** 273

**Index** 291

# Theory for practice

## CHAPTER OVERVIEW

- Why practice needs theory
- What is theory?
- Theories for, of and from practice
- Organisation of theory
- Using theory

## Introduction

For social work there is a continuing tension between practice and theory. This tension exists both *within* social work and *about* social work. At times, students and practitioners have protested that it was necessary to forget theory once in practice. The argument has been that theory is abstract, inaccessible, and that it reduces spontaneity in helping people. Using theory implied distance and objectivity which contrasted with feelings and the living reality of social work encounters. As such it was seen to be a stumbling-block to developing individual style, and the most that could be hoped for was that students would admit that they might subconsciously be using theory that they had absorbed during their education and training.

Other discussions that have taken place, mainly among academics, are that social work has suffered because it has been seen to be theory-less or atheoretical. Because social work is about practice it is seen to be merely the appliance of other social sciences (Orme, 2000a). While this might be an academic debate, in more ways than one, it is important because social work's uneasy relationship with theory has made it vulnerable, in many respects. Without a theory base, policy makers could argue that anyone can do social work, or that social work was not necessary. Or they could introduce policies and practices, such as care management, that sought to displace social work to the extent that it was renamed social care. Also debates about qualifying levels for the social work

profession have reflected the opinion of some that there is no need for theory and/or research in social work. However for those for whom social work exists, client/service users, the lack of theory can constitute a threat to the quality of services provided.

In a text about social work practice therefore it is vital that we consider the role of theory. This is not because theory should prescribe how social work must be practised. As Ayre and Barrett (2003) argue theory is not deeper and stronger than practice but is intermeshed with it within a reflexive web of influences. Whichever way we look at it, the use of theory is the hallmark of a good practitioner.

## Why practice needs theory

Information gathered when working in social situations can be interpreted in many different ways, depending on which theoretical approach is used. It leads to different kinds of knowledge. Early social work approaches, based on a medical model, assumed certainties; that if you are dealing with A, you can intervene with B and that will secure an acceptable outcome C. However it became apparent that using approach B did not always lead to the same outcome – and that approaches D, E and/or Z might be equally effective.

In a developing climate of managerialism this led to negative assumptions about social work: that nothing worked. Workers were scrutinised using performance indicators that included the number of service users or problems dealt with, the time taken to respond to a referral (or to prepare a report) or other calculations of throughput and output. The management ‘outcome’ was often that the required form has been completed rather than the particular problem relieved. This was exacerbated by the use of technology. Parton (2008) argues that the storage of data in information systems has implications for theory for social work. The need for fast moving accumulation of ‘byte’ sized databases might negate the need for theories that prioritise the relational nature of social work: those that are ‘slow, detached and reflective?’ (Parton, 2008, p. 265). He recognises that practitioners have to operate in an ‘informational context’ but argues for the relational aspects of social work theory.

However this begs the question of ‘what works?’ or what is thought to be important. The quality of the intervention, what has

occurred or might occur between the worker and the service user while the form is being completed or the computer programme completed, was not a priority as reflected by national standards for probation practice, competences for care management or definitions of 'best value'.

The question 'what works?' led to a more productive approach to practice and theory. Managers and policy makers required an evidence base for particular social work interventions. This was however still accompanied by a managerialist approach which wanted to use the evidence base to ensure 'best practice', however this was defined. The search for the 'golden bullet' or the A+B=C formula to interventions was still the Holy Grail.

### Theory, practice and research

There is now universal acceptance that a research base for social work is necessary. A number of initiatives focus on ways of encouraging social workers to utilise research findings to inform their practice. These initiatives have been supported by the setting up of the Social Care Institute for Excellence (Scie) in England (and its sister institution the Institute of Research and Innovation in Social Services (IRISS) in Scotland) with a remit to ensure 'knowledge transfer', that is, to gather research findings, evaluate them and disseminate them to the social care workforce. Other examples of support for a research base for social work include Research in Practice for both children and adults based at Dartington.

An evidence-based approach to practice, first described in criminal justice as the 'what works' approach (McGuire, 1995) is now accepted in social work. However the terms 'evidence-based' and 'what works' are contentious (Sheldon and Chilvers, 2001). Debates about the nature of the research, appropriate methodologies, ethical issues and the impact of research are central to social work, both in academia and in practice (Orme and Shemmings, 2010). Parton (2000) suggests that crucial to discussions about an evidence base for social work is an understanding of whether evidence of good practice refers to the way problems can be solved, or the effectiveness of the organisation.

Fears that emphasis on theory curtails the spontaneity and freedom of practitioners are real. But approaches to research that merely describe findings and assume that these are the answer to practice dilemmas are not good research, and do not constitute theory. This does not mean that practitioners can adopt an

'anything goes' approach. In research, as in practice, workers have to be reflexive (Taylor and White, 2000). That is, they do not accept information uncritically and they must be able to test out ideas in the light of practice experience. This has been crucial in the development of good research-informed practice. It has also contributed to approaches to research that involve practitioners and service users in research, acknowledging that the best way to understand situations is to ascertain the views of those in the situation (Orme and Shemmings, 2010). While such approaches are desirable they are not straightforward, not least because they challenge the power of both the practitioner and the researcher (Orme, 2000b).

## What is theory?

Educationalists have debated at length competing positions regarding social reality and the production of knowledge, in other words, theory (for discussion see Rojek, 1986; Howe, 1987). Trevithick argues that the difference between theory and what she calls factual and practical knowledge (2005a, p. 2) is that theory goes beyond description, saying how things are, to providing explanations. Put another way, theory provides a framework for understanding a clustering of ideas that attempt to explain reality in a self-conscious way (Stepney and Ford, 2000, p. viii). This self-conscious explanation involves 'making sense' of what is going on by observing, describing, explaining, predicting and intervening (Howe, 2000, p. 81). It is the imperative to explain that distinguishes a theory, which seeks to explain *why*; from a model, which seeks to describe *how* factors interact; or a method which involves formal written accounts of how to do the job (Stepney and Ford, 2000). Teater (2010) suggests that as a hypothesis, a theory is also an idea or prediction about what can or might happen in certain situations given certain circumstances.

However, as has already been stated, accepting a theoretical base for social work does not mean that there is only one explanation or perspective for what is going on or what might happen. Using theory to make sense of situations does help to give some pointers to what might happen, how people might behave and this, in turn, can lead to guidelines on what to do in certain situations but this is not the end of the process. Academics and practitioners with particular theoretical perspectives will observe, describe, explain,

predict in different ways and this leads to different recommendations on how to intervene. While for some this lack of certainty might seem unhelpful, Howe suggests that it should be embraced positively: 'Rather than bemoan the number and range of theories the practitioner needs to acknowledge that diversity reflects the subtlety and complexity of the human condition' (Howe, 2000, p. 83).

Also there is no need to assume that, because there are different perspectives, these are necessarily contradictory rather than complementary. The 'gladiatorial paradigm', that is, the notion that social work theories compete and cannot be integrated since they offer opposing interpretations of social reality, ignores the commonalities and interdependence of explanations of how human beings shape, and are shaped by, their internal and external worlds. Moreover it ignores ambiguity, uncertainty and doubt which are features of the complexity of social work practice (Parton, 2000). This unpredictability is also important because it requires practitioners to think about what they are doing, and how what they are doing influences the situation. Outcomes in social work are unpredictable and what we learn from each intervention can help refine theories. This is why practitioner and service user knowledge is vital for the development of theory.

Either/or arguments, such as insisting that counsellors must be either Rogerian or behaviourist, or that social workers are either radical or traditional in their approach, fail to see the underlying continuities that hold together such apparently diverse positions. Most theories have elements in common as well as elements in opposition. The eclectic practitioner, who claims to take the 'best' from different theories, actually holds a consistent view of people and their situations (Howe, 1992; Payne, 1998). Purists might attack this seemingly undisciplined and incoherent way of working; yet this is the way in which practice is generally conducted, not least because it reflects the complexity of situations in which people live and social workers intervene. Such debates highlight the range of theoretical perspectives upon which social work draws, and demonstrate that social work is certainly not atheoretical.

## **Theory for practice**

Since there are competing explanations for the situations social workers meet, it is not surprising that there is little agreement

about the nature of theory that is required to intervene in those situations. Siporin (1975), for example, believed that social workers needed foundation knowledge (personality theory, social theory and social policy theory) that would contribute to an understanding of the person in society. Jones (1996) on the other hand criticised social work academics' selectivity in identifying and privileging certain theories or, in his words, 'seeing (theory) as a resource to be plundered and pillaged' (Jones, 1996, p. 203).

As well as different uses of theory there are different understandings of the meaning of theory. Pilalis (1986), for example, studied how students understood theory and identified six 'explanations'.

- Theory as general rules or laws testable against observable evidence.
- Theory as a probability, a hypothesis or a speculative explanation subject to research.
- Theory as a system of principles which help us to understand events more clearly.
- Theory as underlying ideological and value bases of, say, psychological, sociological or political ideas.
- Theory as distinguished from practice ('this is theory rather than practice').
- Theory as idealism and representing unattainable goals ('that is all very well in theory').

In some ways theory is all of these things. A more common way to classify theory is to distinguish between 'levels' of theory.

- *Grand theories* or narratives are those which are now well established and were all inclusive accounts of human behaviour. Examples include Freudian or Marxist explanations of what motivates human nature.
- *Mid-range theories* are not so comprehensive; they address particular phenomena such as loss, attachment, delinquency and so on and try to explain their causes and consequences. Such explanations can be offered within Marxian or Freudian understandings of the world (see Howe, 1987, for examples).
- *Micro theories* describe and explain particular practices such as theories of communication that can be used in all social work interventions.

Healy (2005) classifies theory somewhat differently. She identifies the 'dominant discourses' for social work as being medicine, economics and law. These help describe the world in which social

work operates but no one theory is the right one. The theories which underpin social work interventions she describes as ‘service discourses’. In describing these, she analyses the different approaches to social work to see whether they are drawing on sociological or psychological (psy) theories.

This group of theories describes theories *for* social work. That is, the relevant social sciences are applied to practice. However practice is more than a ‘rational-technical’ activity (Parton, 2000; Taylor and White, 2000) of applying knowledge from other disciplines to help social workers decide what to do.

### Theories of practice

Few of the grand or underpinning theories for social work include understandings of, for example, what is social work and who is it for. The development of social policy did turn the spotlight on social work and its place in health and welfare provision but not always in a helpful way. For example, criticisms of social work led to policy research which introduced care management and community care, which are seen by some to have led to the demise of social work (Postle, 2001).

Other theories of practice have come from quite stringent critics but have had a more positive influence on social work practice. The radical critique which started in the 1970s with criticisms from both Marxism (Bailey and Brake, 1975) and feminism (see Orme, 2009, for discussion) led to what Healy (2005) has called ‘alternative service discourses’. These discourses include changes which involve attention to consumer rights, empowerment, anti-oppressive practice and service user involvement.

Despite a decline in the 1980s, the ‘radical kernel’ (Ferguson and Woodward, 2009) in social work continues and is sometimes described as ‘critical social work’ or ‘critical practice’. As ever in social work these phrases have a number of uses. For Cree and Myers (2008, pp. 9–10) critical practice is a way of approaching practice drawing on a particular value base that acknowledges structural issues. Practitioners should be part of critical thinking which in turn leads to critical action. For Ferguson and Woodward (2009) the emphasis is more on the recognition of the structural factors, such as poverty, that impinge on the lives of service users and create social problems. They point out that this approach has led to critiques globally of such issues as the effects of managerialism on social work and the treatment of asylum seekers. Their

work with practitioners from both statutory and voluntary agencies has led them to conclude that radical social work includes:

- radical practice as retaining a commitment to good practice;
  - radical practice as ‘guerrilla warfare’ and small scale resistance;
  - radical practice as working alongside service users and carers;
  - radical practice as collective activity and political campaigning.
- (Woodward and Ferguson. 2009, p. 153)

While radical practice incorporates the principles of feminism, ant-racism and anti-oppressive practice and the practice of working with services users and carers, each of these strands of theorising and practice have also developed in their own right. For example, feminism has not only recognised the potential for oppression of women within social work (Dominelli, 2002a; White, 2006) but has also sought to identify how feminist theory can inform social work practice (Orme, 2001a; 2009). This work has led to feminists, and pro-feminist men, writing how feminist practice also has implications for working with men (Christie, 2001; Scourfield, 2002; Featherstone, 2003; Day *et al.*, 2009).

Developments in radical and/or critical social work have been driven by critiques of how structural factors affect the lives of service users that arise out of political theories, such as Marxism. However, in recent years critiques of practice have also been influenced by theoretical discussions associated with postmodernism (Fawcett, 2010). Postmodernism focuses on how and why we seek for explanations or underlying causes, rather than what those causes might be. Hence postmodern notions of practice theories for social work would be ‘a kaleidoscope of ideas, research findings, argument, practice wisdom, values and critical speculation, whose coherence would lie in relationships between the different parts, and between them and the reader’s experience’ (Tuson, 1996, p. 70). These also recognise that service users and carers experience multiple oppressions because they have multiple ‘identities’; they can be male or female; white or black; non-disabled or disabled; experience mental health problems and be of all ages (Featherstone and Fawcett, 1995).

The notion of critical reflection (discussed in Chapter 5) has contributed to the synthesis of postmodern critiques and theory building in social work. This synthesis has helped to bring together theory and practice in a way that is meaningful to practitioners but has also led to the development of emancipatory or

transformational theory (Payne 1998). As Fook (2002) explains, part of the resistance to theory is that there has been an inexorable link between knowledge and power. Postmodernism questions the supremacy of professional knowledge and thus significantly undermines the professions' claim to dominance (Fook 2002, p. 37).

This might seem ironic in that, so far, this chapter has argued for developing a theory base as part of the recognition of something called 'social work'. But this depends on a particular use of knowledge by professionals. Schon (1987) argues that technical knowledge helps professionals only to a limited extent. Reflecting on the different contributions to any social work interaction involves identifying the limits of existing theories and developing new ones. Hence a reflexive stance requires practitioners to 'reflect in action' and demonstrate or construct accounts of what they have done, in what order and the outcomes; the values, strategies and assumptions that make up 'theories' in action (Schon, 1987). (The difference in the use of the terms reflexive and reflective is discussed further in Chapter 5.) It is this that holds the potential for change (Fook, 2002), not only in professionals' perceptions of the situation that they are dealing with, but also in theories that inform the situation, the theories *for* and *of* practice.

However a truly reflexive stance, a one that develops theory from practice, has to recognise that explanations of what is happening in social work interactions are not the sole prerogative of practitioners. Any understanding has to incorporate the contribution to knowledge from users and carers. Postmodernism questions assumptions about 'legitimate' knowledge. Often legitimacy is granted because of the way things are known, who knows them and how knowledge is conveyed to others (Fook, 2002). In the past, the knowledge, experience and views of service users have been treated as inauthentic or subsidiary. This contributed to the oppression of service users by the processes and practices of social work. Practice informed by user and carer perspectives is emancipatory and reflects the anti-oppressive value base of social work.

The potential of critical reflection is not that it overthrows, or throws out, all other understandings of theory, but that it challenges assumptions that only certain theories are valid. It does not mean that only one form of knowledge, that is either professional knowledge or service user knowledge, is valid; it accepts that both have a contribution to make to understanding situations, and therefore constructing theory about them. This is crucial in the

process of undertaking social work assessments, as we shall see in the next chapter.

### Theories from practice

Theory that is implicit (Evans, 1976), alternatively called practice theory or practice wisdom, makes assumptions about what social workers do and how they make sense of their experiences. This explains in an organised way how social workers may usefully act, using their knowledge of the social world.

The educationalist/community worker Freire (1972) calls the ability to think and do, 'praxis', a Marxist term that has been explored further by feminist scholarship (Stanley and Wise, 1990). The notion of praxis encourages people to perceive, interpret, criticise and transform the world around them. In social work a lot of time is spent in giving tangible, immediate, practical help, but this does not invalidate attempts to look beyond the obvious to ensure that experiences of inequality and oppression are revealed and challenged. Underpinning praxis is the notion that it is not enough to study the world; the aim is to change it. Hence we have come full circle in exploring the relationship between theory and practice.

England (1986) argues that a social worker's 'practice knowledge' involves a unique understanding of the people who constitute the clients, 'the general processes of perception and the creation of meanings which determine the individual's capacity to cope' (England, 1986, p. 34). However, in espousing a commonsense approach, England is being neither atheoretical nor anti-theoretical, but argues that 'defined' knowledge is not enough on its own. Professional learning has to be accompanied by, or mediated through, 'personal' knowledge that will inform intuitive knowledge and intuitive behaviour (England, 1986, p. 35). This position is reinforced by Parton (2000). His definition of social work as a practical moral activity involves social workers drawing upon tacit knowledge to inform and make sense of their interventions.

Significant in the development of an evidence base for social work is the work of Scie in trying to elucidate this tacit knowledge. By producing practice overviews and practice guides, resource guides, knowledge reviews, reports and positions papers (all available on the Scie website: [www.scie.org.uk](http://www.scie.org.uk)), Scie promotes good practice by reviewing knowledge to find out what works best and sharing this knowledge with all kinds of people involved in social work.

Other theories contribute to models of how to do social work. Often this theory is developed inductively when researchers or practitioners build up theory from observations of their practice and observation. An example of this is task-centred practice, where a whole new approach to practice was developed after existing practices were observed and new ones introduced and assessed (see Chapter 8). An inductive or constructive approach, that is, building theory from practice and observation is just as, if not more, important as applying theories from elsewhere. As Ayre and Barrett (2003) suggest, the nature of the relationship between theory and practice is not one-dimensional: theory can underpin practice but sometimes it should be the other way round.

In developing a particular approach to practice, a constructive approach, Parton and O'Byrne argue that there has been a failure to articulate and develop concepts and theories for practice. By this they mean 'a range of insights and concepts which had previously been derived from detailed analysis of what goes on between social worker and service user' (2000, p. 7). However, these are, in fact, theories *from* practice. Before considering what that means, we need to recognise that there has also been a development of theories *of* practice.

Knowledge gained from theory exists to inform social workers' understanding, not to dominate it. As England argues, theory is not an end in itself, 'Abstract knowledge in social work, whilst it remains abstract knowledge, is utterly useless' (England, 1986, p. 35). If effective strategies and techniques are recorded and developed, then knowledge is created and can be used to direct others to what is common and regularly occurring in human experience. Some codification of activity enables social workers to evaluate their practice. When social workers evaluate their efforts, be they services to individuals or whole programmes of care, they begin to engage in theory building. Much social work theory derives from someone's experience that has been written down and shared with others. This can be described as theory from practice. However this does not mean that it is unassailable. What it does mean is that everyone's perspective is valuable and, importantly, this recognises the perspectives of users and carers in the development of theory.

But as Stepney and Ford point out, while academics might usefully debate theoretical dilemmas, such as whether truth exists, practitioners can only afford such luxuries if they bring about tangible benefits and lead to positive outcomes (Stepney and Ford, 2000, p. 21). The dilemma for social workers is that there are tasks

to be performed and skills to be utilised, but prescriptions of ‘the what’ and ‘the how’ cannot be constructed in a vacuum. Social workers, to be truly effective, need to be constantly asking ‘why?’ It is in this quest for understandings about, for example, why situations arise, why people react in certain ways and why particular interventions might be utilised, that theory informs practice – and practice can inform theory.

## Organisation of theory

This chapter has made the distinction between theory that is for, of, and from, practice. But this is only one way of examining the growing body of research and scholarship relating to social work. We have made passing reference to the way that Healy explores social work theory. In trying to put social work theory in context she identifies a number of what she calls ‘approaches to knowledge use and development (2005, p. 93). These can be classified as follows:

<i>Ways of using theory</i>	<i>Service discourses and practice purposes</i>
Evidence-based practice	Problem solving
Relective practice	Systems theory
Relexive practice	Strengths perspectives
	Anti-oppressive practice
	Postmodern perspectives

This compares with early attempts to classify or codify, which include Payne (1997) who identifies three strands in his analysis of social work theories:

- Reflexive–therapeutic
- Socialist–collective
- Individualist–reformist

While Howe (1987) suggests that underpinning theory is used by social workers in particular approaches depending on the motivation of the practitioners. Hence he identifies:

- *Functionalists*: otherwise known as ‘fixers’ who want to find solutions to individual problems: to put things right. They are more likely to use psychosocial approaches or behaviourist approaches.
- *Interpretivists*: that is people who are ‘seekers after meaning’ and who are more likely to use client-centred approaches.

- *Radical humanists*: these are practitioners who feel it important to raise consciousness and are likely to use feminist and radical approaches.
- *Radical structuralists*: revolutionaries or those likely to be involved in the ‘guerrilla warfare’ described by Ferguson and Woodward (2009).

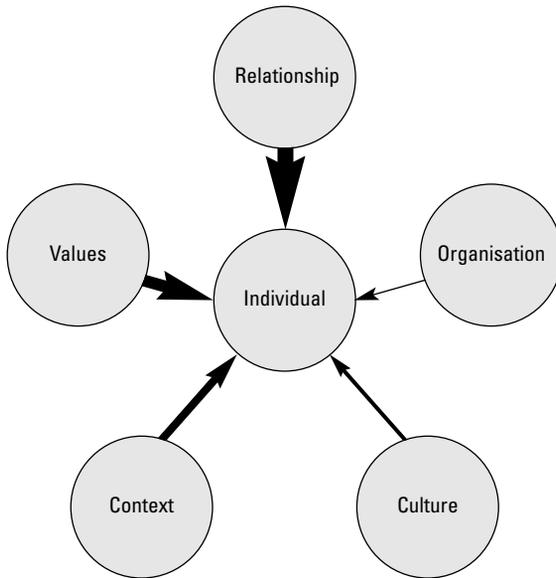
As we proceed through these lists it is apparent that nearly everyone who writes about social work theory and practice comes up with a new model or a new framework. Trevithick has grappled with this and in analysing the various models has developed ten ‘practice choices’ (2005a, pp. 81–5) and, in doing this, she brings together both the knowledge base for social work *and* the importance of applying and using that knowledge in practice.

Accepting that there are many influences on the construction of social work theory, and ultimately practice, can be enormously helpful to practitioners. That there is no one timeless, all-embracing theory for social work, and that social work evolves and reforms according to local and cultural conditions of all social life (Howe, 1994) creates the potential to build theory from practice. More importantly, doing so calls into question who defines relevant theory, or which theories are privileged at any one time.

Social work theory should never become an end in itself; it can be generative offering new insights and perspectives (Parton, 2000). It therefore has to be both interactive and reflexive, and will change in response to practice constructions (Payne, 1997).

## Using theory

Because the discussions so far might seem to lead back to a position of ‘so what?’ or ‘anything goes’, what follows is an attempt to synthesise the many and different approaches that are available to social work practitioners. If reflective practice leads to more and different approaches, then lists soon become redundant. What is needed is some kind of dynamic model to help us understand that good practice does not mean that social workers should be wedded to a particular approach, but that the individual, the person, the service user, must be at the centre of any decision about intervention. As Figure 1.1 illustrates all other factors that are taken into consideration by the worker have to relate to the individual in their particular circumstances.



**Figure 1.1** Social work as dynamic practice

Having said that, the different ‘categories’ for consideration have different levels of importance and significance. Hence the emphasis on the relationship: whatever the particular circumstances of the individual, be they violent offender, child abuser, older person with care needs, a young child or a person with severe learning difficulties, the first responsibility of the social worker is to create a *relationship* to try and understand the situation from the perspective of that person ‘in their situation’. This is a well-worn mantra in social work but one that is fundamental to social work. The *values* that inform practice include acceptance and respect for persons (Plant, 1973) as well as those that inform anti-oppressive and empowering practice (Clifford and Burke, 2009). But that acceptance, that focus on the individual, does not mean that solutions that are found or methods used, have to focus solely on the individual. Each individual exists in *context*. This context might be their position in a particular family, a particular community (whether geographical, religious or institutional, such as a prison or residential establishment). That context will be influenced by the *culture* of the situation, but culture also includes the political and policy contexts that are operating at any one time. This culture impinges on both service users and practitioners. For service users

political ideologies and policies relating to employment, housing, health, welfare benefits, asylum seeking and many other factors will impinge upon their context and their experiences as individuals. For the practitioner the *organisation* is part of their culture. Workers in statutory agencies are bound by particular legislative and policy rules that determine their practice, while those in voluntary and third-sector organisations are influenced by the aims and ideologies of their agency and the resources available.

All of these factors have to be considered by practitioners as part of the reflective practice that informs the processes of social work intervention. This is discussed in more detail in Chapter 5 but the model is presented here to illustrate that the philosophy of this text is not to advocate particular methods or approaches but to ensure that practitioners have a good grounding in the more established social work approaches, can identify what theories underpin them and can make decisions about what approach or combination of approaches is right for this person, in this particular set of circumstances at this particular time – or possibly develop new approaches.

## Conclusion

Professional social work practice requires that workers deploy a wide-ranging repertoire of skills, underpinned by a value base that, among other things, respects others. This will enable them to respond to the diversity of experiences and reactions that are encountered when working with fellow human beings. Skills and values are only meaningful if they are informed by theories. However, as we have seen in this chapter, theory building and theory application require a complex interaction between knowledge and process, challenging notions of who produces knowledge, how it is used and what are the implications for practice.

### Practice focus

Mrs Jones, a woman in her late 70s, was referred to social services because she was becoming unable to care for herself. The brief referral stated that Mrs Jones lives with her husband and grown-up daughter. Her two sons have lived away from home for some years and visit irregularly.

This case provides the minimum information. In thinking about it reflect on the following questions:

- How might you explain what is going on in this situation?
- What should happen now in this situation?
- As a social worker what could you do in this situation?
- Why would you do this?

When you have answered the questions think about what 'theories' you have been using to make assumptions about the situation. Are there other theories that can be applied? Other ways of looking at the situation? Other ways of intervening?

### Putting it into practice

- 1 Identify a piece of your own practice. This might be a case or just one interview. List all the 'assumptions' that you made when dealing with the situation: about the people involved; what was going on; what might happen; what you might do to help those in the situation and so on.
- 2 When you have made the list try to organise it into themes around the kind of theory that has informed your thinking. This might be theory about human development, theory about oppression and discrimination or it might be theory associated with a particular way of intervening.
- 3 You might not always be able to identify specific theories – so ask yourself: 'Where did that idea come from?' and see if that helps you link with any of the ideas in this chapter about the relationship between theory and practice.
- 4 Finally, think about what you have learned from the situation that you have been reflecting on. Do your particular experiences help you understand more? Do they change the way you think about things? Do they challenge what you have read or learned?

This is the beginning of developing theory from your own practice – so now try to write down the one most important thing you have learned about intervening in this situation. You might then want to go to the Scie website to see if you can find out if anyone else has written about or researched this aspect of practice.

## Further resources

Gray, M. and Webb, S.A. (eds) (2009) *Social Work: Theories and Methods*. London: Sage.

An excellent text which covers a range of theories for and of social work. It provides clear explanations of complex theories and how they influence and have been used in practice.

Healy, K. (2005) *Social Work Theories in Context*, Basingstoke. Palgrave Macmillan.

Teater, B. (2010) *An Introduction to Applying Social Work Theories and Methods*. McGraw-Hill: Open University Press.

This text focuses on applying theories in practice.

Trevithick, P. (2005a) 'The knowledge base of social work', in *Social Work Skills: a practice handbook*. Maidenhead: Open University Press.

It explores different ways to think about practice.

Social Care Institute for Excellence (Scie) website:

<http://www.scie.org.uk/>.

Scie provides a rich source of information. It includes knowledge reviews, practice guidance and the electronic library for social care – a gateway to even more resources such as research findings and initiatives such as *Making Research Count*; *Research in Practice* and *Research in Practice for Adults*.

The Institute for Research and Innovation in the Social Services (IRISS, formerly the Scottish Institute for Excellence in Social Work Education SIESWE) website: [www.iriss.org.uk](http://www.iriss.org.uk).

IRISS is a Scottish organisation with a mission similar to Scie. Its mission is to promote positive outcomes for the people who use Scotland's social services by enhancing the capacity and capability of the social services workforce to access and make use of knowledge and research for service innovation and improvement.

The Social Work Action Network (SWAN) <http://www.socialworkfuture.org/> is a radical, campaigning organisation of social work and social care practitioners, students, service users, carers and academics.

Members are united by concern that social work practice is being undermined by managerialism and marketisation, by the

stigmatisation of service users and by welfare cuts and restrictions. They believe that social work is a valuable activity which can help people address the problems and difficulties in their lives which are rooted in the inequalities and oppressions of the modern world and good social work necessarily involves confronting the structural and public causes of private ills.



# Index

- abuse
  - domestic, 34–5, 84, 122
  - elder, 33, 39
  - investigating, 69, 76
  - see also* child abuse; domestic violence
- addictive behaviour, 182–4, 188
  - see also* substance abuse
- advocacy, 19, 46, 54, 57–61, 93, 112, 218, 268
  - and children, 211
  - citizen, 59
  - for people with learning disabilities, 59
  - group, 60
  - self, 59
  - types of, 58–60
- age, 49, 187
- ageism, 53, 119, 122
- assessment, 3, 21–44, 48, 67, 69, 72, 76, 93, 107
  - behavioural, 179–80, 184
  - communication in, 31
  - community care, 218, 219, 220, 22
  - constructivist, 23–4, 115, 123
  - as CORE, 30–2, 40, 41
  - exchange model of, 28
  - of families, 198, 201
  - framework for, 26, 92
  - and information technology, 27
  - models, 29–37
  - multi-professional, 40–1
  - narrative assessment, 29, 30, 38
  - of need, 35–37, 92, 218, 223
  - observation in, 31
  - and oppression, 25, 37–9, 41
  - positivist, 22–3
  - procedural model, 25–6
  - questioning model, 24–5
  - and reflection, 23, 31, 88
  - and review, 94–5
  - single shared, 41, 221–2
  - theories, 22–4
  - user participation in, 28, 38, 39–40, 54, 157
  - see also* risk assessment
- asylum seekers, 82, 138, 198, 261
- attachment, 107, 110–11, 114, 119, 130, 154
  - and grief, 141, 142
- Barclay Committee and Report, 262–4
- Beck, A.T., 181
- behavioural approaches, 129, 161, 239
  - and assessment, 179–80
  - critique of, 186–7
  - techniques of, 180–2
  - see also* cognitive-behaviour therapy
- bereavement, 99, 129, 139–42
  - assessment in palliative care, 146
  - dual process model, 141
  - and loss, 139–40
  - see also* grief
- best value, 92, 94
- care, 38, 117, 224, 231, 263
  - as burden, 228

- care (*cont.*)
  - and just practice, 228–9
  - women and, 230
  - for workers, 165
- care management, 1, 3, 94, 97, 107, 233
  - and community care, 7, 46, 217–20
  - definition, 218
  - process of, 217
  - single shared assessment, 221–8
  - and social work, 217, 219
  - stages of, 228–9
- Care Programme Approach (CPA), 92, 93, 220–1
- carers, 8, 19, 45, 228–9
  - and advocacy, 58, 61, 225
  - in assessment, 27, 29, 36, 58, 222
  - diversity among, 54
  - involvement in review, 94
  - knowledge, 10, 12
  - and oppression, 9
  - women as, 39, 228
- Carers (Recognition and Services) Act (1995), 35, 228
- catastrophes, 142–5
- change, 129, 165, 166, 179, 271–2
  - in cognitive behavioural work, 179, 182–4
  - community development and 265
  - groupwork and, 236–40
  - to practice, 19, 21, 28, 36, 45, 50, 65, 96, 105, 107, 216, 254
  - resistance to, 53, 80, 271
  - in solution-focused approach, 153, 165, 167
  - social work and, 9, 11, 22, 30, 42, 61, 73, 105, 108, 110, 112, 115
  - in society, 113
  - in systems theory, 47–9, 50
  - in task-centred work, 161, 271
- child abuse, 15, 82, 90, 203–4
  - enquiries, 33, 34, 89, 201, 207, 210
- child protection, 207, 208, 210–1
  - assessment, 33
  - panels, 22
  - research, 207, 208
- Children Act (1989), 197, 207
- circular questioning, 74–5, 202
- citizenship, xix, 54, 55, 57, 224
  - and children, 224
- class, 82, 120, 121, 187
- cognitive-behaviour therapy, 129, 175
  - ABC of behaviour, 176–7
  - cognitive learning, 175, 178
  - ethical considerations of, 187
  - growth of, 180–2
  - motivational interviewing, 182–5
  - observational learning, 175, 178
  - operant conditioning, 176–8
  - respondent conditioning, 175–6
  - stages of, 181–2
  - techniques, 179–80
- communication, 22, 31, 66–87, 93, 167
  - barriers to, 81–84
  - with children, 83
  - diversity in, 82
  - in groups, 244, 247
  - in interviews, 67
  - multi-agency, 40
  - power balances in, 81
  - in task-centred practice, 160–2
- community, 225
  - creating, 167, 266
  - in crises, 143
  - definitions of, 254–6
  - and social work, 256–9
- community care, 45–46, 256, 262–5
  - assessment for, 21, 31

- and care management, 7, 46, 216, 217–20
- and empowerment, 56
- stereotyping in, 39, 56
- systems theory and, 49
- Community Care (Direct Payments) Act 1996, 54
- community development, 46, 147, 257–9, 265–6
  - and social work, 265–6
- community social work, 259, 263–4
- community work, 258–9
  - and social work, distinction between, 262–3
  - radical approach, 265, 266
  - tasks and skills, 259–62
- counselling, 48, 107–27, 144, 145, 146, 219
- client-centred (Rogers), 116–22
- couples, 216–19
- definition, 115
- and diversity, 119–22
- and older people, 122
- systematic helping (Egan), 117–19
- uses of, 115–16
- see also* narrative approaches; psychosocial approach
- criminal justice, 7, 10, 33, 35, 55, 75, 94, 119, 178, 182–4, 216
  - and cognitive behavioural therapy, 187–8
  - groups in, 239, 240
  - see also* offenders; probation work
- crisis, 132
  - bereavement and, 139–40
  - concept defined, 128, 129–30, 139, 140
  - coping with, 150–3
  - developmental, 140
  - and diversity, 137
  - major catastrophes, 143–5
  - stages of, 130
  - see also* bereavement; stress
- crisis intervention, 97
  - comparison with task-centred practice, 136, 153–4
  - framework for understanding, 133–5
  - preventive work, 145–6
  - techniques of, 135–7
  - theoretical approaches to, 133
- critical reflection, 8, 24, 29, 90–1, 210
  - in task-centred casework, 158
- direct payments, 50, 54, 55, 218, 224
- disability, 53, 119, 243
  - as loss, 142
  - as tragedy, 139, 223
- Disability Discrimination Act (1995), 78
- Disability Rights Movement, 46, 55, 255
- disasters, 143
  - counselling survivors of, 144–5
- discrimination, 32, 35, 49, 231, 262
  - anti-discriminatory practice, 230, 266
  - see also* stereotyping
- diversity, 5, 40, 82–3, 107, 114, 188, 196, 229, 230
  - in counselling 119–20
  - in crises, 137
  - and personalisation, 226
  - in solution-focused practice, 167
  - in task-centred casework, 162
- domestic violence, 34, 83, 128, 181, 202, 203–4, 199, 211, 212–15, 217, 250
  - and children, 204
  - perpetrator groups, 238
- ecological approach 25, 49
- Egan's model, 71, 117–19

- ego, 134
  - capacity, 113
  - defence mechanisms, 109, 134
  - strengths, 109–10, 135, 142
- eligibility criteria, 37, 51, 70, 220
- empathy, 35, 77, 109, 116, 117, 211, 230
  - empathic intervention, 140
- empowerment, 7, 45, 56–57, 268
  - advocacy and, 46, 59
  - approaches, 50, 51, 169
  - in assessment, 28, 38
  - and community work, 258
  - critical reflection and, 90
  - of families, 207
  - and groups, 241–2
  - and personalisation, 224
  - practice, 15, 58
  - and solution-focused practice, 152
  - and strengths-based
    - perspectives, 164
    - user, 40, 107
- ending social work intervention, 96–100
  - in crisis work, 137,
  - in task-centred work, 158
- ethnic minority service users, 76, 82, 187
  - counselling, 120–1
  - and crises, 138
  - task-centred approach to work with, 163, 170–1
  - see also* discrimination; racism; stereotyping
- experts by experience, 52
- families
  - assessment of dynamics of, 201
  - and children, work with, 206–7
  - and couples, work with, 205–6
  - diversity, 196, 203
  - family violence, 203–4
  - genograms, 199–200
  - group conferences, 207
  - lifecycles of, 196–7
  - networks, 198–201
  - patterns, 197–8
  - support, 208–9
  - as a system, 197
  - working with, 201–2
  - understanding, 205–6
- family therapy, 67, 161, 201–2
  - constructivism in, 202–3
  - feminist critiques of, 203
  - and systems, 202
- feminism, 3, 7, 13, 121
  - on community work, 256
  - critique of family therapy, 203
  - critique of social work, 67
  - and gender differences in
    - counselling, 121–2
  - notion of praxis, 10
  - and psychosocial approach, 113
- 5WH, 73
- Framework of Assessment for Children and Need and their Families, 26, 92
- Freud, Sigmund, psychoanalytic ideas of, 6, 13, 108, 109–10
- gender, 53, 119, 141, 187, 189, 229
  - and counselling, 121–2
  - and crises, 138
  - differences in assessments, 38
  - and roles in families, 203
  - see also* women; men
- Getting It Right for Every Child, 27
- grief
  - criticism of stages, 141
  - reactions, 134, 139
  - stages of, 140
  - see also* bereavement
- groups
  - and change, 236–9

- definition of, 235
  - difficulties of working with, 247–9
  - disclosure and feedback, 237–40
  - empowerment and , 241
  - Johari window in, 238
  - planning, 242–3
  - processes in community work, 260
  - programmes, 239
  - recording, 250
  - roles within, 247–9
  - social worker's tasks in working with, 243–7
  - stages of development of, 243–7
  - types and purposes of, 240–2
- information technology, 95
- and assessment, 27
  - and record-keeping, 96
- Integrated Children's System (ICS), 22
- interpreters (use of), 82–3
- interviewing, 67–76, 199, 216, 253
- children, 82
  - and counselling, 78–80
  - initial interviews, 68–70
  - motivational, 186–8
  - skills in, 72
  - using interpreters, 83
  - see also* questioning
- involuntary clients, 53, 73, 155, 161, 176
- definition, 185
- 'just' practice, 228, 229–31
- Laming Report, 41
- language, xx
- in interviews, 72
  - jargon, 51, 82, 113
  - oppressive, 229
- learning disabilities
- and advocacy, 59
  - and behaviourism, 177
  - normalisation, 187
- listening, 67, 72, 82, 85, 115, 116, 117, 118, 167
- and responding, 76–78
- managerialism, 2, 17, 49, 97, 168, 188
- and criteria, 37
  - and decisions, 98
  - systems for, 53
- market approach, 45, 49, 216
- marketisation, 49
- masculinity, 121
- male behaviour, 132
- men, 138, 139
- and abuse, 203–4
  - and care, 38, 230
  - counselling, 121
  - and grief, 145
  - working with, 203
- mental health, 9, 33, 38, 55, 69, 93, 146, 147, 155, 161
- and advocacy, 60
  - assessments, 32
  - and behaviourism, 176
  - care planning approach in, 54, 92
  - projects, 51
  - and strengths-based approach, 163
  - tribunals, 22
  - work, 138–9
- Munro review of child protection, 91, 207, 210
- multi-professional work, 223
- teamwork, 226–8
  - skills for, 227
- narrative approaches, 39, 107, 122–4
- to assessment, 29

- National Health Services and Community Care Act (1990), 35
- negotiation, 28, 45, 46, 61–62, 94  
 in assessment, 42  
 in care management, 218  
 in reviews, 93  
 and systems theory, 61
- networks, 135, 256, 264  
 in work with families, 198–201
- offenders, 44, 63, 69, 98, 161, 168, 185, 188, 237  
 groups for, 239  
 young, 155  
*see also* criminal justice system; probation work
- older people, 15, 219  
 and advocacy, 59, 60  
 and assessment, 27–8, 31, 32, 221–2  
 and counselling, 122  
 and groups, 242  
 labelling, 57  
 and risk, 122  
 task-centred practice, 167–9, 173  
*see also* age, ageism
- oppression, 9, 10, 196, 226, 231, 262  
 anti-oppressive practice, 230  
 assessments and, 37–39  
 of women, 8, 121
- palliative care, 99, 119, 146
- partnership, 19, 46, 65, 169, 208, 226, 227, 263  
 advocacy and, 19  
 in assessment, 29, 36  
 in families, 209  
 in problem solving, 153, 165  
 with users, *see* service user involvement
- person-centred planning, 54, 221, 223–4  
 and just practice, 231
- personal construct theory (Kelly), 179, 181
- personalisation, 22, 29, 35, 37, 49, 54, 218, 224–6, 262  
 critique of, 226, 263  
 principles of, 225, 266
- planned short-term treatment (PSTT), 154
- post-traumatic stress disorders, 143
- power, 41, 50, 56, 57, 61, 63, 81, 118, 187, 188  
 in communities, 261  
 in families, 202, 203  
 in groups, 241
- probation work, 73, 184–6, 189  
 national standards, 3  
 and NOMS, 216  
*see also* criminal justice system; offenders
- problem solving approach, 48, 97, 128, 152, 153  
 in crises, 135  
 limitations of, 167
- pro-social modelling, 176, 185, 236
- psychosocial approach, 108–14, 174, 179  
 benefits of, 114–15  
 and diversity, 113  
 criticisms of, 112–14  
 framework for understanding, 109  
 techniques of, 112
- quality assurance, 79, 92
- questioning, 72–5  
 in assessment, 24–5  
 avoiding, 75–6  
 circular questioning, 74–5, 202  
 funnelling, 74  
 miracle question, 78, 164

- open questions, 30, 72–3, 117
- probing questions, 73–4
- scaling questions, 165
- race, 53, 56, 119, 141, 187, 189, 205, 229
  - assessments and, 38, 39
  - and crises, 137
- racism, 49, 113, 198
  - anti-racism, 8
  - see also* discrimination; ethnic minorities; race; stereotyping
- radical approach, 5, 7, 13, 55, 114, 258, 265, 266
  - critique, 67, 107, 256
  - and social work, 8, 124
- rational emotive therapy (RET) (Ellis), 179, 181
- record-keeping, 42, 81, 92, 96, 97
  - in assessment, 24
  - in groups, 250
  - computerised, 95, 97
  - use of, 27
- reflective practice, 9–10, 13, 15, 80, 88–91
  - and attachment, 111
  - in communication, 79
  - critical reflection in, 24, 29, 90–1
  - and endings, 99
  - as good practice, 119
  - and reflexive practice, 89
  - in research, 4
- research, 2, 3–4, 6, 7, 12, 41, 54, 55, 99, 147, 272
  - and attachment, 110
  - in assessment, 25, 31, 33
  - and cognitive behavioural work, 184, 185, 188
  - and community care, 219–20
  - evidence-based approach, 3
  - and family work, 206–7, 208
  - into practice, 31, 68, 89, 90, 108
  - service user involvement in, 4
  - and solution-focused work, 165
  - and task-centred approach, 153, 154, 155
- residential care, 15, 30, 38, 63, 99
  - and behaviourism, 177–8
  - older people, 136
  - young people, 179, 180, 190–1
- resilience, 163, 203, 211
  - and families, 211
- review, 35, 72, 80, 91–6, 223
  - Review of Children's Cases (Amendment) Regulations, 2
  - stages of, 94
- rights, 33, 39, 223, 231
  - based approaches, 45, 52, 58
  - for carers, 228
  - of children, 210
  - conferring, 55
- risk assessment, 22, 24, 32–5, 38, 92
  - in probation, 44
- Rogers, Carl, 116–17
- Scotland, 265
  - 21st Century Review of Social Work in, xviii, 51, 91, 216, 265
  - children's panels in, 22, 208
  - Scottish government, xvii
- service user involvement, 4, 9, 13, 37, 45, 50–1, 55, 63, 119, 184
  - and community care, 56, 98, 220
  - and community development, 265
  - as citizens, 45
  - in assessment, 24, 28–30, 38, 39, 54
  - challenges to, 52
  - as experts, 30, 53
  - in personalisation, 224
  - use of knowledge, 10, 53

- service user involvement (*cont.*)
  - in solution-focused approach, 164, 166–7, 169
  - in task-centred practice, 158
  - in reviews, 93
  - as service providers, 46
- sexual orientation, 38, 76, 114, 119, 121, 196, 205, 230
- single shared assessment, 41, 221–3
- social work
  - definitions of, xviii, 169, 210
  - use of relationships in, 14, 105, 111, 114–15, 123, 136, 185, 264
  - task force in England, xix
  - use of technology, 2, 22
- Social Work in Partnership (SWIP) project, 54
- solution-focused practice, xvii, 38, 75, 78, 94, 99, 122, 152, 211
  - assumptions in, 164
  - differences with task-centred approach, 163, 166
  - stages of, 165–6
- stereotyping, 24, 25, 32, 38, 39, 76, 81, 121, 198, 266
  - in community care, 57, 229
  - in multi-professional teams, 227
  - see also* discrimination; ethnic minorities; racism
- stigma/ stigmatising, 18, 35, 69, 167, 226, 266
  - see also* stereotyping
- strengths-based approach, 162, 163–4, 211
  - and person-centred planning, 223
- stress
  - of caring, 229
  - compared with crisis, 132–3
  - see also* crisis
- substance abuse, 155, 161, 174, 209
  - alcohol, 122, 184
  - drugs, 122, 184
- Survivors Speak Out, 68
- systems theory in social work, 46–9, 57, 61
  - and care management, 218
  - and community work, 259, 260
  - with families, 46, 197, 205–6
- task-centred practice, 11, 94, 129, 152–4
  - benefits of, 161–3
  - comparison with crisis intervention, 153–4
  - contracts, 157
  - diversity in, 162
  - framework for, 154
  - limitations, 161–2
  - phases of, 156
  - techniques used in, 156–8
  - theoretical underpinnings, 154–5, 159
- theory, 3–12, 30, 31, 32, 67, 115
  - attachment, 110–12, 119
  - constructing, 91
  - of constructivism, 23–4, 154, 169, 202
  - for crisis intervention, 133
  - for family work, 205–6
  - learning theory, 175–6
  - organisation of, 12
  - postmodern, 8–10, 123
  - psychodynamic, 108
  - social work, use of, 2–5, 77, 89, 101
  - systems theory, 46, 218
  - for task-centred practice, 154–5, 159
  - what is theory, 4–6
- trauma, 128, 143, 144
  - see also* bereavement

- values, social work, 9, 14, 34, 41, 50, 70, 84, 120, 164, 184, 217
  - and good practice, 230
- women, 139
  - as abusers, 38, 117, 122, 203–4
  - and caring, 38, 228, 230
  - and counselling, 121, 122
  - and domestic abuse/violence, 34, 84, 122, 149, 181, 202
  - oppression of, 8, 114, 121, 122
  - see also* gender
- workloads, 95–6
  - management systems, 97

