## Contents

List of figures and tables x
Notes on the contributors xi
Introduction xvii

1 On being critical in social work  Robert Adams, Lena Dominelli and Malcom Payne 1
   Embodying critical practice in social work 1
   What does embodiment entail? 2
   What do we mean by critical practice and criticality? 3
   Critical practice in social perspective 4
   Thinking critically: working with families 4
   Practising critically 7
   Using theories in being critical 9
   The importance of language and understandings 13

### PART 1  Values into practice 17

<table>
<thead>
<tr>
<th>Chapter</th>
<th>Title</th>
<th>Authors</th>
<th>Pages</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>Values in critical practice: contested entities with enduring qualities</td>
<td>Lena Dominelli</td>
<td>19</td>
</tr>
<tr>
<td>3</td>
<td>Professional values and accountabilities</td>
<td>Sarah Banks</td>
<td>32</td>
</tr>
<tr>
<td>4</td>
<td>Identity, individual rights and social justice</td>
<td>Chris Clark</td>
<td>43</td>
</tr>
<tr>
<td>5</td>
<td>Pushing ethical boundaries for children and families</td>
<td>Linda Briskman</td>
<td>51</td>
</tr>
</tbody>
</table>

Introduction 18
Defining values 20
Practising values 25
Values in critical practice 29
The importance of accountability 32
The nature of accountability 33
Accountability and blame 34
Multiple accountabilities 37
Rights and justice in social work 43
Practising rights and justice: five models 45
Critical practice and citizenship 49
Introduction 51
Changing conditions in which social work is managed and practised 51
Social work with children and families in the new era 52
The boundaries of confidentiality 54
The ethics of confidentiality 55
Indigenous children 55
Asylum seekers 58
Interrogating accountability 61
6 Women’s reproductive rights: issues and dilemmas for practice  Lena Dominelli 66
   The social construction of women’s reproductive rights 66
   Choice as central to women’s reproductive rights 67
   Issues for social workers to consider 72

7 Ethical tensions and later life: choice, consent and mental capacity  Robert Adams and Malcolm Payne 77
   Considering choice and consent 77
   Mental capacity legislation: tensions between safeguarding and independence 82
   Self-determination, ethical tensions and resources 85

PART 2 Theories for practice 89

8 Critical reflection and social work theories  Malcolm Payne 91
   Practice theories and critical reflection 91
   Reflective practice 93
   Critical reflection 95
   Using critical reflection with practice theory 98
   Critical reflection on integration and dissent 101
   Theory, the law and the agency 102
   Theory in practice 102

9 Counselling  Helen Cosis Brown 105
   Introduction 105
   Theoretical groupings within counselling 107
   Psychodynamic ideas 108
   Humanistic person-centred ideas 109
   Cognitive-behavioural ideas 109
   Eclectic and integrative approaches 110
   Counselling and social work 111
   Issues 112

10 Groupwork  Dave Ward 115
   Where has all the groupwork gone? 115
   The ‘demethoding’ of social work 116
   Groupwork and work in groups 117
   A continuing need for groupwork 120
   Re-establishing groupwork 121

11 Community work  Marjorie Mayo 125
   The context 126
   ‘Mapping’ community work: definitions and recent history 127
   Community work and social work 128
   Alternative perspectives and implications for practice 129
   Some current issues and dilemmas 134

12 Psychosocial work: an attachment perspective  David Howe 137
   The socialness of self 138
   Internal working models 139
   Attachment behaviour 140
   Assessments 143
   Practice 144

13 Cross-cultural and black perspectives through the life course  Lena Robinson 147
   Inadequacies of Western psychology 148
   Towards a black perspective in psychology 150
<table>
<thead>
<tr>
<th>Chapter</th>
<th>Title</th>
<th>Author(s)</th>
<th>Pages</th>
</tr>
</thead>
<tbody>
<tr>
<td>14</td>
<td>Cognitive-behavioural practice</td>
<td>Katy Cigno</td>
<td>158-160</td>
</tr>
<tr>
<td></td>
<td>The policy context of social work</td>
<td></td>
<td>159</td>
</tr>
<tr>
<td></td>
<td>Cognitive-behavioural practice</td>
<td></td>
<td>160</td>
</tr>
<tr>
<td></td>
<td>Areas of practice and links with effectiveness</td>
<td></td>
<td>162</td>
</tr>
<tr>
<td></td>
<td>Assessment and intervention</td>
<td></td>
<td>163</td>
</tr>
<tr>
<td>15</td>
<td>Task-centred work</td>
<td>Mark Doel</td>
<td>169-174</td>
</tr>
<tr>
<td></td>
<td>Introduction</td>
<td></td>
<td>169</td>
</tr>
<tr>
<td></td>
<td>Task-centred work and other social work ideas</td>
<td></td>
<td>170</td>
</tr>
<tr>
<td></td>
<td>The essence of task-centred work</td>
<td></td>
<td>171</td>
</tr>
<tr>
<td></td>
<td>Issues</td>
<td></td>
<td>174</td>
</tr>
<tr>
<td>16</td>
<td>Advocacy and empowerment</td>
<td>Robert Adams</td>
<td>178-183</td>
</tr>
<tr>
<td></td>
<td>Shared contexts of advocacy and empowerment</td>
<td></td>
<td>178</td>
</tr>
<tr>
<td></td>
<td>The concept of advocacy</td>
<td></td>
<td>179</td>
</tr>
<tr>
<td></td>
<td>The concept of empowerment</td>
<td></td>
<td>181</td>
</tr>
<tr>
<td></td>
<td>The domains of advocacy and empowerment</td>
<td></td>
<td>183</td>
</tr>
<tr>
<td>17</td>
<td>From radical to critical social work: Progressive transformation or mainstream incorporation?</td>
<td>Bob Pease</td>
<td>189-193</td>
</tr>
<tr>
<td></td>
<td>Introduction</td>
<td></td>
<td>189</td>
</tr>
<tr>
<td></td>
<td>The transformation of radical social work</td>
<td></td>
<td>190</td>
</tr>
<tr>
<td></td>
<td>The emergence of critical social work</td>
<td></td>
<td>191</td>
</tr>
<tr>
<td></td>
<td>Postmodernism and critical social work</td>
<td></td>
<td>192</td>
</tr>
<tr>
<td></td>
<td>Facing the challenges in critical social work</td>
<td></td>
<td>193</td>
</tr>
<tr>
<td>18</td>
<td>Feminist social work</td>
<td>Joan Orme</td>
<td>199-206</td>
</tr>
<tr>
<td></td>
<td>Context</td>
<td></td>
<td>200</td>
</tr>
<tr>
<td></td>
<td>Feminist social work practice</td>
<td></td>
<td>201</td>
</tr>
<tr>
<td></td>
<td>Issues</td>
<td></td>
<td>206</td>
</tr>
<tr>
<td>19</td>
<td>Anti-oppressive approaches</td>
<td>Beverley Burke and Philomena Harrison</td>
<td>209-214</td>
</tr>
<tr>
<td></td>
<td>What is anti-oppressive practice?</td>
<td></td>
<td>210</td>
</tr>
<tr>
<td></td>
<td>Theory into practice</td>
<td></td>
<td>214</td>
</tr>
<tr>
<td>20</td>
<td>Postmodern and constructionist approaches to social work</td>
<td>Nigel Parton</td>
<td>220-227</td>
</tr>
<tr>
<td></td>
<td>Social work and the postmodern</td>
<td></td>
<td>222</td>
</tr>
<tr>
<td></td>
<td>The importance of discourse and language</td>
<td></td>
<td>223</td>
</tr>
<tr>
<td></td>
<td>Implications for practice</td>
<td></td>
<td>224</td>
</tr>
<tr>
<td></td>
<td>Constructive social work</td>
<td></td>
<td>227</td>
</tr>
</tbody>
</table>

**PART 3 Developing critical practice**

<table>
<thead>
<tr>
<th>Chapter</th>
<th>Title</th>
<th>Author(s)</th>
<th>Pages</th>
</tr>
</thead>
<tbody>
<tr>
<td>21</td>
<td>Being a critical practitioner</td>
<td>Robert Adams</td>
<td>232-242</td>
</tr>
<tr>
<td></td>
<td>Concepts: being and doing ‘reflective and critical’</td>
<td></td>
<td>233</td>
</tr>
<tr>
<td></td>
<td>Contexts</td>
<td></td>
<td>236</td>
</tr>
<tr>
<td></td>
<td>Perspectives</td>
<td></td>
<td>237</td>
</tr>
<tr>
<td></td>
<td>Process</td>
<td></td>
<td>238</td>
</tr>
<tr>
<td></td>
<td>Reflecting on practice</td>
<td></td>
<td>241</td>
</tr>
<tr>
<td></td>
<td>Putting Schön in perspective</td>
<td></td>
<td>242</td>
</tr>
</tbody>
</table>
Contents

From reflective practitioner to critically reflective practitioner 243
Applications: what it means to practise critically 245

22 Safeguarding children  John Pinkerton
   and John Devaney 249
Values: measuring up to a vision 250
Knowledge: testing working hypotheses 253
Skills: negotiating within a context of inequality 256

23 Fostering and adoption  Helen Cosis Brown 260
Fostering and adoption practice in their current context 260
Recruitment 261
Assessment of carers 262
Matching children and families 262
Training and support of carers 263
Critical application of research to practice 264
Dilemmas and tensions: ‘safer caring’ 267

24 Looked after children and young people in residential and foster care  Alastair Roy,
   Frances Young and Corinne May-Chahal 270
Critical practice in residential care 270
Developing a critical consciousness and reflexive use of the knowledge base 271
Consultation, involvement and rights 274
Organisational context 275

25 Family-based social work  Kate Morris 280
Understanding families 281
The legal and policy frameworks 282
Importance of family connections 285
Family group conferences: an example of whole family approaches 286

26 Youth justice and young offenders  Kevin Haines 293
The politics of juvenile crime 295
Intervention, intervention, intervention 295
New Labour and youth justice 296
The managerialist approach 297
Reconnecting with the past 299
Fundamental principles for positive critical practice 299

27 Safeguarding adults  Hilary Brown 303
Who counts as a vulnerable adult? 304
What is meant by the term ‘abuse’? 305
Different forms of abuse and abusing 306
Why do vulnerable adults need a special framework? 308
What does it mean to ‘safeguard’ a person? 310
Multi-agency working: overlapping but competing concerns 311

28 Care management  Margaret Holloway 315
Social workers or care managers? 315
Issues, dilemmas and potential at the front line 317
A framework for good practice 320

29 Mental health  Di Bailey 325
Exploring encounters with service users 326
Weighing options for intervention within the practice context 328
Making informed judgements: reflection and critical appraisal 329
30 Physical disability  Bob Sapey 336
Disability and social work 336
Challenging practice 337

31 Learning disability  Tim Stainton 346
Constructing difference 346
Defining learning disability 348
Medical, psychological and normalisation approaches 350
Rights, citizenship and self-determination 351

32 Older people  Christian Beech and Mo Ray 356
Policy dilemmas 357
Practice and professional dilemmas 359
The contribution of critical practice 362
Critical action 363
Critical analysis 365
Critical reflexivity 366

33 Care at the end of life and in bereavement  Caroline Currer 368
Critical practice with people who are dying or bereaved 368
Care at the end of life 370
Bereavement 373
Responding to grief: the social work role in relation to bereavement and end-of-life care 375

Concluding comment  Robert Adams, Lena Dominelli and Malcolm Payne 379
Agency and efficacy 379
Changing emphasis: from reflective to critical practice 381
Constructing bridges 384
Managing change and continuity 384
Further practice development: tackling uncertainty, complexity and working across boundaries 385

Bibliography 386
Index 417
In this chapter we introduce the themes that will recur throughout the book – criticality and critical practice. Our purpose is to provide the foundations of knowledge and understanding that will enable you to develop your critical thinking. We use the word ‘client’ throughout, rather than ‘service user’, because we use it as part of our argument about being critical.

Embodying critical practice in social work

We began the first book in this trilogy (Social Work: Themes, Issues and Critical Debates, Adams et al., 2009a, referred to hereafter as Social Work) by providing the intellectual tools to enable you to think critically about social work. In this second book, we move on to enabling you to understand what critical practice entails, know what it feels like, and develop and practise it with skill and confidence.

In this book we provide what you need in order to embody critical practice in yourself. When a social worker sees someone in an interview room, visits a home or goes to a multiprofessional meeting, they embody ‘social work’ within themselves as a person. They represent (that is, present to other people) their own personality and person, which they will use in interpersonal interactions with clients, carers, families, communities and colleagues. They also embody professional social work and the social work agency they represent (that is, act on behalf of), and they bring with them the knowledge, skills and values of social work as part of the person they are. Many of these other people have only the experience of this person, here present, to understand and judge social work by. By being present, practitioners demonstrate commitment, preparedness to engage, thoughtfulness, concern, love, caring and many other things. As they experience this person, people experience social work; often it is their only experience, certainly it is their current experience. Do they think ‘neat’ or ‘busybody’ or ‘another suit’ or ‘one of us’? It is the embodiment of social work in front of them that they judge. Does a doctor or teacher understand what
Critical Practice in Social Work

social work is? It is the knowledge, skill, experience, response that they see used in respond-
ing to their concerns about a patient or student that expands their understanding of the possibilities that social work offers them.

Embodiment brings together these components of understanding, knowledge and skill in practice. They are inseparable; they cannot be separated from each other or the person and personality that represents them. Intellectually, we can separate different areas of knowledge (Pawson et al., 2003), we can identify different ways of thinking about values (Banks, 2006) and a variety of social work skills (Trevithick, 2005). However, when we meet a client or attend a multiprofessional case conference, we embody all these things together, use them simultaneously. Therefore, we have to secure them within ourselves, practising and developing constantly to do so. We do this through critical reflection and practice.

In the chapters in this book, you will have the opportunity to find yourself as a critical practitioner. We provide material that encourages you to incorporate that constellation of aspects examined in Social Work. You can use them as you interact with individuals in settings, organisations and communities. Thus, we go beyond Social Work, intellectually and in terms of understanding.

What does embodiment entail?

Let us examine the notion of ‘embodiment’ further. It involves your taking on the role of social worker in practice, in a particularly exciting and yet somewhat demanding way. In doing so, you become part of the ‘social’ in social work described in Chapter 1 of Social Work. We spell out now what this means in practice. It means that as a social worker, you are governed, first of all, by a code of practice. This is demanding and it does contain an ethical dimension. However, it does not require you to be a ‘saint’ or even a ‘good person’. It does require you to be a ‘good social worker’ and this means a ‘critical’ practitioner, which is what this book is about. In order to be critical, you will have to maintain and represent to others your judgement as an independent professional. You won’t always be liked by the people with whom you work. Sometimes you will need to assert your view. Colleagues may not like this either. You will need to be both understanding and yet detached and the word ‘criticality’ covers both these elements. Becoming part of the social and the critical in social work entails your being partly acceptable – because you embody society’s values and ideals – and partly unacceptable – when you take a critical stance or act as an agent of change – in work with individuals, groups, families, communities, with colleagues in your organisation, or in work with other professionals in other organisations. There are many aspects to this. You could say it comes down to making sure social work – including social care – provides a worthwhile, high-quality service. This brings in the aspects of connectedness, receptiveness and development discussed in Social Work (Chapter 1) as being crucial ingredients of caring.

Sometimes, critical practice will entail taking risks. We examine risk-taking in this book. We develop the notion of calculated risks that we take in everyday life.
CHAPTER 1 On being critical in social work

What do we mean by critical practice and criticality?

In this chapter we shall explore what we mean by these terms ‘critical practice’ and ‘criticality’. Here, to begin with, are some general statements.

Critical practice means something general that we apply to all good social work practice in this book. However, we don’t want to devalue the word ‘critical’ by saying it simply applies everywhere. It starts from being critical as a thinker as well as a practitioner. We do this by applying our judgement to situations and actions. We say whether we view them as right or wrong, a help or a hindrance. We exercise our judgement about whether people are being oppressed. We reach a view about whether the diversity in a situation is appreciated and whether the subordinate viewpoint should be upheld. Often, social work is about upholding the view of the vulnerable person, the person who is seldom heard. We encourage the development and use of critical services, based on critical – this may mean uncomfortable – understandings of the world in which we work and live.

Criticality is a stance that is prepared to consider more than one approach to a person’s problems; reflecting critically entails reviewing different perspectives and options before deciding on ‘best practice’. Sometimes being critical is tantamount to ‘heresy’. This may entail our countenancing the view that is unorthodox, unacceptable to those around us, perhaps on behalf of a minority or excluded individual or group. We may have to advocate ‘heterodoxy’, that is, controversial opinions, ideas and doctrines that don’t agree with the official position (orthodoxy), accepted beliefs and standards.

So, as a ‘critical practitioner’, we are likely to be engaged in the midst of struggle. We may be constantly struggling with our own ideas and those of others about whom we read, or whose worlds we encounter in our practice. This may continue through our work and throughout our life. We may find this a positive, although challenging, experience. It will be about reflection and rethinking, which, in the process, we turn into what is personal and everyday to us. We will be responding to each challenge to accepted orthodoxy, perhaps, by shifting our own views slightly. In a changing world, nobody’s views are likely to stay the same for long. We are not talking about our values here, although we may express these differently at different times as well. We are talking about the constancy of change in our work and in the world. We shift our ideas as we come into contact with other ideas.

‘Critical reflection’ is part of being critical. Reflection isn’t a routine action. No matter how much we reflect, it probably never becomes routine. It involves change. Considering, reconsidering and changing your mind is likely always to be a painful experience. Learning and change go hand in hand. In your social work studies, you will encounter practice teachers, tutors and people who use services. Whenever they feed back views to you, these may be painful. That is the ‘downside’. There is an ‘upside’ to this, namely those moments of enlightenment, or moving forward – the eureka moments, perhaps, when you experience what Mezirow (1983) calls ‘perspective transformation’.
Critical practice is still relevant in social work

Increasingly, social workers and other professionals are asked to follow guidelines and meet national standards. Their agencies are organised to ‘deliver’ through ‘joined-up government’. Of course, every user of social care services wants to be dealt with consistently and gain the benefits from policy and service objectives. If they are being supervised or checked up on through social work’s social policing role, they want to be treated with justice and compassion. However, meeting guidelines, standards and objectives is not simple, because nearly all of them refer to the aims we have to meet. Usually, we have to use our judgement to decide the best way of doing our job.

Furthermore, social work has greater ambitions, because it seeks growth and empowerment as human beings for the people we serve, development and social progress for the communities we work in and greater justice and equality in the societies to which we contribute. It is not that every act of social work will achieve such large goals, but these values help to guide us in using our judgement about what is best. Critical practice helps to implement these values by testing our practice against them.

Critical practice in social perspective

How can we ‘be critical’? And how do we do that ‘in practice’? Glaister (2008: 8) uses the term ‘critical’ to refer to ‘open-minded, reflective approaches that take account of different perspectives, experiences and assumptions’. She sees it partly as a way of managing uncertainty. Thus, critical practice speaks to a contemporary anxiety, because, as Beck (1992) argues, the recent globalisation of economic systems brings previously separated views of the world into contact and potential conflict, raising ambiguity and controversy about what once seemed rational and ordered. Our world seems more unsafe and uncertain than it once did, and we seek mechanisms to help us to control potential risks to our equilibrium. Critical practice gives us a way of organising our thinking and action to respond to uncertainty and risk.

Critical thinking leads to critical action; the two together form critical practice. Inevitably, because critical thinking will use the experience of action and its outcomes to inform further thinking, critical practice is a cycle in which thinking is bound up with action. We see this as part of a reflexive cycle. ‘Reflexivity’ means being in a circular process in which social workers ‘put themselves in the picture’ by thinking and acting with the people they are serving, so that their understandings and actions inevitably are changed by their experiences with others. As part of the same process, they influence and change others and their social worlds.

Thinking critically: working with families

To make a start on how we might think critically in a practice setting, we consider here some ideas about working with families. So many people think that living in families is good that it is a conventional assumption in many societies. Arguments are brought up
CHAPTER 1 On being critical in social work

that it provides for mutual support between a couple, and allows for bringing up children while they are dependent on others. Our approach to critical thinking looks first at the language used, because this helps to test our undisclosed assumptions. The word ‘good’, above, immediately alerts us to the fact that this sentence makes an evaluation. It considers the value that might be attributed to families. Less obvious value words, such as ‘interesting’ or ‘worthwhile’, have a practical feel to them, causing us to miss their value-laden content. Alternatively, the tone may be positive or negative, without any specific value words being present at all. Critical practitioners remain alert to the use of language. This extends beyond values. For example, ‘couple’ and ‘children’ reveal hidden assumptions about families, potentially excluding single-parent and childless families. In the next paragraph, we indicate in square brackets some, but only some, of the language issues that you might consider critically, to remind you that this is a constant issue.

The next stage [one thing after another, rather than all entwined] of critical thinking is to explore [rather than, say, analyse] agenda-setting. In a book, the process of agenda-setting is not interactive, but in the control of one party. In this case, the people in control are us, the authors, but in social work, it is often the agency and its managers or practitioners themselves who are in control of agendas, rather than clients [tone shift from referring to ‘users’]. You might surmise, here, that we picked ‘families’ from a number of possibilities because it will allow us to make our points easily, in a topic that is universal to most human audiences. The critical reader will be thinking: ‘Are there topics where it is not so easy? Do the authors’ arguments work then? Is it really true that families are universal, or are there different forms?’ In social work, you can imagine clients thinking similar things about why your agency is interested in them and what your aims are. Clients may accept or resist [term with historical, intellectual connections to psychoanalysis or with a different meaning to Marxism] the agendas that officials or professionals impose upon them. Whichever it is, the critical social worker will be alert to who is setting the agenda. Mostly, it is more effective [hidden value word] to make agenda-setting interactive and include [hidden value words] clients in the process [tone-setting word implying continuing participation].

Critical practice also includes considering the content of the judgements we make. Here, the content of the judgement is that living in families is good. Obviously, critical points are possible. Thinking reflexively here, we can put ourselves in notional families to interact with the idea. This allows us to see that there are families, and many of them, where there are poor relationships, leading to divorce, for example. Most murders and much violence also take place within family relationships (see Adams et al., 2009c, Ch. 3). So, in social work dealing with families, the critical social worker would want to be careful about making the assumption that the client’s family is of a particular kind, which is more or less acceptable. Clients’ experiences of their families may be anything but ‘good’. Thinking reflexively could also mean that, rather than notional families, we put ourselves in this particular family and imagine what it might feel like to them. Social work often involves using reflexive thinking to generate empathy with the client’s experience in this way. As we work critically, we often find that our professional discourse questions the assumption behind family legislation that maintaining families is a positive
policy objective. We may need to question politicians’ or managers’ assumptions about restoring or maintaining family relationships, in general, or in a particular case. Our own experience of good or bad family life may condition how we respond to what our agency or our clients ask of us. If we are not aware of this, thinking it through and thinking reflexively how our reaction will affect the family we are working with, we are not giving clients the opportunity to participate on equal terms with us.

Critical practice also involves questioning ideology. Thinking does not emerge anew every time we come across a situation. An ideology is a system of thought, often derived from political or moral theories or principles. Ideologies are extensive or even comprehensive in the areas of personal or social action that they cover, so they offer guidance in a wide range of situations. They are logical constructions, built on evidence about the world, but they usually contain an element of belief or faith. Examples of ideologies are Marxism or feminism; religions are also ideologies. The advantage of using ideologies is that their extensive coverage means that we can take a consistent approach to a number of situations. The disadvantage is that, used everyday, an ideology seems so systematic that we forget the elements of belief and value that are integral to its system.

Oversimplifying, we could say that Marxists would see families in capitalist societies as being constituted as they are to meet the needs of the economic system – to reproduce conveniently a compliant workforce. The personal needs of the individuals involved are subordinated to these covert objectives built into society, and that is why there are conflicts and violence in families. As times change, we might identify Marxist interpretations of new situations: for example, how do we see families in newly industrialising societies such as China or India? What is the evidence of changes in the family in previous generations of industrialising societies such as Japan? What do those comparisons say about the UK, which industrialised more than two centuries ago? Feminists might say that social responses to gender differences are more important, and that society assumes patriarchy, control by men, citing the fact that most violence in families is by men against women to lend support to this view. Looking critically at another assumption underlying Marxism, it takes a ‘conflict’ view of society, seeing different groups in society as having opposed interests. Marxism is also ‘materialist’, because it proposes that economic interests, that is, material conditions, have an important impact on people’s lives. An alternative ‘spiritual’ ideology, common in religions, emphasises shared humanity, and many people in Eastern societies would say that this is still important in understanding families there. What might the implications be if such families moved to Western societies?

Picking up on our assumptions, rather than taking them for granted, discloses that our original statement about families represents another contradictory ideology, a ‘functionalist’ view of society. Oversimplifying again, functionalists say that social institutions such as families perform a function in human relationships. The function knits societies together in a social ‘order’ or structure. Our arguments for saying that living in families is good reveal hidden functionalist assumptions. We are assuming that an ordered society is valuable, rather than, say, creative chaos, and that family life contributes to that order, rather than, say, making society inflexible and hidebound.
Although we have simplified and selected from these ideologies, trying to unpick all their implications seems complicated. Therefore, we want to re-emphasise the point that everything we act on includes assumptions that come from these complex ideological systems of thought. This is a helpful way of coping with complexity but, because many of the assumptions that underlie ideologies are taken for granted, we may not be open enough to rethinking them. Working with a client, the critical social worker would put themselves reflexively in the client’s family, asking what views of the value of family life exist in this particular family, and how these views conflict or connect with wider conceptions of family life.

All this seems complicated, so we must justify working in this way. So far, we have emphasised the value of openness and how this contributes to maintaining equality, inclusion and participation between workers and clients.

**Practising critically**

Social work is about action, so critical thinking must lead to critical action. Practising within social work requires three aspects: thinking to inform the practice; the actions we take; and the actions and their consequences that inform continuing critical thinking. There are four aspects of critical practice that take us beyond merely thinking critically:

- Examining the evidence in detail, from different perspectives through reflexive involvement, so that we avoid risk and open up opportunities.
- Contextualising the examination of evidence by placing it explicitly within the context of theoretical and value positions and within the range of other phenomena that might have an impact on the judgements being made. Contextualising is a twin process with reflexiveness: both are about allowing ideas and actions to interact together.
- Developing an overview, so that we and others involved see the full implications of the situation.
- Presenting our judgements to an audience, such as a case conference, clients or their families, or people in the community in ways that may assist, guide or influence their own understanding and evaluation.

The idea of practice contains two partly hidden assumptions:

- The idea of ‘a’ practice implies that what we are doing is in some way an accepted, acknowledged method of doing something, with the authority of convention or evidence of appropriateness or the likelihood of a successful outcome to support it. We says things such as: ‘It is our practice to do it this way.’
- The idea of ‘practice’ conveys that what we do is not, and never will be, final. We are trying it out, on the basis of its authority as an acknowledged form of action, but it is provisional. If we compare it with a musician practising, or an actor rehearsing, we are practising our activity in the way that we intend, not hope, which does not carry
the implication of a planned effort to achieve the outcome we want, but intend that it will improve the situation and improve our ways of acting in such situations.

For an actor or musical performer, practice has two elements: it intends to act on the present, but also it intends to improve similar actions for the future. Every time performers practise or rehearse, they intend to get better for the next time they practise. Eventually, performing in public, they build on the practice to present the best performance possible for them. No final complete achievement of results, therefore, exists. We sometimes sit through a wonderful performance of a piece of music or we are inspired by a striking production of a play. It may seem that nothing could be more perfect. Yet, another recording, another production next year will be a further revelation of what the work contains. This will be the result of practising in two ways. First, more people trying to make things better again and again will produce improvements in technique. Second, practice will build upon past practice but will present it in a new context.

Social work is like that. Workers have general knowledge and skills that they can apply to particular situations. That is why social work theories and training are generic. We can learn what to do in general, and then adapt the ideas and practices to dealing with, say, children’s special needs or practising in groups rather than with individuals. We do this by being reflexive.

**Example**

For example, when we start working with a looked-after child (Chapter 24), we apply theory about anti-oppressive practice and realise that children will often have experience of being oppressed by adults, who may forget to allow children to think things out for themselves and express their own wishes and feelings. The phrase ‘wishes and feelings’ is drawn from the Children Act 1989, which requires us to take young people’s views into account when making decisions. In this way, we take our professional theory and legal knowledge, reflexively, into the situation with the child and use it to help us to put ourselves in the child’s place, rather than being like a ‘typical adult’. We are thinking critically about that way of being. By doing this, we hope that the child will react positively to our approach, and we will be able to gain a better understanding of what they are thinking and planning. This can then influence how we are going to act as a social worker and make what we do more effective, or at least more responsive to the child’s wishes. These perceptions build up, so that after a while, this child comes to see us not as a ‘typical adult’ but a more helpful and responsive person than the general run of adults. We gain experience of how this works for us in our ‘practice’, which is a good basis for more ‘practice’ with other children in the future.
Social work is an improvisation, like jazz, built up during the moments of performance, in the style of the performer, around a theme. Jazz musicians rely on experience and develop a style of responding to the stimulus of a musical theme. They also train their skills, so that they can play in many different ways and respond to many different kinds of themes and varying contexts. All this is exactly what social workers do. One of the frightening things about being a social worker is that we cannot know what situation we will face when we knock on a front door or invite someone into the interview room. However, social workers have developed their knowledge and skills so that they can respond in the best possible way. If they are going to do social work of the best quality, they, like musicians, will take every opportunity to practise. It is not hard to find opportunities, they come with the job. Each time we do something, we have the opportunity to learn from it. Most people are accustomed to keeping information about people to contact, or about services to call on, and many teams carry out projects to build up and share information.

It is possible to do the same with skills. A skill is a capacity that has been developed and trained so that it is more clearly defined, can be used more flexibly and, in social work, can be applied to influence social situations. More widely, skills are practical, they are about how to do things in the best way. Hidden in that sentence, though, is a value statement: an assumption that we know what is best. Also hidden there is the point that using skills implies using knowledge because knowing how to do something does not tell us what to do. These points lead us to the next section, in which we discuss using theory in being critical.

Using theories in being critical

In this chapter, we have emphasised the importance of action. We said that social work is always ‘action’ and that being critical both is and contributes to action. Recognising this emphasis is important, because conventionally people distinguish thinking and acting, in sayings like ‘look before you leap’ or ‘engage your brain before setting off’. Thinking and acting are bound together in social work, through the reflexive cycle. Being critical in social work means being aware of this cycle and alert to how our thinking and others’ ideas affect it.

However, this approach to being critical places great emphasis on reason. That is, we are assuming that the world is an organised or ordered place. If this is so, reasoning skills allow us to think out how to act and have an impact on the world, alongside other human beings such as our clients and colleagues in our team, in the reflexive process of being critical that we have been discussing and modelling. The problem is that, as we noticed when discussing the example of views about families, this is an assumption. It is a commonplace assumption by which we organise our lives, but an assumption nevertheless.

Some social theories set out to challenge this assumption of reason and the ordered nature of the world in various ways. Because of this, they are often referred to as ‘critical social theories’. There are three groups commonly referred to:
Marxism, deriving from the work of Marx in the mid-nineteenth century
the Frankfurt School of sociologists, such as Horkheimer (1978), Adorno (Adorno and Horkheimer, 1979) and Marcuse (1964), who were working from the 1920s and 30s
Habermas (1984, 1987), their modern successor, writing in the late twentieth century.

When many writers discuss being critical, they mean using these theories.

Historically, much social thought depends on the assumption of a fixed social order, often based on important social beliefs, such as religion, and the authority of national leaders, such as the government. When this began to be rejected, rational thinking using the scientific method became important; this is called ‘modernism’. This emphasises that understanding through gaining evidence about the world can make us more effective in dealing with the outside world. Through using such methods in physical science, human beings have achieved considerable control of natural forces. Some sociologists, such as Durkheim (1972) and Weber (Gerth and Mills, 1948), emphasise how understanding the social world enables us to operate more effectively in relation to one another. So, if we understand how social relationships work, we will be able to achieve our objectives in society. In this statement, however, there is an assumption that social relationships exist and can be clarified and understood so that we then can act upon them.

Much social work thinking is modernist in this way, and so also are many critical social theories. It assumes that we may understand what is going on in social relationships through practices such as ‘assessment’. Having assessed a social situation, we can plan to do something about it through activities such as ‘care management’ and thus we may be able to change social relationships for the better (having made a value judgement about what is better), using interpersonal relationships between the social worker and the client.

Critical theories challenge this assumption of the existence of a social order that we may understand, and consequently they lead us to question practices that seem natural parts of it. Marx (1972) argues, for example, that we treat the current, capitalist system of economic theory as natural and given, whereas he sees capitalist societies as using a particular mode of economic organisation that has particular, and in many respects unfortunate, social consequences. Marxists would say that conventional social work practices support and extend the oppressive power of social institutions in capitalist states. For example, people with disabilities often argue that social workers’ assessments of them assume a society in which they are impaired and less than human, rather than acknowledging that much of their disability stems from the way that society is organised for the able-bodied (see Chapter 30 for more discussion of this). The Frankfurt theorists argue that we treat our cultural and ideological heritage as given, whereas these elements of society are crucial elements in how we may be dominated by a capitalist, authoritarian state (for example Horkheimer, 1978). Thus, in social work, we sometimes assume, as we did earlier in this chapter, that cultural ideas such as family or community are fairly universal, whereas there are many different interpretations and uncertainties in them. Habermas (1984, 1987) distinguishes between the ‘system’ and
the ‘lifeworld’, which interact and to some extent conflict with each other. By the system, he means the current mode of capitalist economic organisation, operating through such social structures as government, together with the rational mode of developing knowledge, which has had such benefits for technological and scientific progress. Recently, it also includes transnational companies that have emerged with globalisation, in which economic systems across the world are more closely interdependent, and cultures and political systems have changed to reflect this (Payne and Askeland, 2008). The lifeworld comprises such aspects of the world as education, family life and the media, which operate by a process called ‘communicative reason’, in which moral and social ideas are worked out in a widely shared social debate. The system and the lifeworld develop different ways of viewing and acting on the world through their different forms of reason. We might see social work as part of the lifeworld, interacting uneasily with the system of managerialism in agencies; this is among the themes of Part 3 of this book.

More recently, alternative forms of critical theory have been used as part of critical practice, particularly by Fook and her colleagues: feminism and postmodernism (Fook, 2002; Fook and Gardner, 2007). These are different from the critical social theories associated with Marxism and the Frankfurt School, because they focus on the way in which understanding of the world reflects personal experience and social and historical context. These ideas avoid focusing on social orders that change only slowly and try to explain how people behave. Instead they argue that personal experience constructs and is constructed by the societies in which we live. There are a wide variety of experiences in the world, and by listening to people’s narratives carefully, we can realise that they have different experiences which see the world in different ways. The term ‘narrative’ has a special meaning here: it means an account of a life experience that explains the narrator’s understanding of the world as part of the account. We often hear in political discourse, for example, that politicians need a ‘narrative’ about their policies; this means that their policy should be backed up by an explanation of how the problem arose in society that the policy is trying to solve, and the direction in which the policy is trying to move society. Narratives give direction and explanation to bald accounts of events. So feminists would say, listen to people’s personal experience, have an equal dialogue with them, and you will begin to understand and be able to work with their personal views of the world. That personal view, like a politician’s policy, will include their explanation about how the world came to be as they see it, and what they want to achieve in working with you. Postmodernists say there is a discourse about any social phenomenon: alternative ways of seeing it. These views compete for influence in society. For example, there are a number of ways of understanding teenage binge drinking. It might be a failure of parental socialisation of weak-willed individuals, or an example of commercial pressures to spend money in conventional entertainment, rather than encouraging participation in positive educational experiences in youth clubs, or a legitimate letting off steam in active young people. Different ways of understanding, or combinations of explanation, might lead to different ways of dealing with the problem in a town centre, and helping a young person who has become dependent on alcohol. These discourses go on all the time; by looking for alternative discourses, we can see
alternative ways of acting when we are trying to help an individual or community respond to particular difficulties.

To use these theories for critical purposes in social work is beyond the scope of this book, and would require extensive study of these writers and their modern interpreters and successors. However, we take three points from their ideas.

First, they emphasise social change and the importance of developing collective action to achieve it. Much social thought assumes that there is an identifiable social structure, which we can analyse and describe. What these theories all emphasise is that society does not exist in an unchanging or slowly changing social order, but that it evolves, or may be subject to revolutions, or may be in constant flux that raises the possibility of helpful or unhelpful change. Therefore, we should be concerned with social change and what factors bring it about or act to slow it down. It is a short step from this to being concerned with how human actions can alter social structures. These theories, therefore, place importance on human agency, that is, how human beings may have an impact on the social world in which they live. Much conventional social thought assumes that general social forms have a significant impact on individuals; critical theories emphasise how human beings may act to change general social forms. This produces a very different sort of ‘acting on’ social relationships from the actions of assessment, care management and interpersonal change: it is a form of political agency (Batsleer and Humphries, 2000). That is, critical theory proposes that when we say social work is concerned with action, acting within interpersonal situations is always part of a wider action concerned with broader social forms. Such action is always political in the sense that interpersonal action always has an impact on the interaction of wider groups in society.

Second, critical theory focuses on intentionality. Earlier in this chapter, we stressed that thinking critically in social work leads us to act, not in a haphazard way, but with the intention of creating a planned change. Critical theories suggest that we need to scan the origins of our intent warily for exactly the same hidden value assumptions about how society is or ought to be organised. However, agency implies more than simply movement, but impulsion, towards some intention based on our values and ideologies. So, critical theories are concerned with how our everyday actions are part of continuing streams of either social change or stability. We are part of social movements that form around important ideas, such as environmentalism, feminism and social development. Some critical theorists regard it as crucial that action, intention and social movements are transformational and emancipatory in the way they work. The argument is that social movements transform the way people experience society and emancipate us from the limitations of present economic, cultural and ideological heritage.

Third, the implication for social work, and other intentional actions, of these theoretical ideas is that being critical does not only involve the use of reasoning or thinking in the technical way we have been discussing in the early part of this chapter. Being critical in practical thinking and practice takes place within social movements that are directed towards transforming societies and our intentions therefore need to be formed by our analysis of how societies are changing and might be changed towards greater freedoms for people. Thinking and acting critically therefore needs to be placed within
analyses of how the limitations of social divisions such as class, gender and social assumptions about disability, sexuality and ethnic origin are created within social ideas that appear rational and that we take for granted, but are also changeable and changing. Some critical theorists argue that thinking critically in this way reveals important social movements and enables us to participate in them, pressing them forward.

The importance of language and understandings

Ideas and how they are represented in societies are, therefore, part of the process that creates our intentions. If we want to have an impact on individuals and societies, we must also be aware of ideas and their representation and how they affect the situation within which we are working. This element of critical theories reminds us of the importance of language and how we use it in expressing our understandings about the world. These came out in a pragmatic way as we were looking at thinking critically earlier. They relate to a range of ideas that are particularly in debate at the present time, arising from the work of social constructionist writers such as Shotter (1996) and Gergen (1999). What these writers propose is that our understanding of how societies, and relationships within them, operate is constructed and represented by the language that we use. We saw in the example of thinking about families that the words used revealed assumptions and ideas that we held about families. As with the critical theorists, the argument is that we express social relationships in how we behave and speak about the world. Because we come to share these social relationships through interacting with one another, we take part in a set of conventions about how the world is. Our participation means that we both mould and control and also are moulded and controlled by these ideas.

The implication of these writers for social work is that we can only become free of this control by taking apart these ideas through exploring rigorously the language and the social ideas it represents; this leads to the postmodernist idea of ‘deconstruction’. By operating reflexively in social work processes, we can understand and construct or reconstruct the aspects of life that are causing people problems through developing shared social understandings and structures for action. In our professional role, by becoming reflexively part of a family with debt problems, we can see how destructive the fear of debt may be to relationships. In this way, our understanding and thinking becomes more empathic, reconstructed from a bureaucratic concern with the loss of the house. We can then help the family to explore the consequences of various possible actions. Should they run away? Should they reconstruct all their debts? Social work participation identifies options and priorities and in doing so identifies who might do what. Do we understand with the family that the credit company is oppressive in its policies? Do we confront the family with the perception that they have been unrealistic? Operating reflexively means that we have a better appreciation of what different responses may mean for the family, and what their meanings may imply for practical actions.

Practising critically in the way discussed in this chapter, therefore, moves towards greater freedom by making apparent our assumptions and representations about the
world. A crucial element in this is how social work, its organisation, its language and the practices that it pursues are ideas that mould and control us and our clients as part of ideas that mould and control the social worlds in which we all move. We should not see this as a conspiracy of those in power or as an evil; this is how social worlds operate. Worlds in which people live collectively rather than as individuals inevitably generate collective understandings. It is a characteristic of social interaction that it creates these oppressions and limitations in our interactions with each other.

Conclusion

This chapter has explored some important general features of two important constituents of critical practice: critical thinking and critical action. Part 1 of this book, which concerns values, identifies an extension of critical practice beyond the interpersonal interaction between social workers and clients. Equality treats people equally, and also seeks greater social equality. Openness offers a critical dialogue between people, both clients and colleagues, and offers opportunities for creativity. Making a difference means not only pursuing betterment for clients in their world, but in the wider social worlds that we live in.

Understanding and exploring language, how it is used in interactions and how it forms our views of the world is an essential element in critical practice. Through a process of critical thinking, by interacting reflexively in relationships with others, we can examine agenda-setting, the content of judgements that we make and the ideologies that underlie them. Using these understandings, we can build a critical practice of examining evidence and perspectives in detail, contextualising information, developing an overview and then presenting our thinking effectively to our audiences. As we practise, we develop and refine skills. Part 2 builds on the value base of critical practice to identify how these processes may be applied in a multitude of practice situations. Part 3 extends this to critical management practice and the management contexts of practice.

The theoretical ideas of critical sociology, feminism and postmodernism emphasise that social work must go beyond a technical form of thinking and practice, following guidelines and standard practices to empower people, both colleagues and clients, with political agency to achieve collective and social objectives as well as personal growth. A reflexive focus on language and understanding incorporates within daily practice our wider social objectives, but grounds them in the lived experience of the people with whom we work. Critical theory and critical action thus become participation with intentionality in a critical practice within social work, extending the interpersonal towards the social. It is the value base, practice and management of these processes that the following chapters seek to capture, explore and extend.
For further discussion of critical approaches in social work, see Chapter 8, and for practising critically, see Chapter 21.


Author index

A
AASW 55
Abbott, P. 348
ACHSSW 58
Ackerman, R. 320
Adams, R. xvii, 15, 15, 23, 26,
29, 31, 39, 41, 48, 50, 53, 62,
63, 76, 87, 91, 97, 113, 115, 121,
122, 123, 124, 135, 146, 156,
164, 167, 177, 182, 183, 187,
188, 192, 198, 208, 217, 219,
228, 248, 264, 269, 274, 279,
291, 320, 321, 324, 335,
345, 355, 367, 377, 385
Addington-Hall, J. 372
Adorno, T. 10
Adshhead, L. 370
ADSS 309
Ahmad, B. 21, 22, 154, 177
Ahmed, S. 154, 286
Ainsworth, M.D. 140, 151
Akhtar, S. 271, 275
Aldgate, J. 283
Alexander, C.M. 157
Allain, L. 264
Allan, J. 63, 64, 96, 190, 191,
192, 198
Allan, K. 363, 365
Allen, G. 127, 281
AMA 127
Anderson, B. 297
Andrews, D.A. 120, 162
Andrews, J. 190, 191, 195, 196
Andrews, T. 236
Anwar, M. 154
Arber, S. 383
Argyris, C. 93
Aris, R. 202
Armitage, S. 327
Arnup, K. 29
Askeland, G. 11, 39
Askham, J. 155, 156
Asquith, S. 34, 50
Atkins, S. 338
Atkinson, D. 355
Atkinson, D.R. 113, 114
Audini, B. 327
Audit Commission 296
Australian Broadcasting
Commission 59
Ayre, P. 251

B
Babacan, A. xi
Badham, B. 123
Bailey, D. 325, 328, 335
Bailey, R. 189, 190
Baines, D. 193
Bainham, A. 292
Baker, C. 261
Bakhurst, D. 138
Baldwin, M. 103
Baldwin, N. 275
Balloch, S. 132, 136, 205, 236
Bamford, T. 128
Banks, S. 2, 21, 24, 25, 26, 28, 31,
37, 39, 40, 41, 129, 130, 136
Bannister, A. 257
Bansel, P. 195
Baptiste, J. 21
Barclay Committee 47, 105, 128
Barker, G. 31
Barker, M. 319
Barker, R. 211
Barn, R. 69, 154, 216, 217, 272
Barnoff, L. 196, 197
Bartlett, A. 327
Bartlett, H. 223
Barton, R. 200
BASW 20, 45, 55, 170
Bateman, N. 179, 188
Batsleer, J. 12
Bauld, L. 319
Beadle, S. 226, 227
Beadle-Brown, J. 306, 307
Beardshaw, V. 317
Beardsmore, A. 327
Bebbington, A. 286
Beck, A.T. 161
Beck, U. 4
Belenyk, M. 205
Bell, M. 277
Bender, E.L. 185
Benjamin, E.M. 153
Beresford, P. 133, 156, 182, 217,
370
Berg, I.K. 163
Bernard, M. 367
Berridge, D. 162, 167, 264, 275
Berry, J.W. 148
Bertanees, C. 197
Bhachu, P. 154
Bhat, A. 327
Biehal, N. 111, 112, 162
Biestek, F. 21, 22, 23, 24
Bigby, C. 355
Biggs, S. 317
Bilsen, A. 159
Bindman, J. 327
Blakemore, K. 156
Blaug, R. 278, 279
Blehar, M.C. 140, 151
Blom-Cooper, L. 27
Blyth, E. 71, 74
Boaz, A. 2, 92
BOD 373
Bogdan, R. 348
Boneham, M. 156
Borland, J. 355
Borland, M. 261, 263
Borinat, J. 365
Bottoms, A. 296
Bourn, D. 159, 168
Bourn, D.F. 159
Bowell, T. 95
Bower, M. 107, 113, 255
Bowes, E. 155
Bowlby, J. 139, 151, 373
Bowles, W. 88
Box, C. 286
Boyleen, J. 374
Bracken, P. 273
Brake, M. 189, 190
Brammer, A. 260
Brandon, D. 180, 181, 188
Brandon, M. 141, 146, 151
Brandon, T. 327
Braye, H. 260
Braye, S. 210, 335
Brearley, J. 105, 114
Brenchin, A. 50, 335, 279
Breton, M. 122, 124
Brewer, C. 169
Briskman, L. 51, 55, 56, 58, 59, 60, 62, 63, 64, 96, 190, 191, 192, 198
Brodie, I. 275
Brook, E. 200
Brown, A. 115, 118, 119, 120, 121, 122, 124
Brown, H. 50, 107, 279, 307, 313, 350, 351, 365
Brown, H.C. 262
Brown, L. 291
Brown, P. 47, 296
Brown, S. 297, 298, 300, 302, 414
Brownlee, I. 298
Buckman, R. 371
Bucosky, C. 327
Bullock, R. 163, 277, 286
Bulman, C. 92
BuImer, M. 136
Bunyan, A. 159
Burfoot, A. 70
Burford, G. 286, 287, 290
Burke, B. 23, 191, 192, 194, 210, 217, 235
Burke, P. 162, 165
Burkitt, I. 138
Burns, D. 187
Burns, T. 327
Burton, S. 27
Busia, A.P. 209
Buston, K. 327
Butcher, H. 136
Butler, A. 162
Butler, M. 206
Butler, S. 52, 122, 123
Butler-Sloss, L. 27
Butt, J. 156, 286
Buttny, R. 33, 38, 41
Bytheway, W. 364
Bywater, J. 76

C
Caddick, B. 116, 120
Calhoun, C. 49
Callahan, C. 69
Cambridge, P. 306, 307, 310
Cameron, C. 277
Camilleri, P. 190
Campbell, J. 253, 257
Campbell, J.C. 27
Campbell, M. 162
Campbell, T. 50
Cannan, C. 117, 128, 134, 136
Canvin, K. 327
Carey, M. 316
Carlen, P. 202, 205
Carling, P. 347
Carnaby, S. 307, 310
Carniol, B. 197
Carpenter, J. 327
Carr, H. 260
Carr, S. 185
Carter, R.T. 153
Casas, J.M. 157
Case, S. 298
Cavanagh, K. 201, 206
CCETSW 147, 148
Cemlyn, S. 58, 60
Chadwick, R. 42
Challis, D. 317, 320
Channon, A. 220
Chapillons, L. 162
Chapman, T. 118, 300
Chapman, Y. 238
Charles-Edwards, D. 107, 109
Chesterman, J. 319
Chivvers, R. 159
Chisnall, A. 69
Christie, A. 205
Cigno, K. 159, 162, 163, 165, 167, 168
Clark, C. 34, 50, 221, 316
Clark, C.L. 33, 34, 37, 45, 48, 50
Clarke, H. 204, 281, 285, 287, 291, 292
Clarke, J. 236
Claussens, A.N. 147
Claydon, J. 162
Clifford, D. 219
Clifford, D.J. 210, 211
Clinchy, B.M. 205
Clough, R. 118, 120, 245, 277
Clutton, S. 298
Coates, R. 301
Cochrane, A. 236, 316
Cocker, C. 264
Cocking, R. 147
Cohen, M. 201, 204
Cohen, S. 250
Cole, E. 327
Coleman, R. 327
Coles, B. 300
Collingbridge, M. 88
Collins, B. 207
Collins, S. 244, 327
Commission on Social Justice 49
Compton, B. 19, 23
Connell, R. 190
Connelly, D. 162
Connolly, M. 45
Constantine, M.C. 153
Cooke, D.Y. 153
Cooper, B. 95, 217, 235
Coote, A. 48
Coppock, V. 97
Corbett, J. 245
Corby, B. 254, 255, 259
Cornwall Social Services 304
Cor, C. 371
Corrigan, P. 187, 194
Coulshed, V. 109, 111, 118, 201, 204, 205
Coulthard, L. 324
Cournoyer, B. 19
Cowen, J. 234
Cowburn, M. 119, 120
Cowen, H. 316, 322, 324
Craig, G. 85
Cree, V.E. 92, 201, 206
Crimmens, D. 275, 279
Crinall, K. 204
Crittenden, P.M. 147, 151
Crot, S. 136, 182, 370
Cronin, K. 186, 274
Cross, W.E. 147, 152, 153, 157
Crow, G. 127, 280, 281, 288
CSCI 357, 360
CSIP 328
Cullen, C. 162
Cullen, L. 371, 372
Cummer, E. 156
Currey, C. 370, 371, 373, 375, 377
Curry, M. 314
Curry, S. 88

D
d’Ardenne, P. 113
d’Cruz, H. 212
Dalal, F. 149
Dale, J. 200, 201
Dale, P. 280
Dalley, G. 204
Dalrymple, J. 23, 210, 217, 235
Dalrymple, J. 191, 192, 194
Dance, C. 265
Daniel, B. 206
Darton, R. 317
Dasen, P.R. 148
Dattalo, P. 255
Davies, B. 195, 319
Davies, D. 113, 115
Davies, H.T.O. 160
Davies, M. 200, 280
Davies, R. 236, 371
Davis, A. 200, 330
Davis, G.Y. 153
Dawson, C. 316, 359
DCA 289
DCLG 134
Dean, H. 48, 50
Department for Constitutional Affairs 88
de Jonge, P. 163
De Maria, W. 65
de Shazer, S. 173, 227
De Zulueta, F. 309
DFES 159, 251, 254, 256, 262, 263, 268, 276, 284, 289
DH 25, 49, 111, 116, 159, 163, 203, 254, 260, 262, 263, 264, 269,
Subject index

A
Aboriginal 51
abortion 65, 66, 67, 70
abuse(s) 26, 39, 40, 55, 58, 60, 61, 62, 137, 143, 146, 161, 162, 164, 165, 196, 255
advocacy 44, 52, 53, 55, 56, 58, 63, 178–88, 274, 275, 277
accountability/ies 18, 19, 24, 26, 27, 31, 32–41
activist(s) 54, 58,
Act of Union 1707 1
Act of Union 1800 1
acute unit 316, 317, 318, 321, 323
addictions 163
adoption 53, 66, 212, 213, 216, 218, 260–9
Adoption and Children Act 2002 260, 261
ASSD (adult social services department) 79, 81

adult care 40
adulthood 300
advocacy 178–88
African-American 72, 150, 154
African-Caribbean 153, 314
Afrocentric 21
ageism 361
agency 12, 14, 91, 92, 102, 103
alcohol 11
alcohol related crime 162
alcohol misuse 111, 116, 20
America 155
American 119
American research 160
American Association on Mental Deficiency 348
Anglican (church) 56
anaemia 71
anti-discriminatory practice 122, 125, 364
anti-oppressive social work 122, 170, 190, 191, 194, 209–19
anti-racist 21, 131, 189, 190, 191
Approved Mental Health Professional (AMHP) 332, 333
Approved Social Worker (ASW) 78
artificial feeding 85
artificial insemination by donor (AID) 53, 70
Arthurworrey, Lisa 25
Asian(s) 21, 150, 154
Asian families 154, 156
ASPIRE (assessment) 165
assimilation 55
asylum-seeker(s) 18, 51, 54, 58, 60, 61, 62, 63, 64
<table>
<thead>
<tr>
<th>Subject</th>
<th>Index</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>courts</td>
<td>180</td>
<td></td>
</tr>
<tr>
<td>credit union</td>
<td>179</td>
<td></td>
</tr>
<tr>
<td>Crime and Disorder Act 1998</td>
<td>284, 296</td>
<td></td>
</tr>
<tr>
<td>criminal justice policy</td>
<td>116</td>
<td></td>
</tr>
<tr>
<td>criminal justice system</td>
<td>200</td>
<td></td>
</tr>
<tr>
<td>critical action</td>
<td>4, 7, 12, 14, 235, 362, 363</td>
<td></td>
</tr>
<tr>
<td>critical analysis</td>
<td>235, 362, 365–6</td>
<td></td>
</tr>
<tr>
<td>critical engagement</td>
<td>100–1</td>
<td></td>
</tr>
<tr>
<td>criticality</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>critical thinking</td>
<td>3, 4, 5, 7, 12, 13, 14</td>
<td></td>
</tr>
<tr>
<td>critical practice</td>
<td>1–3, 4, 5, 6, 7, 11, 13, 14, 233–48</td>
<td></td>
</tr>
<tr>
<td>critical processes</td>
<td>97</td>
<td></td>
</tr>
<tr>
<td>critical psychology</td>
<td>196</td>
<td></td>
</tr>
<tr>
<td>critical reflection</td>
<td>3, 91, 92–3, 95, 98, 101, 103</td>
<td></td>
</tr>
<tr>
<td>critical reflexivity</td>
<td>235, 362, 365–6</td>
<td></td>
</tr>
<tr>
<td>critical theory/ies</td>
<td>10, 11, 12, 13, 96, 101, 103</td>
<td></td>
</tr>
<tr>
<td>cross-cultural perspectives</td>
<td>147, 148, 150, 151, 155, 156, 157</td>
<td></td>
</tr>
<tr>
<td>culture(s)</td>
<td>22, 39, 55, 66, 316, 317, 318, 322</td>
<td></td>
</tr>
<tr>
<td>custody</td>
<td>294, 295, 298</td>
<td></td>
</tr>
<tr>
<td>D</td>
<td>Dartington (research)</td>
<td>163</td>
</tr>
<tr>
<td>day care</td>
<td>118, 169, 376</td>
<td></td>
</tr>
<tr>
<td>debt</td>
<td>13</td>
<td></td>
</tr>
<tr>
<td>decision making</td>
<td>137</td>
<td></td>
</tr>
<tr>
<td>deconstruction</td>
<td>12, 93, 96, 97, 98</td>
<td></td>
</tr>
<tr>
<td>dementia</td>
<td>362, 363, 365</td>
<td></td>
</tr>
<tr>
<td>depression</td>
<td>145</td>
<td></td>
</tr>
<tr>
<td>deprofessionalisation</td>
<td>52</td>
<td></td>
</tr>
<tr>
<td>deprofessionalising</td>
<td>316</td>
<td></td>
</tr>
<tr>
<td>detention centres</td>
<td>58–60, 64</td>
<td></td>
</tr>
<tr>
<td>diabetes</td>
<td>356</td>
<td></td>
</tr>
<tr>
<td>dignity</td>
<td>29</td>
<td></td>
</tr>
<tr>
<td>Dignity in Care</td>
<td>311</td>
<td></td>
</tr>
<tr>
<td>disability</td>
<td>168, 181, 203</td>
<td></td>
</tr>
<tr>
<td>Disability Discrimination Act 1995</td>
<td>337</td>
<td></td>
</tr>
<tr>
<td>disabled people</td>
<td>10</td>
<td></td>
</tr>
<tr>
<td>discourse(s)</td>
<td>11, 19, 28, 42, 53, 56, 62, 203, 223–4, 226, 227</td>
<td></td>
</tr>
<tr>
<td>discrimination</td>
<td>33, 127, 130, 132, 135, 176, 210, 214, 219, 375</td>
<td></td>
</tr>
<tr>
<td>discriminatory</td>
<td>113, 125, 130, 132, 135</td>
<td></td>
</tr>
<tr>
<td>disempowerment</td>
<td>212</td>
<td></td>
</tr>
<tr>
<td>dissent</td>
<td>101</td>
<td></td>
</tr>
<tr>
<td>diversion</td>
<td>296</td>
<td></td>
</tr>
<tr>
<td>diversity</td>
<td>204</td>
<td></td>
</tr>
<tr>
<td>DNR (“do not resuscitate”)</td>
<td>83</td>
<td></td>
</tr>
<tr>
<td>doctors</td>
<td>86, 97, 98</td>
<td></td>
</tr>
<tr>
<td>domestic violence</td>
<td>29, 202, 205, 305, 307, 311, 312</td>
<td></td>
</tr>
<tr>
<td>domiciliary services</td>
<td>86</td>
<td></td>
</tr>
<tr>
<td>Down’s Syndrome</td>
<td>349</td>
<td></td>
</tr>
<tr>
<td>drugs misuse</td>
<td>111</td>
<td></td>
</tr>
<tr>
<td>eclecticism</td>
<td>110–11, 112, 113, 114</td>
<td></td>
</tr>
<tr>
<td>emancipation</td>
<td>355</td>
<td></td>
</tr>
<tr>
<td>emancipatory practice</td>
<td>169</td>
<td></td>
</tr>
<tr>
<td>emancipatory research</td>
<td>205</td>
<td></td>
</tr>
<tr>
<td>embodiment</td>
<td>12</td>
<td></td>
</tr>
<tr>
<td>emergency admission</td>
<td>78</td>
<td></td>
</tr>
<tr>
<td>emergency duty</td>
<td>376</td>
<td></td>
</tr>
<tr>
<td>empathy</td>
<td>24, 109, 110, 112, 113, 114</td>
<td></td>
</tr>
<tr>
<td>employer</td>
<td>41</td>
<td></td>
</tr>
<tr>
<td>empower</td>
<td>14</td>
<td></td>
</tr>
<tr>
<td>empowering organisations</td>
<td>185–6</td>
<td></td>
</tr>
<tr>
<td>empowering political systems</td>
<td>186–7</td>
<td></td>
</tr>
<tr>
<td>end-of-life care</td>
<td>368–78</td>
<td></td>
</tr>
<tr>
<td>England</td>
<td>22, 58, 82, 178, 179, 295, 297, 300</td>
<td></td>
</tr>
<tr>
<td>engagement</td>
<td>112</td>
<td></td>
</tr>
<tr>
<td>Enlightenment</td>
<td>221, 222</td>
<td></td>
</tr>
<tr>
<td>epistemology</td>
<td>205</td>
<td></td>
</tr>
<tr>
<td>equality</td>
<td>352, 353, 354</td>
<td></td>
</tr>
<tr>
<td>Equality Act 2006</td>
<td>337</td>
<td></td>
</tr>
<tr>
<td>ethics/al</td>
<td>19, 20, 22, 25, 34, 37, 38, 39, 41, 50, 51, 52, 54, 55, 60, 61, 63, 77–88, 209</td>
<td></td>
</tr>
<tr>
<td>ethnicity</td>
<td>191</td>
<td></td>
</tr>
<tr>
<td>ethnic minority</td>
<td>286</td>
<td></td>
</tr>
<tr>
<td>Euro-American</td>
<td>151</td>
<td></td>
</tr>
<tr>
<td>Eurocentric</td>
<td>119, 148, 152, 155</td>
<td></td>
</tr>
<tr>
<td>Europe</td>
<td>276</td>
<td></td>
</tr>
<tr>
<td>European</td>
<td>147, 148, 149, 150</td>
<td></td>
</tr>
<tr>
<td>Evaluating Community Care for Elderly People (ECCEP)</td>
<td>319, 320</td>
<td></td>
</tr>
<tr>
<td>evaluation</td>
<td>26, 133, 279</td>
<td></td>
</tr>
<tr>
<td>evidence-based practice</td>
<td>195, 300</td>
<td></td>
</tr>
<tr>
<td>excluded groups</td>
<td>122</td>
<td></td>
</tr>
<tr>
<td>exclusion</td>
<td>122, 123, 181, 185, 297, 301</td>
<td></td>
</tr>
<tr>
<td>existential</td>
<td>209</td>
<td></td>
</tr>
<tr>
<td>F</td>
<td>family/lies</td>
<td>2, 4–5, 6, 7, 10, 13, 18, 51, 52, 53, 65, 66, 67, 71, 72, 73, 75, 96, 97, 100, 101, 196, 306, 307, 308, 309, 310, 312, 314</td>
</tr>
<tr>
<td>family-based social work</td>
<td>111, 280–92</td>
<td></td>
</tr>
<tr>
<td>family centres</td>
<td>134, 286</td>
<td></td>
</tr>
<tr>
<td>Family Group Conference(s) (FGC)</td>
<td>286–90</td>
<td></td>
</tr>
<tr>
<td>family support</td>
<td>111</td>
<td></td>
</tr>
<tr>
<td>family therapy</td>
<td>100, 170</td>
<td></td>
</tr>
<tr>
<td>Fanconi’s anaemia</td>
<td>71</td>
<td></td>
</tr>
<tr>
<td>feminism</td>
<td>11, 193, 199–208, 255</td>
<td></td>
</tr>
<tr>
<td>feminist community action</td>
<td>131</td>
<td></td>
</tr>
<tr>
<td>feminist theories/perspectives</td>
<td>92, 101, 102, 250</td>
<td></td>
</tr>
<tr>
<td>feminist social work</td>
<td>189, 190, 191, 198</td>
<td></td>
</tr>
<tr>
<td>feminist(s)</td>
<td>29, 45, 47–8, 50, 99, 199–208</td>
<td></td>
</tr>
<tr>
<td>fertility</td>
<td>68, 69, 73, 74, 75</td>
<td></td>
</tr>
<tr>
<td>fertility treatment</td>
<td>65, 75</td>
<td></td>
</tr>
<tr>
<td>fetus</td>
<td>65, 66, 68, 69, 70</td>
<td></td>
</tr>
<tr>
<td>fieldwork</td>
<td>169</td>
<td></td>
</tr>
<tr>
<td>financial abuse</td>
<td>305, 306, 308, 313</td>
<td></td>
</tr>
<tr>
<td>First Nation(s)</td>
<td>20</td>
<td></td>
</tr>
<tr>
<td>foster homes</td>
<td>69</td>
<td></td>
</tr>
<tr>
<td>fostering</td>
<td>66, 260–9, 270–9</td>
<td></td>
</tr>
<tr>
<td>foster mothers</td>
<td>69</td>
<td></td>
</tr>
<tr>
<td>fragmentation</td>
<td>135, 220</td>
<td></td>
</tr>
<tr>
<td>frail</td>
<td>79, 81, 86</td>
<td></td>
</tr>
<tr>
<td>Frankfurt School</td>
<td>10, 11</td>
<td></td>
</tr>
<tr>
<td>Freedom of Information</td>
<td>59</td>
<td></td>
</tr>
<tr>
<td>Freud, Sigmund</td>
<td>148</td>
<td></td>
</tr>
<tr>
<td>Freudian psychology</td>
<td>138</td>
<td></td>
</tr>
<tr>
<td>friendly society</td>
<td>179</td>
<td></td>
</tr>
<tr>
<td>funeral</td>
<td>370, 372, 376</td>
<td></td>
</tr>
<tr>
<td>G</td>
<td>gay families</td>
<td>52</td>
</tr>
<tr>
<td>gender</td>
<td>189, 190, 191, 196, 197</td>
<td></td>
</tr>
<tr>
<td>General Social Care Council (GSCC)</td>
<td>20, 327</td>
<td></td>
</tr>
<tr>
<td>Geneva Declaration of the Rights of the Child</td>
<td>299</td>
<td></td>
</tr>
<tr>
<td>genuineness</td>
<td>112</td>
<td></td>
</tr>
<tr>
<td>global</td>
<td>44</td>
<td></td>
</tr>
<tr>
<td>globalisation</td>
<td>21, 126, 222</td>
<td></td>
</tr>
<tr>
<td>GP(s) (general practitioner(s))</td>
<td>60, 78, 79, 334, 334, 338</td>
<td></td>
</tr>
<tr>
<td>grief</td>
<td>373, 375, 376, 377</td>
<td></td>
</tr>
<tr>
<td>grief counselling</td>
<td>376</td>
<td></td>
</tr>
<tr>
<td>Griffiths Report (1988)</td>
<td>128</td>
<td></td>
</tr>
<tr>
<td>Group for the Advancement of Psychotherapy and Psychotherapy in Social Work</td>
<td>106</td>
<td></td>
</tr>
<tr>
<td>group(s)</td>
<td>18, 180, 181, 182, 183, 184, 185, 188</td>
<td></td>
</tr>
<tr>
<td>group care</td>
<td>34</td>
<td></td>
</tr>
<tr>
<td>group dynamics</td>
<td>116, 118, 120</td>
<td></td>
</tr>
<tr>
<td>groupwork</td>
<td>115–24, 199, 201, 204</td>
<td></td>
</tr>
<tr>
<td>Gujarati community</td>
<td>22</td>
<td></td>
</tr>
<tr>
<td>H</td>
<td>Healthcare</td>
<td>92</td>
</tr>
<tr>
<td>heterosexual</td>
<td>119</td>
<td></td>
</tr>
<tr>
<td>HIV positive</td>
<td>54</td>
<td></td>
</tr>
<tr>
<td>holistic</td>
<td>23, 319, 321, 322</td>
<td></td>
</tr>
<tr>
<td>home care</td>
<td>317, 318, 319, 324</td>
<td></td>
</tr>
</tbody>
</table>
homelessness 162
homophobia 39
hospice 369, 371
hospitalisation 78
hospital(s) 78, 80, 81, 83, 169, 338, 339
hospital social worker 81, 83
housing 123
human development 109
Human Fertilisation and Embryology Authority 74
Human Rights Act 1998 82
Human Rights Commissioner 59
Human Rights and Equal Opportunity Commission 59
humanism 6, 29
humanistic person-centred 109
human rights 19, 52, 54, 55, 59, 61, 62, 63, 64
hydration 85
I
identity/ies 39, 40, 43, 45, 47, 48, 49, 50, 53, 63, 66, 69, 71, 75, 147, 149, 150, 152–3, 156, 157, 342, 343, 344, 345
identity/ies 6, 7, 12, 49, 75, 98, 250
identity/ies 6, 7, 12, 49, 75, 98, 250
immigration 156
incapable (re mental capacity) 87
incompetent 87
independentism 21
in vitro fertilisation (IVF) 53, 70, 71
inclusion 114, 245
inclusive 63
India 6
Indigenous people 18, 20, 51, 54, 55–8, 61, 62, 63
individualisation 24
individualism/ist 21, 22, 179
inequality/ies 209, 211, 212, 214
infertility 67, 70
insight 161, 168
inspectorates 80
institutional abuse 207, 314
insurance companies 179
integration 100, 101
intelligence quotient (IQ) 348, 349
intermediate care 81
International Association of Schools of Social Work (IASSW) 20
International Federation of Social Workers (IFSW) 20
interpersonal 12
interprofessional practice 367
intervention 163–7, 194, 258
interviewing 109
investigation 39
involvement 78
Ireland 178, 254
J
Japan 6
joined-up government 4
judges 102
Jung, Carl 148
justice see under criminal justice or youth justice
K
knowledge 91, 92, 94, 95, 98, 101, 104
L
law and social work 236
learned helplessness 164–5
learning 39
learning disability/ies 34, 66, 162, 165, 346–55, 373
learning theory 158, 159, 160, 161, 163
leaving care 162
legal advocacy 180
legal framework 282–5
legal requirements 256
legitimacy 97
lesbian families 52
lesbian women 29, 206
liberalism 47, 48, 201
life course, the 147, 156
life skills 168
literacy 165–6
lone parents 206
looked-after children 8, 28, 66, 270–9
M
magistrates 102, 294
management 199, 201, 204, 205
manager 102
managerial 94, 198
managerialism 52, 116, 117, 120, 322
managerialist 51, 279, 297–9, 316
Maori 21
marital 65
marketisation 21, 46, 126, 322
market economy 80
Marxism/Marxist(s) 5–6, 10, 11, 98, 189, 191, 192, 193, 194, 196, 198, 201, 202, 250, 255
masculinist 206
Massachusetts 301
Medical Council on Alcohol 311
medicalisation 70, 75
medicalised 66
Mencap 72
Mental Capacity Act (MCA) 2005 82, 83–5, 87, 180, 358–9
mental health 97, 162, 325–35
mental health assessment 333
Mental Health Act 1983 328
mental health work 111
mental hospital 78
mental illness 97
minority ethnic groups 97
modelling 160, 163
modernisation 317, 324, 326
modernism/ist 10, 21, 192, 193, 193, 222, 223
molester(s) 24
monitoring 133
motivational interviewing 163
motherhood 69, 71, 206
mothering 69, 70
mother(s) 65–9, 71–5, 145, 202, 203
mother and toddler groups 203
multi-agency 311–13
multidisciplinary 99, 102, 256, 316, 325, 326, 327, 330, 332, 334, 335
multiple sclerosis 343
multiprofessional 1, 2, 236
murderer(s) 24
Muslim 22
mutual aid 178, 185
mutual insurance 179
N
NALGO 70
narrative(s) 96, 97, 201, 204
narrative therapy 193
National Coalition of Aboriginal and Torres Strait Islander Social Workers Association 57
National Foster Care Association 267
National Health Service (NHS) 82, 309, 311, 314
National Health Service and Community Care Act 1990 44, 128, 315
National Patient Safety Agency 311
negotiating 112, 133
neoliberal 80, 195
neo-Marxist 129
new authoritarianism 251
New Right 33, 46, 117
New Zealand 21, 74, 197, 254, 287
non-judgemental 21
normalisation 350–1
North America 315
Nurse 83, 84
O
observation 137
Office of the Public Guardian 313
older people 169, 204, 356–67
operant conditioning 110, 160
oppression(s) 22, 33, 202, 209–11, 214–19, 286, 287, 291, 351, 354, 355
oppressive 56, 113, 184
Orkney child abuse inquiry 254
orthodoxy 97
Oxford House 128
P
palliative care 111, 369, 371, 373, 375, 377, 378
paraplegic 337
parents’ rights 38
see also rights
parenting 162, 164
Parliament 70
participation 123, 274, 278, 302
participatory action research 133
partnership(s) 170, 237, 257, 259, 280, 283, 286, 291, 357–8
paternal/ism 40, 88
patient 78, 80, 81, 83, 84, 85
patriarchy 201, 206
Pavlov’s dogs 160
penal institution, young offender 123
People’s Inquiry into Detention 58
performance indicators 277
person-centred theory 111
Personal Social Services Research Unit (PSSRU) 319
personalisation 61, 169, 176, 314
perspective transformation 3, 183
physical abuse 145
physical disability 336–45
planning 112, 183
police 293, 294
poor people 97
positivism 195
post-Fordist 126
postmodern/ity 46, 189, 192, 193, 198, 297
postmodernism/postmodernist 11, 13, 126, 190, 192, 193, 195, 220–9, 237, 255
poststructuralism 126
poverty 72, 202
power 28, 176, 209, 210, 211, 214, 216, 217, 218, 219, 249, 250, 253, 255, 256, 257, 258
practice theories 91–104
praxis 98, 205
pregnancy/ies 66, 67, 68, 69, 70, 72, 73
prevention 283, 284, 285
preventive 357
prisoners’ wives groups 203
prison(s) 119
privacy 52, 53, 55, 59
private agencies 236
private sector 51, 111
privatisation 126
probation 169
probation service 116, 119
protection 52, 53, 58, 59, 60
protest 181
psychiatric hospital 78
psychoanalysis 5
psychodynamic 255
psychologists 60
psychology 61, 109
psychosocial approaches 137–46
psychotherapist(s) 106
psychotherapy 106, 108
public inquiries 53
Q
quality assurance 159
quality of life 166–7, 317, 319, 320, 321, 322, 323
R
race 190, 191, 196, 197
racism 22, 39, 72, 123, 149, 209, 210, 211, 214, 215, 216, 219
RADAR 72
radical/ism 178, 179, 181
radical approaches 100, 101, 102, 189–98
rape crisis 203
rationality 21
reflection 92–5, 98, 99, 100, 101, 103, 183, 366
reflection-in-action 103, 104
reflection-on-action 103, 104
reflective practice 91–6, 100–1, 112–13, 195, 233–48
reflexive 97, 98, 237
reflexive cycle 4, 9, 234
reflexiveness 52, 97
reflexivity 4, 13, 18, 29, 30, 54, 92, 93, 96, 98, 104, 183, 270, 271, 272–4, 275, 276, 278, 279
refugee(s) 52, 54, 59, 60, 61
rehabilitation centre 341
residential home 343
resilience 18, 374, 378
residential centre 341
residential home 343
respecting the person 23, 110
rights 26, 33, 43–7, 49, 50, 346, 348, 350, 351, 352, 353, 354, 355
risk(s) 2, 4, 7, 26, 53, 57, 78, 79, 81, 82, 86, 87, 123, 137, 316, 318, 320, 321, 322, 325, 326, 329, 330, 331, 332, 333, 334, 335, 360–1
risk management 53
Roman Catholic 83
S
safeguarding 80, 82
safeguarding children 249–59
safeguarding adults 303–14
scientific method 109
schizophrenia 145
school 169, 265–6, 293–4, 300, 301
school attendance 161
Scotland 71, 178
Seebohm Committee (1968) 128
seldom heard person 3
self, the 138
self-acceptance 112
self-actualisation 109
self-advocacy 180, 183
self-determination 21, 23–4, 28, 77, 85–6, 88, 347, 351, 352, 353
self-harm 332–3
self-help 127, 129, 130, 132, 133, 135, 178, 179, 185, 203
self-help groups 121
self-identity 372
self-knowledge 112
sentence(s) 296, 301
sentencing 296
service user see user
sex abusers 119, 120
sex offender(s) 22, 24, 26, 27, 30
Sex Offenders Act 1997 28
sexism 72, 123
sexual agents 68
sexual fulfilment 68
sexual health 68
sexual liberation 68
sexual orientation 74
sexuality 65, 76, 191, 196, 197, 219
single assessment process (SAP) 358
single-parent families 52
skills 9, 36
Social Care Institute for Excellence (SCIE) 254
social casework 169
social construction/ism 20, 195
social democratic 45–6
social inequality 97
social justice 19, 26, 193
social learning theory 110
social model of disability 336, 345
socialness 138
social work 108
social role valorisation 350, 355
social skills 162, 163, 167
social work education 201
social work with black families 154–5
social work with older black people 144–6
socialist 201
sociocultural 67
solution-focused 193
Somalia 356
specialisation 116
special school 341
sperm donation 70
spiritual 6
statutory agencies 236
statutory sector 133
stigmatisation 181
strengths perspective 193
stress 236
subjectivity 48
substance misuse 162
suicide 78
supervision 39, 123, 137
supervisor 39, 93, 94
surrogacy 73–5
surrogate 70, 72–4
systemic abuse 60
systems, accountability to 171
systems approaches 170, 176
systems theory 100, 170, 175, 193

T
task-centred work 98, 100, 102, 169–77
team manager 35, 38
Thatcherite 117
therapeutic approach 61
therapy 169, 171
Torres Strait Islander 51
torture 59
Toynbee Hall 128
transformational perspective 129
transformational social work 61
transition 361–2
transparency 51–3, 55, 57, 60, 62
Triangle 74
trust 28
‘tug-of-love’ 72

U
UK Race Relations (Amendment) Act 2000 275
uncertainty 20, 30, 220, 222, 225, 228, 233, 236, 240, 242, 244, 272, 273, 274, 278, 362, 363
unemployment 340
UNISON 70
United Nations 58
Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment 59
United Nations Standard Minimum Rules for the Administration of Juvenile Justice 299
United States (US) 55, 147, 148, 149, 150, 153, 155, 190, 251, 348
Uniting (church) 56
unwisdom 83
user-led groups 185
user participation 181, 182, 186, 188
users, research 163
users of services 199, 200, 201, 203, 204, 206, 207, 208

V
values 18–30, 327, 328, 335
Victoria (Australia) 56
Victorian values 179
voluntary action 121
voluntary agencies 169, 236
voluntary sector 111, 118, 133
volunteering 133
vulnerability 303, 307, 309, 310
vulnerable 3, 33, 77, 79, 82, 86, 184, 303–8, 309–13

W
Wales 82, 178, 295, 297, 300
welfare rights 123
welfare state(s) 45–7, 195, 202
Wells, Holly 251
Western 20, 21, 43, 52, 62, 63, 148, 150, 220
Western psychology 148
women-centred practice 200
women’s refuges 203
Women’s Global Network for Reproductive Rights 76
women’s reproductive rights 18, 28, 65–76
Woomera detention centre 60
World Health Organisation 349

Y
young offenders 163, 293–302
youth club(s) 11
youth court 294
youth justice 293–302
Youth Justice Board (YJB) 297, 298, 299, 301, 302
Youth Offending Team (YOS) 293, 294